



**City of Fort Oglethorpe
Building Department
500 City Hall Drive
Fort Oglethorpe, Georgia 30742
706-866-2544 ext. 1201**

FIRE ALARM PERMIT APPLICATION

Please Print Legibly

1. **APPLICANT:** _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

2. **Alarm Site Business Name:** _____
Address: _____

3. **Alarm Company:** _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
Georgia Business License # _____

4. **Property Owner (if different from applicant):** _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

5. **Contractor Name:** _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
Georgia License # _____
Signature: _____

6. **Project Cost:** \$ _____

7. **Describe Work:**

The contractor is responsible for all work to be in compliance with state codes and ordinances, whether or not any deficiency is found by the Inspection Department or known to exist by the Inspection Department.

Applicant Signature: _____ Date: _____

Building Dept. Approval: _____ Date: _____