



# PECHANGA FIRE DEPARTMENT

## Application for Fire Department Construction Permit

(Submit Application at least 30 business days prior to work)

### APPLICANT INFORMATION (PERMITEE)

Name:	Title:
Company:	License Type and #:
Phone:	Email:
I certify that all of the information I have provided is correct, and I agree to comply with any CONDITIONS OF APPROVAL and all laws pertaining to this permit adopted by the Pechanga Indian Reservation. I understand that any false or misrepresented information provided or any violation of the conditions or laws may result in the immediate revocation of this permit. I understand that approval of this permit is valid only for the permittee, work, location, and dates specified on this application.	
Signature:	Date:

### PERMIT INFORMATION

Name of Project:	PFD Project #
Address:	Building Permit #
Location:	Date work begins:

### CONSTRUCTION PERMIT TYPE: (check all that apply and enter necessary information)

**CONSTRUCTION PERMITS** – Allows the applicant to construct, install or modify structures, systems and equipment for which a permit is required by and shall be in accordance with Pechanga Building & Fire Code Ordinance. Construction permits expire after 180 days of inactivity.  PRC  PDC  PTG  Private

<input type="checkbox"/> <b>FIRE ALARM:</b> <input type="checkbox"/> New <input type="checkbox"/> TI	\$	<input type="checkbox"/> <b>BATTERY SYSTEM</b>	\$
#devices:	#floors:	<input type="checkbox"/> <b>CAPACITOR ENERGY SYSTEMS</b>	\$
<input type="checkbox"/> <b>FIRE SPRINKLERS:</b> <input type="checkbox"/> New <input type="checkbox"/> TI	\$	<input type="checkbox"/> <b>COMPRESSED GASES</b>	\$
<input type="checkbox"/> NFPA-13 <input type="checkbox"/> NFPA-13R <input type="checkbox"/> NFPA-13D		<input type="checkbox"/> <b>CRYOGENIC FLUIDS</b>	\$
#heads:	#floors:	<input type="checkbox"/> <b>EMERGENCY RESPONDER RADIO SYSTEM</b>	\$
#systems:	#calc'd areas:	<input type="checkbox"/> <b>FLAMMABLE &amp; COMBUSTIBLE LIQUIDS</b>	\$
#sq. ft.:		<input type="checkbox"/> <b>FUEL CELL POWER SYSTEMS</b>	\$
<input type="checkbox"/> <b>FIRE PUMP:</b> <input type="checkbox"/> New <input type="checkbox"/> TI	\$	<input type="checkbox"/> <b>GATES/BARRICADES IN FIRE APPARATUS ACCESS</b>	\$
#pumps:		<input type="checkbox"/> <b>HAZARDOUS MATERIALS</b>	\$
<input type="checkbox"/> <b>FIRE SERVICE UNDERGROUND:</b> <input type="checkbox"/> New <input type="checkbox"/> TI	\$	<input type="checkbox"/> <b>HIGH PILED STORAGE</b>	\$
#risers:	#hydrants:	<input type="checkbox"/> <b>INDUSTRIAL OVENS</b>	\$
<input type="checkbox"/> <b>STANDPIPES:</b> <input type="checkbox"/> New <input type="checkbox"/> TI	\$	<input type="checkbox"/> <b>LIQUID PETROLEUM GAS (LPG)</b>	\$
<input type="checkbox"/> Class I or III <input type="checkbox"/> Class II		<input type="checkbox"/> <b>SMOKE CONTROL/EXHAUST SYSTEM</b>	\$
#systems:	#calc'd areas:	<input type="checkbox"/> <b>SOLAR PHOTOVOLTAIC SYSTEM</b>	\$
<input type="checkbox"/> <b>SPECIAL HAZARD SYSTEM:</b> <input type="checkbox"/> New <input type="checkbox"/> TI	\$	<input type="checkbox"/> <b>SPRAYING / DIPPING MACHINERY</b>	\$
<input type="checkbox"/> wet chemical/kitchen hood #systems:		<input type="checkbox"/> <b>MOTOR VEHICLE REPAIR ROOMS &amp; BOOTHS</b>	\$
<input type="checkbox"/> dry chemical/spray booth #systems:		<input type="checkbox"/> <b>SPECIAL EVENT STRUCTURE</b>	\$
<input type="checkbox"/> carbon dioxide (CO2) #systems:		<input type="checkbox"/> <b>TENT/TEMPORARY MEMBRANE STRUCTURES</b>	\$
<input type="checkbox"/> clean agent #systems:		<input type="checkbox"/> <b>OTHER:</b>	\$
<input type="checkbox"/> <b>GAS DETECTION SYSTEM:</b> <input type="checkbox"/> New <input type="checkbox"/> TI	\$	<input type="checkbox"/> <b>OTHER:</b>	\$
<input type="checkbox"/> <b>PRIVATE FIRE HYDRANT:</b> <input type="checkbox"/> New <input type="checkbox"/> TI	\$	Standby Service \$300 per hour: #engines _____ # hours _____	

### ADDITIONAL INFORMATION "REQUIRED"

Provide detailed description of the project/event. Identify systems and explain scope of work to be performed. Attach plans, diagrams, and other applicable documentation.

**FEES**

Please refer to the Pechanga Fire Department Fee Schedule. Permit/Inspection Fees include inspections noted in conditions and (1) reinspection – additional reinspections will be charged \$75. **\*\*Some operational permits require plan review per fee schedule or the miscellaneous hourly rate.**

<b>Total # permits:</b>	<b>Total Permit Fees: \$</b>
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<b>Plans/Submittals Included:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	<b>Total Plan Review Fee: \$</b>
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Submit permit applications and (3) sets of plans, when required, with payment: *In person by appointment or mail – Pechanga Fire Department Fire Station 1* (c/o FIRE MARSHAL), 48240 Pechanga Rd., Temecula, CA 92592, 8AM-NOON Monday-Friday; *By appointment – Fire Marshal’s Office*, 45421 Pechanga Pkwy., Ste. 217 (Pechanga Resort & Casino Career Center) Monday-Friday. *Online:* <https://tinyurl.com/PechangaFD>. We accept Visa, MasterCard, Discover, Checks, and Cashier Checks. Sorry we do not accept Cash or American Express. **Make checks payable to “Pechanga Fire Department”.**

**OFFICE USE ONLY**

Date Received:	Received by:
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Permit Paid in Full: <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	Permit Fees Paid: \$	Balance Due: \$
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Plan Review Paid in Full: <input type="checkbox"/> YES <input type="checkbox"/> NO	Review Fees Paid: \$	Balance Due: \$
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Plan Review Required: <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> Check #	<input type="checkbox"/> Credit Card
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Permit #:	Effective Date:
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Issued by:	Expiration Date:
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**Approved**
   
  **Approved with Conditions**
   
  **Denied**

Approval of this permit shall not be construed to be approval of any violation of any provision of federal, tribal, or other applicable laws.

**CONDITIONS:**