



San Patricio County Fire Marshal's Office

Scott Marion – Fire Marshal

219 W. 5th Street, Building 7

Sinton, Texas 78387

(361) 587-3558

emc@sanpatriciocountytx.gov

APPLICATION FOR FIRE PERMIT

PERMIT TYPE (CHECK ONE)

- ☐ VHI Permit (Vent/Hood Installation) (\$200.00)
- ☐ VHS Permit (Vent/Hood Suppression System Installation) (\$250.00)
- ☐ FSS Permit (Fire Sprinkler System Installation) (\$250 plus \$1 per head)
- ☐ FAS Permit (Fire Alarm System Install) (\$250 plus \$1 per initiating device)
- ☐ UFL Permit (Underground Fire Line Installation) (\$250.00)
- ☐ GFP Permit (General Fire Permit *Not for sprinkler or alarm systems) (\$250.00)
- ☐ TCO Permit (Temporary Occupancy Permit – Construction) (\$200.00)
- ☐ UTI Permit (Underground Fuel Tank Installation/Removal) ***Per Tank** (\$400.00)
- ☐ ATI Permit (Above Ground Fuel Tank Installation/Removal) ***Per Tank** (\$400.00)
- ☐ FLI Permit (Underground Fuel Line/Dispensing Installation) ***Per Line** (\$250.00)
- ☐ EXP Permit (Demolition/Explosives Permit) ***Per Event** (\$500.00)
- ☐ FWD Permit (Firework Display Permit) (\$150.00)
- ☐ FTI Permit (Fumigation & Thermal Insecticide Fogging) ***Per Structure** (\$350.00)
- ☐ **Plans Attached to Application or Emailed? (REQUIRED)**
- ☐ **Firework or Demolition/Explosive Plan Attached to Application or Emailed? (REQUIRED)**

APPLICANT INFORMATION

Name of Applicant: _____ Title: _____

Address of Applicant: _____ City: _____

State: _____ Zip: _____ Phone _____ of
Applicant: _____ Phone 2: _____
Email of Applicant: _____
Name of Job Site: _____

CONTRACTOR INFORMATION

Company Doing the Work: _____
Address of Company: _____ City: _____ State: _____ Zip: _____
Contractor Name: _____ Contractor Phone: _____
Contractor Email: _____
Contractor License Type: _____ License Number: _____
License Issued By: _____ Expiration of License: _____
Engineering or Architectural Company Drafting Plans: _____
Address of Firm Drafting Plans: _____
Contact at Firm Drafting Plans: _____ Phone For Contact: _____
Email of Contact Drafting Plans: _____

FINALIZE APPLICATION

Printed Name of Applicant: _____ Date Submitted: _____
Signature: _____ Fee Due: _____

Permit Fees are required to be paid prior to the permit being issued. No permit will be issued prior to payment being received. Permit fees are non-refundable. Checks to be made payable to SPC FMO.