CHARLOTTE FIRE DEPARTMENT
FIRE MARSHAL'S OFFICE
Permit Application

Facility Information

This is the actual location for which the permit(s) are issued. For businesses with multiple locations throughout the City of Charlotte, it is helpful to include the store number in the business name.

Business Name:	Land Use:	Occ. Use:
Address:	Unit:	Zip Code:
Phone Number: ( )	E-mail:	

Mailing Information

If permit fee payment requests are submitted to a central or corporate office that is different from the facility address, the mailing fields must be completed.

Name:

Address: Suite/Bldg:

City: State: Zip Code:

Phone Number: ( ) E-mail:

Emergency Contacts

Provide the names and phone numbers of a minimum of two local emergency contacts.

1.	Ph: ( )	Cell: ( )
2.	Ph: ( )	Cell: ( )

Responsible Applicant

Name: _____ Title: _____

Signature: _____ Date: _____ / _____ / _____

I certify that the information provided and contained herein is true and accurate to the best of my knowledge. The issuance of a permit shall not be deemed as approval to violate any provisions of the North Carolina State Fire or Building Codes. The code official has the right to inspect the premises to ensure compliance with provisions of the fire code. **NOTE: Any change in amounts or types of hazardous materials for which this permit is issued shall require prior notification and approval by the Fire Marshal's Office.**

Return the completed and signed application, Hazardous Materials Inventory Statement, site plan and check to:
Charlotte Fire Department – Fire Marshal's Office
500 Dalton Avenue
Charlotte, North Carolina 28206
Phone: 704-336-2101 E-mail: FMHazmat@charlottenc.gov

Make check payable to "City of Charlotte". If paying by credit card, contact the Fire Marshal's Office to provide information.

CFD Office Use Only

Permit Code: 12b	Fee: $ 400	Check No: _____ Permit No. _____
Permit Code: _____	Fee: $_____	Valid From: __/__/__ Valid Through: _____/__/___
Permit Code: _____	Fee: $_____	Issued by Inspector: _____ Emp. #: _____
Permit Code: _____	Fee: $_____	Information Collected By: _____
Permit Code: _____	Fee: $_____	Entry Date: __/__/___ Entered By: _____
Total: $ _____	**Exempt:** __	