



**CITY OF STAUNTON  
VIRGINIA  
FIRE MARSHAL'S OFFICE**

302 Grubert Avenue, Station 2  
Staunton, Virginia 24401  
(540) 332-3720 Fax (540) 332-3719

**APPLICATION FOR FIRE PREVENTION CODE PERMIT**

\_\_\_\_\_  
Date

Applicants Name: \_\_\_\_\_ Phone (Day): \_\_\_\_\_

Address: \_\_\_\_\_ Phone (Evening): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_ Phone (Other): \_\_\_\_\_

Operation Start Date: \_\_\_\_\_ Operation End Date: \_\_\_\_\_

Site Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Owner/Manager: \_\_\_\_\_ Phone: \_\_\_\_\_

Application is hereby made by the undersigned for a PERMIT to conduct the following:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I HEREBY ACKNOWLEDGE that the information contained herein, and DECLARE that it be true and correct, to the best of my knowledge and belief. Further, I am the OWNER/OPERATOR, or a duly authorized AGENT acting on behalf of the OWNER, for all activities at the above referenced property or location. As such, I hereby agree to comply fully with all requirements Virginia Statewide Fire Prevention Code and the City of Staunton Fire Prevention Code governing the operation I wish to conduct.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICE USE ONLY**

\_\_\_\_\_  
Site Inspection Date \_\_\_\_\_ Date Issued \_\_\_\_\_ Expiration Date \_\_\_\_\_

Application: \_\_\_ Approved \_\_\_ Disapproved By: \_\_\_\_\_ Date: \_\_\_\_\_  
Fire Official

Application Fee Paid? \_\_\_ Yes \_\_\_ No Type of Payment: \_\_\_\_\_

Comments/Conditions: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_