



City of Boulder City – Boulder City Fire Department

ALL PLANS REVIEW MUST COME THROUGH OUR PLANS REVIEW
EMAIL: bstasik@bcnv.org & jrogers@bcnv.org

WE NO LONGER ACCEPT PLANS VIA DROP OFF OR MAIL IN.

AT NO TIME SHALL A CONTRACTOR OR SUBCONTRACTOR ATTEMPT TO CONTACT THE FIRE INSPECTOR DIRECTLY.

PLANS REVIEW, PERMIT, & INSPECTION APPLICATION

Date: _____ Project: _____

Project Address: _____

Plans Submitted By: Contractor: _____

Office Phone: _____ Fax: _____

Address: _____ City: _____ St: _____ Zip: _____

Contact Person: _____ Email: _____ Cell #: _____

State of Nevada Contractor's License NO: _____ Fire Marshal License NO: _____

Boulder City Business License NO: _____ (BC Business License Telephone No is: 702-293-9219)

Work performed by: Contractor or Subcontractor: _____

Office Phone: _____ Fax: _____

Address: _____ City: _____ St: _____ Zip: _____

Contact Person: _____ Email: _____ Cell #: _____

State of Nevada Contractor's License NO: _____ Fire Marshal License NO: _____

Boulder City Business License NO: _____ (BC Business License Telephone No is: 702-293-9219)

TYPE OF REVIEW: PLANS REVIEW

<input type="checkbox"/>	COMPRESSED GAS INSTALL	<input type="checkbox"/>	HORN STROBE
<input type="checkbox"/>	FIRE ALARM SYSTEM	<input type="checkbox"/>	KITCHEN HOOD EXTINGUISHING SYSTEM
<input type="checkbox"/>	FIRE UNDERGROUND	<input type="checkbox"/>	MISCELLANEOUS FIRE PROTECTION EQUIPMENT
<input type="checkbox"/>	FLAMMABLE/COMBUSTIBLE LIQUID EQUIP INSTALL	<input type="checkbox"/>	MONITORING (EQUIPMENT OR SERVICE)
<input type="checkbox"/>	FUEL TANK, TANKS, PIPING/DISPENSING INSTALL	<input type="checkbox"/>	SPRAY BOOTH
<input type="checkbox"/>	GATES (AUTOMATIC OR MANUAL)	<input type="checkbox"/>	SPRINKLER PLANS
<input type="checkbox"/>	HAZARDOUS MATERIAL EQUIP INSTALL	<input type="checkbox"/>	
<input type="checkbox"/>	Other Not Lists:		

FEES ARE BASED ON CONTRACT VALUE; ACTUAL PROOF MAY BE REQUESTED. Our fee schedules can be found at: [BCNV.ORG](http://bcnv.org), Fire Department, Plans/Inspections/Permits, Plans Submittal Requirements and Process or <http://bcnv.org/?q=node/701>

CONTRACT VALUE	\$	Received Amount	\$
PLANS REVIEW FEE	\$	By:	
INSPECTION FEE	\$	Check Number	
CONSTRUCTION PERMIT FEE	\$		
TOTAL DUE	\$		

I hereby state that the above is correct. I recognize that the approval of the permit does not permit the violation of fire codes, City Ordinances, or state law and approval of this permit required by law. If granted, this permit is valid for the above-mentioned address only and it is not transferable. Any changes in the use of the occupancy of the above-mentioned premises shall require a new permit.

Applicant Name: _____ Date: _____

Applicant Signature: _____