

Section C: Alteration/Repair to Existing Fire Alarm Systems:

FA State ID #: F-_____ VT Inspection sticker #: _____

Name of System _____ System Model: _____
 Manufacturer:: _____

Existing violations: _____ Last Tested By: _____ Date: _____

- Please print clearly and give description of the alteration or repair being performed, use separate sheet if necessary

Section D: , Project Valuation and Permit Fee: Complete for all permits. Make check payable to the **City of South Burlington** and include with this application.

I, _____ certify that the total valuation of the construction work is as follows:
 (Applicant's Name)

Fire Alarm System Permit Fees			
System Design	Costs	Fee Schedule	Fee summation
** NFPA-72 Compliant FA System		Cost X \$ 0.031	
Electrical		Cost X \$ 0.031	
Consulting		Cost X \$ 0.031	
Underground		Cost X \$ 0.031	
Other		Cost X \$ 0.031	
Total		Fee schedule total	

Applicant's Company Name: _____

Contact Person: _____ Position: _____

Address: _____

City: _____ State: Zip: _____ E-mail: _____

Phone Number: _____ Fax: _____

I hereby certify that the information contained within this application is correct and accurate.

Signature of Applicant: _____ **Date:** _____