



Fire Prevention & Life Safety Bureau
 842 Salem Street, Chico CA 95928
 530-897-3400 Fax 530-895-4931

Fees Valid 7/1/10-6/30/11

UNIFORM FIRE CODE PERMIT APPLICATION

INSTRUCTIONS - Please complete this Permit Application and submit along with your payment to: **Chico Finance Office, P.O. Box 3420, Chico, CA 95927** (make checks payable to: **City of Chico**). Provide any applicable emergency response information. A new permit application must be filed every year with the Fire Department and a permit will not be issued without a signature.

TYPE OF PERMIT - The following UFC permit(s) were adopted by City of Chico Municipal Code, Chapter 16.48.020. Please check the permits determined by the UFC and Fire Department that are applicable to your business. The initial permit is **\$76.50**. Each additional permit is **\$48.00** (same site, same owner). A permit for an occasional, specific activity (*not to exceed 30 consecutive days*) is **\$139.50**. If an inspection is performed for permit related activities, a minimum fee of **\$76.50** per inspection and **\$63.00** per hour will be assessed, for a total of **\$139.50** per inspection, per hour.

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|---|--|--|
| <input type="checkbox"/> Aerosol Products | <input type="checkbox"/> Flammable or Combustible Liquids and/or Tanks | <input type="checkbox"/> Nitrate Film |
| <input type="checkbox"/> Aircraft Refueling Vehicles | <input type="checkbox"/> Fruit Ripening | <input type="checkbox"/> Oil and Natural Gas Wells |
| <input type="checkbox"/> Asbestos Removal | <input type="checkbox"/> Fumigation or Thermal Insecticidal | <input type="checkbox"/> Organic Coatings |
| <input type="checkbox"/> Automobile Wrecking Yard | <input type="checkbox"/> Fogging | <input type="checkbox"/> Place of Assembly |
| <input type="checkbox"/> Bowling Pin/Alley Refurbishing | <input type="checkbox"/> Grain Elevators and Other Dust Producing Operations | <input type="checkbox"/> Radioactive Materials |
| <input type="checkbox"/> Cellulose Nitrate Plastic | <input type="checkbox"/> Hazardous Materials | <input type="checkbox"/> Repair Garages |
| <input type="checkbox"/> Combustible Fiber Storage | <input type="checkbox"/> High-Piled Combustible Storage | <input type="checkbox"/> Spraying and Dipping |
| <input type="checkbox"/> Combustible Materials Storage | <input type="checkbox"/> Liquefied Petroleum Gases | <input type="checkbox"/> Tank Vehicles |
| <input type="checkbox"/> Compressed Gas | <input type="checkbox"/> Lumber Yards | <input type="checkbox"/> Tents/Air-Supported Structures |
| <input type="checkbox"/> Cryogenics | <input type="checkbox"/> Magnesium Operations | <input type="checkbox"/> Tire Recapping and Storage |
| <input type="checkbox"/> Dry Cleaning Plants | <input type="checkbox"/> Mall, Covered | <input type="checkbox"/> Waste Material Processing Plant or Junk Yards |
| <input type="checkbox"/> Explosive Materials | <input type="checkbox"/> Motor Vehicle Fuel Dispensing Station | <input type="checkbox"/> Welding and Cutting Operations |
| <input type="checkbox"/> Fires | | |
| <input type="checkbox"/> Fireworks | | |

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|-------------------|-------------------|--------|
| BUSINESS ADDRESS: | | PHONE: |
| BUSINESS NAME: | | |
| APPLICANT: | | PHONE: |
| OWNER: | | PHONE: |
| MAILING ADDRESS: | CITY, STATE, ZIP: | |
| NOTES: | | |

Return Signed Application With Payment

I am aware that the permit(s) are required (CMC, Chapter 16.48) in order to conduct business within the City of Chico. Any violation of the permit(s) can cause revocation of said permit(s) and possible legal action being brought against me. The fees for the permit(s) are charged on an annual basis. I understand that if reinspection(s) are required, I may be billed for additional inspection time at a rate of \$63.00 per hour (1 hour minimum).

| | | | |
|-----------------------------|----------------|------------------------|--------------------|
| | | | |
| <i>Applicant Signature</i> | <i>Title</i> | <i>Date</i> | |
| PEID: | | OFFICE USE ONLY | Max Occ. Load: |
| Receipt No: | Date: | | Permit No: |
| Reinspection Time: | Amount billed: | | Expiration Date: |
| | | | |
| <i>Authorized Signature</i> | <i>Title</i> | | <i>Date Issued</i> |