## **Application for Permit Request for Service**

## **Kings County Fire Department**



280 N. Campus Drive, Hanford, CA 93230 Telephone (559) 852-2885 ~ Fax (559) 582-8261 Website: http://countyofkings.com/fire-prevention

Email: Blake.Adney@co.kings.ca.us



Date:	To be completed by permit Applicant (PLEASE TYPE)			
Project Name: Project Street Address:				
City:				
☐ Fire Alarm# of Devices ☐ LPG Tank(s)# of tanks ☐ Mobile Food Vendor	☐ Hood Suppression Fire Protection Systems ☐ Spray Booth spraying & dipping ☐ Plan Review	□ Automatic Sprinkle Remodel □ or New □ □ Tents/Canopies complete Tent Handou □ Knox Box	# of tanks   Explosives	☐ Flow Test  Name of Water District:  Contact # for Water District:
Description of project:				
If additional space is needed please attach to this Application				
Will any hazardous materials be stored:				
If yes, include a	list of containers and o	quantities:		
Applicant		Customer/Applic	ant information	
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Name:			Phone #	t:
Contractor/			Phone #	
Contractor/ Company:			Phone #	
Contractor/			Phone #	
Contractor/ Company: Contractor			Phone #	
Contractor/ Company: Contractor Mailing Address: City:			Phone #	
Contractor/ Company: Contractor Mailing Address: City: Contractor			Phone #	<u>.</u>
Contractor/ Company: Contractor Mailing Address: City: Contractor License #:			Phone #	<u>.</u>
Contractor/ Company: Contractor Mailing Address: City: Contractor		Class: _	Phone # Phone #  State:  Fax #:	<u>.</u>
Contractor/ Company: Contractor Mailing Address: City: Contractor License #: Contact		Class: _	Phone # Phone #  State: Fax #: Cell #:	<u>.</u>
Contractor/ Company: Contractor Mailing Address: City: Contractor License #: Contact Person: Email Address:	may be submitted in persor  Department  ve	Class: _	Phone # Phone #  State: Fax #: Cell #:  Visa and Mast	erCard Accepted to: Kings County Fire Department

Signature