



**FLOWER MOUND FIRE DEPARTMENT**  
**3838 FORUMS DRIVE**  
**FLOWER MOUND, TEXAS 75028**  
**972-874-6270**



**Permit Application**  
**Installation of Mechanical Hood or Hood Fire Extinguishing System**

Print or Type

**JOB ADDRESS:** \_\_\_\_\_

**BUSINESS OR PROJECT NAME** \_\_\_\_\_

**CONTRACTOR OR COMPANY NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **CITY/STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**BUSINESS PHONE # (\_\_\_\_) \_\_\_\_\_ FAX # (\_\_\_\_) \_\_\_\_\_ COMPANY STATE LICENSE # \_\_\_\_\_**

**NAME OF RESPONSIBLE PERSON TO PERMIT** \_\_\_\_\_

**DESCRIPTION OF WORK TO BE DONE** \_\_\_\_\_

**IS YOUR COMPANY CURRENTLY REGISTERED WITH THE CITY? YES \_\_\_ NO \_\_\_**



**INSTALLATION OF MECHANICAL HOOD/FIRE EXTINGUISHING SYSTEM**  
**PERMIT CODE #600.0005**

**TOTAL PERMIT FEE** **\$ 75.00**

**CONTRACTOR TO SUBMIT MINIMUM OF THREE SETS OF PLANS FOR REVIEW. PLANS TO BE FOLDED**

I HEREBY CERTIFY THAT THE PLANS SUBMITTED ARE COMPLETE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT SAID WORK WILL BE DONE IN COMPLIANCE WITH THE INFORMATION HEREIN SET FORTH AND IN COMPLIANCE WITH THE TOWN OF FLOWER MOUND CODE OF ORDINANCES, STATE RULES AND REGULATIONS AND POLICY STANDARDS AS SET FORTH BY THE FIRE MARSHAL.

**Attach copy of mechanical license and fire system license to application. Plan submittal for hood system to bear Architects or Engineering stamp.**

**SIGNED:**

\_\_\_\_\_  
**CONTRACTOR                      TEXAS DL#                      STATE                      PRINT NAME CLEARLY**



**FOR OFFICE USE ONLY**

Date Submitted: \_\_\_\_\_ Permit No: \_\_\_\_\_

Total Permit Fee Due \$ \_\_\_\_\_ Paid By: [ ] Cash [ ] Check [ ] Money Order Date Paid: \_\_\_\_\_

Received By: \_\_\_\_\_ Receipt No: \_\_\_\_\_