

NASSAU COUNTY FIRE COMMISSION OFFICE OF FIRE MARSHAL

1194 PROSPECT AVENUE WESTBURY, NEW YORK 11590 516 - 573 - 9900

MAKE CHECK PAYABLE TO:

"NASSAU COUNTY TREASURER" APPLICATION FOR FIRE ALARM PERMIT TYPE OF APPLICATION New Amendment **ALARM SYSTEM LOCATION** Residential Name Multiple (1 or 2 Family) Residence Apt/Suite Address Office Mercantile Post Office Zip Code Industrial Storage Public Phone ___ Village Institutional Assembly Closest Intersections 1: **Educational Facility** Special Information (Guard Dogs, Directions, Hazardous Materials, Invalids, etc.): **CENTRAL STATION INFORMATION** Name Phone City, St, Zip Address **ALARM INSTALLER INFORMATION** Name FM Company No.: NYS Unique ID No.: Address NYS Unique ID Expiration Date: City, St., Zip System Installation System Maintenance System Monitoring System Inspection INSTALLING COMPANY CERTIFICATION NYS License Qualifier NYS Licensed Company Name Signature certify that the above proposed or existing system does or will comply with all Nassau County, New York State and Local Ordinances, codes and regulations, I also certify that before installing the above system all required plans and fees have been submitted to the Fire Marshal, and a set of the approved plans are on site of the installation. I also certify that a copy of this permit application will be conspicuously affixed at the fire alarm control panel or its proposed location at the premises prior to commencing of and during installation of any part of the system. FIRE MARSHAL USE ONLY Check No.: Receipt No.: FOA No.: FD No.: FD Name: FD Alarm No:

Permit No.:

Location ID No.: