



COMAL COUNTY FIRE MARSHAL'S OFFICE

145 David Jonas Dr.
New Braunfels, Texas 78132

Fire Suppression Permit Application

Project Name: _____

Jobsite Address: _____

City: _____ Zip Code: _____

Type of Permit Application: (Please circle)

Fire Alarm

Fire Alarm Modification (10 devices or less)

Fire Sprinkler System

Fire Sprinkler System Modification (20 heads or less)

Fire Line Underground

Fixed Pipe Suppression System

Flammable/Combustible Storage Tanks

Contracting Company Name: _____

Phone: _____

Fax: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Contact Person: _____

_____ Date: _____

AUTHORIZED APPLICANT SIGNATURE

I hereby certify that the plans submitted are completed and correct to the best of my knowledge and that submitted work will be done in compliance with the information herein set forth and in compliance with all codes and ordinances adopted by the County of Comal, the State of Texas and the regulations and policy standards as set forth by the Fire Marshal of Comal County.

Receipt No.: _____ Date: _____

(For County Use Only)