Palm Beach County Fire Rescue
Plans Review Application

No. _____

FP# _____ Permit# _____

To be Completed by the Applicant

The Undersigned Hereby Applies for Plans to be Reviewed for Compliance with the Current Edition of the Florida Fire Prevention Code and PBCFR Local Amendments to this Code.

Project Name: _____

Project Address: _____

City/Town: _____

_____ Alteration	_____ Fire Sprinkler	_____ Interior
_____ Civil	_____ Fire Suppression	_____ LP Gas
_____ Commercial	_____ Fuel Tanks/Lines	_____ Multiple Dwelling
_____ Construction	_____ Hood System	_____ Revise
_____ Fire Alarm	_____ HVAC	_____ Other _____

Name of Owner or Engineer _____ Address of Owner or Engineer _____

Name of Contractor _____ Address of Contractor _____

Applicant / Contact Name (Print) _____ Application Date _____

Contact Number _____ Fax Number _____ $ _____ Valuation of Proposed Project

For Office Use Only Palm Beach County Fire Rescue

Fire Review Fee	Voucher	Check#	MSTU	
$		Date Recv'd		Fire Dept. Official

Make Checks Payable to "BCCPBC" or "Board of County Commissioner's Palm Beach County"