



SYLVANIA TOWNSHIP FIRE DEPARTMENT FIRE PREVENTION/RISK REDUCTION BUREAU

FIRE DEPARTMENT HEADQUARTERS / FIRE STATION No. 4

8210 SYLVANIA AVENUE

SYLVANIA, OHIO 43560-9646

419-882-7676 ADMINISTRATION

419-885-1733 FACSIMILE

WWW.SYLVANIATOWNSHIPFIRE.COM

APPLICATION FOR WET CHEMICAL SYSTEM INSTALLATION

Type or print all information

Site Address:		
Tenant:	Tenant's Phone #:	
Contractor Name:	Contractor's Phone #:	
Representative:	Representative Phone #:	
Company State Certification #:	State Installer #:	
<i>Installer will be required to produce State of Ohio Installer's License at inspection/test.</i>		
Contractor Address:		
Phone #:	Fax #	E-mail

ALL PLANS MUST ALSO BE SUBMITTED THROUGH THE LUCAS COUNTY BUILDING DEPARTMENT

Type of Improvement:

___ New Hood ___ Addition/Alteration ___ Repair/Replace ___ Other: _____

Checks or money orders should be made payable to the **SYLVANIA TOWNSHIP FIRE DEPARTMENT**. (\$50.00) If paying in person, cash, check or money order is acceptable.

Permit applications may be submitted in person weekdays from 8:00 a.m. to 4:30 p.m., Monday thru Friday or mailed to: Sylvania Township Fire Department, Fire Station No. 4, 8210 Sylvania Avenue, Sylvania, OH 43560.

-----*Fire Department use only – below*-----

Date Received: _____ Date Plans Received (if different): _____

___ PAID: Check #: _____ Date & Amount Paid: _____

Plans Reviewed by: _____

Date Approved: _____ Permit # Issued: _____

Comments: _____

PRACTICE FIRE SAFETY EVERYDAY!