# CITY OF SPRINGFIELD, OREGON

## FIRE CONSTRUCTION PERMIT APPLICATION

**PERMIT NUMBER:** _____ **DATE:** _____

Choose 1

- ☐ Commercial / Industrial
- ☐ Multi Family
- ☐ 1 & 2 Family Dwelling

Choose 1

- ☐ Addition/Alteration/Replacement
- ☐ New Construction
- ☐ Tenant Improvement
- ☐ Demolition

Choose 1

- ☐ Tanks
- ☐ Other
- ☐ Fire Sprinkler/Suppression
- ☐ Fire Alarm
- ☐ Kitchen Hood Suppression

Jobsite Address: _____ Bldg./Ste No.: _____

Assessor's Map & Tax Lot Numbers: _____

Project Name: _____

Description of Work / Locations on Premises / Special Conditions: _____

_____

**TANK INSTALLATION / REMOVAL** ☐ **Removal** ☐ **Installation**

☐ Manifolded ☐ Secondary Containment ☐ Diesel ☐ Gasoline ☐ LP-Gas

Tank ID: _____ Size/gal: _____ Construction Material: _____

## CONTRACTOR INFORMATION

Contractor Name: _____ Oregon CCB#: _____

Address: _____

Contact Person: _____

Email Address: _____

Phone: _____ Main Office Phone: _____

**Job/Contract Value:** $_____ ******City will not accept application without job value***

## PROPERTY OWNER INFORMATION

Property Owner Name: _____ Phone: _____

Mailing Address: _____ City, State, Zip: _____

**City of Springfield Building & Development Center**
255 5th St., Springfield, OR 97477 541-726-3753
PermitCenter@springfield-or.gov Online at BuildingPermits.Oregon.gov