



**APPLICATION FOR FIRE PREVENTION PERMIT
ALEXANDRIA FIRE DEPARTMENT - FIRE PREVENTION AND LIFE
SAFETY SECTION**

Permit Center - 301 King Street, Room 4200, Alexandria, Virginia 22314

Date of Application _____ Permit Number FPP _____

Applicant _____ Signature _____
(Applicant or Agent (Please Print)) (Applicant or Agent)

Company or Corporation Name _____

Company or Corporation Address _____
(Street Address / PO Box)

(City) (State) (Zip Code)

**Under the provisions of Chapter 4 of the Code of the City of Alexandria, Virginia, as amended,
the following Fire Prevention Code Permit(s) is/are applied for:**

Doing Business As _____
at the following address _____ Alexandria, VA _____
(Street Address) (Zip Code)

Business Telephone Number _____

The following permit(s) are applied for:

Section _____	Description _____	Fee \$ _____
Section _____	Description _____	Fee \$ _____
Section _____	Description _____	Fee \$ _____
Section _____	Description _____	Fee \$ _____
Section _____	Description _____	Fee \$ _____
Section _____	Description _____	Fee \$ _____
Section _____	Description _____	Fee \$ _____

Temporary Permits Only: Date(s) / Duration of Event _____ Date Inspection Requested _____

Do underground tanks exist on site? Yes ___ No ___ No. of tanks _____ Size of tanks _____

OFFICE USE ONLY

Date Paid: _____ **Total Fee Paid \$:** _____ **No. of Article Permit Issued For:** _____

Make checks payable to: City of Alexandria

Mail application and payment to: Fire Prevention and Life Safety Section

**C/O Alexandria Permit Center, 301 King Street,
Room 4200, Alexandria, Virginia 22314**