

**Thornbury Township, Chester County**  
**8 Township Drive**  
**Cheyney, PA 19319-6714**

Ph: 610-399-1425    www.thornburytwp.com    Fax: 610-399-6714

**FIRE PROTECTION PERMIT APPLICATION**

PROPERTY OWNER AND BUILDING INFORMATION					
Owner or Business Name					Phone
Street Address				Apt	Zip
Subdivision	Lot Number	Parcel Type	<input type="checkbox"/> Residential	<input type="checkbox"/> Industrial	
			<input type="checkbox"/> Commercial	<input type="checkbox"/> Other _____	

<b>COST OF CONSTRUCTION \$</b> _____
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TYPE OF IMPROVEMENT	OWNERSHIP
1 <input type="checkbox"/> New Building	8 <input type="checkbox"/> Private (Individual, Corporation, Non-profit Institution, etc.)
2 <input type="checkbox"/> Addition (if residential, enter number of new housing units added, if any, in PROPOSED USE, No 10)	9 <input type="checkbox"/> Public (Federal, State, or Local Government)
3 <input type="checkbox"/> Alteration (See 2 above)	
4 <input type="checkbox"/> Repair, Replacement	
5 <input type="checkbox"/> Pool	
6 <input type="checkbox"/> Decks	
7 <input type="checkbox"/> Porch	

PERMIT NO. \_\_\_\_\_

PROPOSED USE - For "Wrecking" most recent use		
<b>Residential</b>	<b>Non-Residential</b>	
10 <input type="checkbox"/> One or Two Family	14 <input type="checkbox"/> Amusement, Recreational	21 <input type="checkbox"/> Public Utility
11 <input type="checkbox"/> Two or More Family <i>Enter Number of Units _____</i>	15 <input type="checkbox"/> Church, Other Religious	22 <input type="checkbox"/> School, Library, Educational
12 <input type="checkbox"/> Garage	16 <input type="checkbox"/> Industrial	23 <input type="checkbox"/> Stores, Mercantile
13 <input type="checkbox"/> Other - <i>Specify</i> _____ _____	17 <input type="checkbox"/> Parking Garage	24 <input type="checkbox"/> Tanks, Towers
	18 <input type="checkbox"/> Service Station, Repair Garage	25 <input type="checkbox"/> Other - <i>Specify</i> _____ _____
	19 <input type="checkbox"/> Hospital, Institutional	
	20 <input type="checkbox"/> Office, Bank, Professional	

SELECTED CHARACTERISTICS OF BUILDING	
<b>PRINCIPAL TYPE OF FRAME</b>	<b>DIMENSIONS</b>
26 <input type="checkbox"/> Masonry (wall bearing)	31 <input type="checkbox"/> Number of Stories _____
27 <input type="checkbox"/> Wood Frame	32 <input type="checkbox"/> Total square feet of floor area, all floors, based on exterior dimensions _____
28 <input type="checkbox"/> Structural Steel	33 <input type="checkbox"/> Total Land Area, sq. ft. _____
29 <input type="checkbox"/> Reinforced Concrete	
30 <input type="checkbox"/> Other - <i>Specify</i> _____	

**FIRE PROTECTION TYPE:**34  Sprinkler System37  Hood Suppression System39  Fire Alarm System35  Stand Pipe37  Fire Hydrants40  Smoke Control System36  Suppression System38  Fire Pumps41  Fire Detection System42  Other - *Specify*  
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\_\_\_\_\_**DESCRIPTION OF WORK - (All trades)**


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**IDENTIFICATION - To be completed by all applicants**

<b>Property Owner or Lessee</b>	Name	Mailing Address	
	Phone No.		

<b>Contractor</b>	Name	Mailing Address	PA License No.
	Phone No.		

<b>Architect or Engineer</b>	Name	Mailing Address	
	Phone No.		

I hereby certify that the proposed work is authorized by the owner of record, that I have been authorized by the owner to make this application as his authorized agent, and we agree to conform to all applicable laws of this jurisdiction.

Signature of Applicant	Application Date
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