



**CITY OF STAUNTON
VIRGINIA
FIRE MARSHAL'S OFFICE**

302 Grubert Avenue, Station 2
Staunton, Virginia 24401
(540) 332-3720 Fax (540) 332-3719



APPLICATION FOR FIRE PREVENTION CODE PERMIT

Date

Applicants Name: _____ Phone (Day): _____

Address: _____ Phone (Evening): _____

City: _____ State: ___ Zip: _____ Phone (Other): _____

Operation Start Date: _____ Operation End Date: _____

Site Name: _____ Phone: _____

Address: _____

Owner/Manager: _____ Phone: _____

Application is hereby made by the undersigned for a PERMIT to conduct the following:

I HEREBY ACKNOWLEDGE that the information contained herein, and DECLARE that it be true and correct, to the best of my knowledge and belief. Further, I am the OWNER/OPERATOR, or a duly authorized AGENT acting on behalf of the OWNER, for all activities at the above referenced property or location. As such, I hereby agree to comply fully with all requirements Virginia Statewide Fire Prevention Code and the City of Staunton Fire Prevention Code governing the operation I wish to conduct.

Signature of Applicant: _____ Date: _____

FOR OFFICE USE ONLY

Site Inspection Date _____ Date Issued _____ Expiration Date _____

Application: ___ Approved ___ Disapproved By: _____ Date: _____
Fire Official

Application Fee Paid? ___ Yes ___ No Type of Payment: _____

Comments/Conditions: _____

