



Pinetop Fire District Prevention
Division 1845 S. Pine Lake Road
Pinetop, AZ
85935
928-367-2199
cberlin@pinetopfire.com

Pinetop Fire District Use Only
Date Submitted:
Date Fee Received:
Amount Received:
Plans Reviewed By:
Permit Number:

Commercial Building Application

New Construction **Demo** **Addition** **Alteration** **Tenant Improvement**

PRIMARY CONTACT FOR THIS PROJECT:		Cell Phone:	Town/County Permit #
Job Site Address:		Pinetop	AZ
<i>Street # and Name</i>		<i>Suite #</i>	85935
Email:		Property APN:	
Business Name: (Where work is taking place)			
Complex Name: (Where work is taking place)			
Scope of Work:			

OWNER INFORMATION		CONTRACTOR INFORMATION	
Owner Name:		Contractor Name:	
Address: <i>Please use City, State, Zip</i>		Address: <i>Please use City, State, Zip</i>	
Cell Phone:		Cell Phone:	
E-mail:		E-mail:	

BUILDING INFORMATION			
Number of Stories:	<u>Current</u> Building/Tenant Sq. Footage:	Proposed <u>added</u> Sq. Footage:	
Total sq. Footage after addition			
Vacant Site: <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Alarm: <input type="checkbox"/> Yes <input type="checkbox"/> No	Fire Sprinklers: <input type="checkbox"/> Yes <input type="checkbox"/> No	Kitchen Hood Suppression System: <input type="checkbox"/> Yes <input type="checkbox"/> No
Does this property contain any of these fire suppression systems?			
Please describe, in detail the type of proposed business activity:			
Prior to this proposal, what type of business activity was conducted at this location?			

Person submitting application is the:

Business Owner: Property Manager: Other:

If other, what is your relationship to this business? _____

Print Name

Today's Date