



# CITY OF PANAMA CITY BEACH

Building and Planning Department

Fire Rescue Inspections Division

## FIRE LIFE SAFETY INSPECTION PERMIT WORKSHEET



Code in effect 8th Edition Florida Building Code (2023), 8th Edition Florida Fire Prevention Code

### Property Information

Site Address: \_\_\_\_\_ Suite/Unit: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Parcel ID: \_\_\_\_\_ # of Floors: \_\_\_\_\_ Sq. Ft. \_\_\_\_\_

Owner Name: \_\_\_\_\_ Owner Phone Number: \_\_\_\_\_

Business Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email address for contact / payment invoice: \_\_\_\_\_

Current Occupancy Type: \_\_\_\_\_ Changing to: \_\_\_\_\_  No Change

Describe Use of Space: \_\_\_\_\_ Occupancy Load: \_\_\_\_\_

### Project and Construction Information

New Construction  Existing Structure - No construction  Interior Renovation  Change of Occupancy

*If new construction or renovation:*

Project Name: \_\_\_\_\_ Master Permit #: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

License Holder Name: \_\_\_\_\_ License Number: \_\_\_\_\_

### Fire Safety Systems

Does/Will the building have a Fire Alarm System?  Yes  No

Does/Will the building have an Automatic Fire Sprinkler System?  Yes  No

Does/Will the building have a Hood Suppression System?  Yes  No

What systems are monitored by an Alarm Company?

Fire Alarm  Automatic Fire Sprinkler System  Hood Suppression System  None

Note: All Life Safety equipment and devices installed must have current inspection tags by a licensed Fire Alarm/ Fire Suppression/ Fire Extinguisher contractor. Exit signs and Emergency lights must have working back up battery when testing. Fire Extinguishers should be mounted on hanging bracket and not sitting on floor or shelf and be clearly visible and easily accessible to building occupants. Address posted on building with 6" numbers.

\*Change of Occupancy may require additional Life Safety features to meet current code requirements outlined in the Florida Fire Prevention Code and the Florida Building Code.

**I understand all REQUIRED INSPECTIONS will be requested of the work permitted herein. Compliance will be strictly enforced. This permit is VOID after six (6) months from issuance unless the work it covers has been commenced and has had ongoing approved inspections. The Building / Fire Official may revoke this permit or remove service, in such case as there has been any false statement or misrepresentation as to the material fact in the application or plans upon which this permit was based.**

Print Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner  Business Owner  Contractor  Authorized Agent