

MUNICIPALITY OF  
NORRISTOWN  
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Norristown, PA 19401  
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info@norristown.org

# OFFICE OF THE FIRE MARSHAL CONSTRUCTION FIRE PERMIT APPLICATION



**This application must have the attached copy of a customer signed contract. All permit fees are to be paid at the time of the application.**

**Address for the Permit:** \_\_\_\_\_

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

Contractor's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contractor's Cell Telephone # \_\_\_\_\_ Email Address: \_\_\_\_\_

Estimated Cost of Work Being Performed \$ \_\_\_\_\_ Job Start Date: \_\_\_\_\_

Property Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Owner's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Architect/Engineer(s) Name \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Are three sets of plans attached?  Yes  No

Are the plans sealed by a NICET level III or above designer?  Yes  No

Are plans available on CAD?  Yes  No

Please state in detail the work being performed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I hereby certify that the above proposed work is authorized by the owner of record and that all installations, alterations, additions, and repairs will conform to the requirements set forth by the Municipality of Norristown Fire Code Ordinance, in effect at the time of application, and the laws of the Commonwealth of Pennsylvania.**

Applicant's Signature: \_\_\_\_\_

Telephone: \_\_\_\_\_

Code Official's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**For Office Use Only**

Date: \_\_\_\_\_

Permit Number: \_\_\_\_\_

Routing Slip Number: \_\_\_\_\_

License Number: \_\_\_\_\_