ALL **NEW** FIRE SYSTEM PERMITS **MUST BE** APPLIED FOR ONLINE THROUGH FAST TRACK.

fasttrack.ocfl.net



FIRE SYSTEM ONLINE SUBMITTAL CHECK LIST

- 1. Notarized Application
- 2. Set of Plans (electronically signed and sealed if applicable)
- 3. Set of Cut Sheet

Upload the <u>application</u>, <u>plans</u> and <u>cut sheets</u> into the <u>E-Submittal Plans/Documents</u> upload link using the naming conventions below:

- A001-<u>FPSPlan</u>-JobName (**Restricted Access Gate** Plan Example)
- A002-FPSPlan-JobName (Multiple Pages Example)
- A003-FPSCutSheets-JobName
- PD001-FPSApplication-JobName
 - A three-digit sequential number identifying the order of the files starting with 001, then 002, and so on for each file, should follow the prefix (A or PD). You must label every file that you upload in sequential order and not skip or duplicate any numbers.
 - Do not use commas or special characters. You may use dashes (hyphens) to separate words in the file name or push the words together. AVOID BLANK SPACES.



Orange County Fire Rescue Department Office of the Fire Marshal – 7079 University Blvd. Winter Park, FL 32792 Phone: 407-836-0004 - Fax: 407-836-8310



Permit Application for Restricted Access Gate/Fence Installation

| Fire Dept. Permit # Bui | Building Dept. Permit # | | Parcel # | |
|---|-------------------------|-------|--------------------------|----------------|
| Date: | New Per | rmit: | Revision to a l | Permit: |
| Note: Corrections occur when a permit has been rejected & revisions occur when changes are made after a permit has been issued! | | | | |
| | | | | |
| Please print or type all information below. Incomplete applications will be returned. | | | | |
| Project Name: | | | | |
| Project Address (Include City & State): | | | | |
| Contractor: | | | | |
| Contractor Address (Include City & State): | | | | |
| Phone # (Include area Code) | FAX # (Include Area Co | ode) | Corporate Email: | |
| Certificate Holder's Name: | | | I | |
| State License Number: | Expiration Date: | | Worker's Compensation Ex | piration Date: |
| General Contractor/Owner: | | | | |
| Scope Of Work: | | | | |
| | | | | |
| | | | | |
| Permit Or Revision Required By Notice From Inspector? Yes No | | | | |
| | | | | |
| All fees shall be paid at time of submittal in accordance with Orange County Fee Schedule. Payments made online through Fast Track. Note: FEES ARE NOT REFUNDABLE, once plans are processed. | | | | |
| Restricted Access Gate/Fence Installation Review and Inspection Fee \$ 70.00 | | | | |
| | | | | |
| Notarized Signature | | | | |
| Certificate Holder Shall Sign Notarized Portion For New Permits, Corrections, Or Revision. | | | | |
| (Print or Type Name) I hereby swear, under oath, that all documents and information su me in connection with this permit application process are genuine: | | | | |
| Signature of Certificate Holder: | | | | |
| State Of Florida, County Of | | | | |
| Sworn to and Subscribed Before Me This: | | (Day) | (Month) | (Year) |
| Signature of Notary: | | | Notary Seal: | |
| My Commission Expires: | | | | |