thre resolution

APPLICATION FOR COOKING EXHAUST HOOD SYSTEMS PERMIT

Hamilton Township Fire Department - Fire Prevention Bureau 7780 South State Route 48 Hamilton Township, OH 45039 Phone: (513) 334-9689 Fax: (513) 683-4325 Email: csanders@hamilton-township.org

Tenant:			Tenant's Phone #:		
Contractor Name:			Contractor's Cell #:		
Company State Certification	on #: vill be required to produce S	State State of Ohio Installe	nstaller #:	on/test.	
Contractor Address: Street A	ddress	City	State	Zip	
hone #:	Fax #:		Email:		
		print all information			
	KITCH	EN HOOD PERMIT			
Commercial Permit Type: Type I or Type II Hood	: Systems (Cooking Exhaust	t Hoods only)	Fees: \$50.00 per	hood	
Number of Hoods:	X \$50.00	= Total Fees:			
Number of Hoods: Revised Plans - \$75	<u> </u>	= Total Fees:			
Revised Plans - \$75	<u> </u>				
Revised Plans - \$75	5.00 for inspection/test is requir	red, a fee of \$75 will	be due in advance.		
Revised Plans - \$75	5.00 for inspection/test is require	red, a fee of \$75 will Iculating fees, please 89 or csanders@ham	be due in advance. feel free to ilton-township.org		
Revised Plans - \$75 Note: If more than one trip	for inspection/test is require If you need help ca contact us at (513) 334-968	red, a fee of \$75 will Iculating fees, please 89 or csanders@ham r payable to "Hamil	be due in advance. feel free to ilton-township.org		
Revised Plans - \$75 Note: If more than one trip	for inspection/test is required for inspection/test is required for inspection/test is required for the secondary of the seco	red, a fee of \$75 will Iculating fees, please 89 or csanders@ham r payable to "Hamil	be due in advance. feel free to ilton-township.org fton Township" vention Bureau use on		
Revised Plans - \$75 Note: If more than one trip	for inspection/test is require If you need help ca contact us at (513) 334-968 Check or Money Order of write below this line. Har	red, a fee of \$75 will Iculating fees, please 89 or csanders@ham Ir payable to "Hamile milton Township Pre e Plans Received (if	be due in advance. feel free to ilton-township.org fton Township" vention Bureau use on	<u>ly.</u>	
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Revised Plans - \$75 Note: If more than one trip Do note Date Received: PAID: Check #: Plans Reviewed by:	for inspection/test is require If you need help ca contact us at (513) 334-968 Check or Money Order of write below this line. Har	red, a fee of \$75 will Iculating fees, please 89 or csanders@ham Ir payable to "Hamile milton Township Pre e Plans Received (if ate Paid:	be due in advance. feel free to ilton-township.org Iton Township" vention Bureau use on different):	ly.	

HTFR: Revised 08/26/2019

Effective immediately, no Hamilton Township Fire Inspector shall conduct any inspection of new fire protection systems or any acceptance test on any fire protection system without proper documentation of an installers (individual) current State of Ohio license through the Ohio Fire Marshal's office, as referenced in the current OFC sections 915.2 and 915.11.

Each inspector shall ask to see a current State of Ohio license prior to conducting the test(s) or inspection. The name of the installer, state license number, and expiration date shall be recorded in the inspectors report. The State of Ohio license must be applicable for the type of fire protection system being installed, (i.e. Underground NFPA 24, Aboveground NFPA 13, Fire Alarm Systems NFPA 72). We will no longer accept faxed copies of the installer's state license. If the installer does not have a current Installer's State of Ohio license on his/her person at the time of the test/inspection, the appointment must be rescheduled.