



OPERATIONAL PERMIT

NOTICE: This permit must be kept on the premises designated in this permit at all times and shall be readily available for inspection by the fire code official.

Application Number: _____ Date: _____

Property Address: _____ Property Index Number: _____

Expiration Date: _____ Construction Type: _____

Conditional Permit: Yes No Temporary Operation: Yes No

Description of Operation Approved: _____

Section of Code Requiring Operational Permit: 2015 IFC Section 105.1.1

Conditions of permit:

Permission to maintain, store or handle materials:

Type _____ Quantity _____

Permission to conduct processes which produce conditions hazardous to life or property: Type of process _____

Limitations or restrictions on permit: _____

Comments: _____

Permit Holder: _____

Address: _____ City, State: _____ Zip: _____

E-mail: _____ Office #: _____ Cell: _____ FAX: _____

Contact Person (if different from Permit Holder): _____

Address: _____ City, State: _____ Zip: _____

E-mail: _____ Office #: _____ Cell: _____ FAX: _____

Approved by: _____ Date of Approval: _____

Fire Code Official/Marshal/Inspector: _____

Date of Issuance: _____

TO CALL FOR INSPECTIONS, CONTACT THE DEPARTMENT OF FIRE SAFETY AT 515-965-6475 THIS PERMIT AUTHORIZES ONLY WORK IN FULL COMPLIANCE WITH Municipal CODES AND REGULATIONS. FAILURE TO OBTAIN INSPECTIONS AS REQUIRED CONSTITUTES A VIOLATION OF THE FIRE CODE.

Fee Summary	Charged	Paid	Credited	Due
Permit Fee Total				\$35.00
Other Fee Total				
Grand Total				