

Mansfield Fire Rescue

1305 E. Broad St.
Mansfield, TX 76063
817-276-4790
Fax 817-276-4787



PERMIT APPLICATION

SMOKE CONTROL SYSTEM

DATE:	
PROPERTY ADDRESS:	
PROPERTY NAME:	
NEW CONSTRUCTION Y [] N []	REMODEL Y [] N []
COMPANY NAME:	
ADDRESS:	
CONTACT PERSON:	PHONE#
EMAIL ADDRESS:	
STATE LICENSE OR CERTIFICATION NUMBER:	

Smoke Control System

Fee: \$100.00 per installation

A permit is required for any smoke control system installed in the City.

[SUBMIT PLANS, APPLICATION and PRODUCT INFORMATION SHEETS.](#)

PAYMENT INSTRUCTIONS WILL BE EMAILED TO THE ADDRESS ABOVE

For Fire Department Use Only

Date Rec'd: _____ Fee Amount: \$ _____ Check #/Card: _____ Receipt #: _____

Permit #: _____ Date Issued: _____ Date Notified: _____ ESO/FH ☐

Permit Type: ☐ Construction ☐ Operational

Fire Official Approval _____