

City of De Pere
335 S. Broadway
De Pere, WI 54115
(920) 339-4053
dpbldg@deperewi.gov



**FIRE SPRINKLER SYSTEMS
PERMIT
Application and Record**

Permit #: _____
Fee: _____
Receipt #: _____
Date: _____

PROJECT LOCATION

Owner/Contractor Name:

Address:

Contact Name:

Phone #:

E-mail:

Parcel #:

Lot #:

SPRINKLER CONTRACTOR

Company Name:

Address:

Contact Name:

Phone #:

E-mail:

State License Number:

Expiration Date:

PROJECT INFORMATION

New System(s): Number of Heads _____ Number of Risers/Supplies _____
Fire Pump? ☐ Yes ☐ No Number of Standpipe Systems _____
Modification to Existing System(s): Number of Risers Added _____
Number of Heads added, deleted, or relocated _____

Permit Fees: \$380.00
+ _____ (# of risers x \$80.00 per riser)
Total Fees Due: _____

Reg. Ob. State Plan Approval # _____
☐ Rough Inspection _____
☐ Final Inspection _____

Note: Submittals for review need to include digital (pdf) and four copies of state approved plans, specifications, and applicable calculations.

Both the drawings and specifications must include specific design criteria and hazard classification information. (1) If a fire pump is required, the need for reduced voltage/soft start and emergency/automatic transfer switch must be coordinated with electrical consultant. (2) All power and alarm requirements must be coordinated with electrical inspector. (3) The local Building Inspection Division shall be contacted for additional requirements. The Fire Department connection shall be a 5" Storz fitting in a location acceptable to the Fire Department.

APPLICANT'S STATEMENT

I certify that the information provided on this form is complete and accurate and hereby agree to comply with all applicable statutes of the State of Wisconsin and ordinances of the City of De Pere, Wisconsin. I further understand that the issuance of this permit creates no legal liability, express or implied, on the City of De Pere, Wisconsin.

Signature: _____

Date: _____

PERMIT APPROVAL

Upon signature of an authorized member of the Building Inspection Division, this becomes a permit to conduct the above described work in accordance with all existing laws, ordinances, and regulations.

Inspector: _____

Date: _____ Certification #: _____