



*The Commonwealth of Massachusetts  
Board of Building Regulations and Standards  
Massachusetts State Building Code, 780 CMR*



**Town of Greenfield**  
Building Department  
14 Court Square Greenfield MA 01301

**FIRE PROTECTION SYSTEMS PERMIT APPLICATION**

Date: \_\_\_\_\_ Fee: \_\_\_\_\_ Permit Number: \_\_\_\_\_

**Property Owner:**

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

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

**Job Location Information:**

Tenant/Building Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

**Contractor Information:**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Name of Competent Operator: \_\_\_\_\_ Phone: \_\_\_\_\_

Certification or License #: \_\_\_\_\_

Certification or License Type: \_\_\_\_\_

**Description of Work:**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Sprinkler – NFPA 13  | <input type="checkbox"/> Kitchen Hood Suppression | <input type="checkbox"/> Fire Warning/Alarm |
| <input type="checkbox"/> Sprinkler – NFPA 13D | <input type="checkbox"/> Carbon Dioxide System    | <input type="checkbox"/> New System         |
| <input type="checkbox"/> Sprinkler – NFPA 13R | <input type="checkbox"/> Clean Agent System       | <input type="checkbox"/> Addition           |
| <input type="checkbox"/> Stand Pipe           | <input type="checkbox"/> Dry Chemical System      | <input type="checkbox"/> Replacement        |
| <input type="checkbox"/> Dry Pipe             | <input type="checkbox"/> Foam Agent System        | <input type="checkbox"/> Repair/Alteration  |
| <input type="checkbox"/> Fire Pump            | <input type="checkbox"/> Smoke Control System     | <input type="checkbox"/> _____              |

Provide a detailed description of the work to be done: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Estimated Job Cost:** \$ \_\_\_\_\_ Permit fee is \$45 plus \$10 per thousand of job cost

I hereby acknowledge that the information above is complete and accurate and that the work will be in conformance with the codes and ordinances of the Town of Greenfield, Massachusetts State Building Code 780 CMR and Fire Prevention Code 527 CMR.

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