



SEDGWICK COUNTY FIRE DISTRICT NUMBER 1

Administrative Office: 7750 N. Wyandotte Way, Park City, KS 67147
Phone (316) 660-3473 • **Fax** (316) 660-3474 • **SEDGWICKCOUNTY.ORG/FIRE**

SPRAY FINISH SYSTEM INSTALLATION APPLICATION

Tenant/Business Name: _____

Job Site/ Property Address: _____ **City:** _____

Business Owner Name: _____ **Phone:** _____

Installing Contractor: _____ **License #:** _____

E-Mail: _____ **Phone:** _____

Installation Type: New: _____ Additional: _____ Retrofit: _____

Brand name / Model being installed: _____

Description of work to be done: _____

I hereby acknowledge that I have read this application and state that the above information is correct. I agree to comply with the Fire Code requirements adopted by Sedgwick County, the requirements contained in the National Fire Protection Association Standards and the manufactures recommended installation instructions. I understand that I must contact the Sedgwick County Fire Department at least 2 working days in advance to schedule an acceptance test. I further understand that if a re-inspection test of the system is needed due to a failure of the initial test, a \$200 re-inspection fee may be assessed.

Installing Contractor Signature: _____ **Date:** _____

Received by: _____ **Date:** _____ **Check No.:** _____

Permit Fee Due: \$75.00 per system