

NASH COUNTY FIRE MARSHAL'S OFFICE
252-459-9805
OPERATIONAL PERMIT APPLICATION

APPLY TO:

Nash County Fire Marshal's Office
 120 W. Washington Street, Suite 1102
 Nashville, NC 27856

Project Name/Tenant _____		Unit/Bldg/Suite # _____	
Site Address _____		Phone # _____	
Complex Name _____			
Contact Person _____		Phone # _____	
Mobile # _____		Fax # _____	
Mailing Address _____		City _____ State, ZIP _____	
State License Number _____		State License Expiration Date _____	
e-mail address _____			

Place a (X) check mark on the permit which you are applying for:
 ONE PERMIT TYPE PER APPLICATION

<input type="checkbox"/> Amusement Buildings	<input type="checkbox"/> Fumigation/Thermal Insecticide Fogging
<input type="checkbox"/> Blasting – One Day Only	<input type="checkbox"/> Hazardous Materials
<input type="checkbox"/> Blasting – 90 Days	<input type="checkbox"/> Hydrant Flow
<input type="checkbox"/> Burning (Fire Official Approval Required)	<input type="checkbox"/> Industrial Ovens
<input type="checkbox"/> Carnivals & Fairs	<input type="checkbox"/> Liquid & Gas Fueled Vehicles or Equipment in Assembly Buildings
<input type="checkbox"/> Compressed Gases	<input type="checkbox"/> Pyrotechnic Special Effects Material
<input type="checkbox"/> Covered Mall Buildings	<input type="checkbox"/> Spraying & Dipping
<input type="checkbox"/> Exhibits & Trade Shows	<input type="checkbox"/> Temporary Membrane Structure, Tents & Canopies
<input type="checkbox"/> Fireworks Display (Outdoor/Indoor)	<input type="checkbox"/> Above / Underground Storage Tank Installation Install / Removal
<input type="checkbox"/> Flammable & Combustible Liquids	<input type="checkbox"/> Other _____

Scope of Work (Description): _____

** If Applicable, please attach site plan and specifications

PRINT NAME (Applicant) _____ DATE _____ SIGNATURE _____ PHONE _____