



ERIC SCHOLZ
FIRE MARSHAL

BONITA SPRINGS FIRE CONTROL AND RESCUE DISTRICT

27701 BONITA GRANDE DR, BONITA SPRINGS, FL 34135

PHONE (239) 949-6211 **FAX** (239) 949-6216

FIRE PREVENTION DIVISION

OFFICE HOURS: MONDAY—FRIDAY 8:00AM TO 5:00PM



BRAD JOHNSTON
ASST. FIRE MARSHAL

Our mission is to provide the highest quality Fire Prevention and Inspection Services to the community as possible. Our on-going goal is to minimize potential fire hazards in order to promote a fire safe community.

Our staff members interact with developers, builders, architects, engineers, and property owners in the process of applying the Florida Fire Prevention Code to commercial and multi-family buildings constructed within the Fire District and City of Bonita Springs. The Division performs routine annual fire inspections, re-inspections, and occupancy USE permit inspections within the community's business districts and multi-family residential complexes. The Division also provides Permitting, Plan Review, and Inspection Services for new construction commercial, interior remodeling projects, and multi-family residential complexes throughout the Fire District and City of Bonita Springs.

TYPES OF REQUIRED PERMITS AVAILABLE

Fire Alarm, Monitoring System, Fire Alarm System Project (over the counter permit), Fire Sprinkler, U/G Fire Line, Dry Hydrant, Standpipe, Kitchen Grease Hood, Hood Suppression, Clean Agent, Paint Booth, Suppression, Fuel Tanks/Piping, LPG Tank, LPG/NAT Piping, Natural Gas, Fire Pump, and Fireworks/Sparklers s791.

PERMITTING PROCEDURES

Plans are to be prepared by a Florida Licensed Fire Protection Contractor, Florida Registered Architect, or Engineer in accordance with the Florida Statute 633, "Fire Prevention and Control," Florida Fire Prevention Code, NFPA Standards, and Florida Administrative Codes.

If plans are intended to be mastered, the contractor, engineer, or architect shall indicate by a sealed letter or statement on the plans that they approve of repetitive use of the plans for permitting or, if a case by case approval specific to each application is required for permitting.

- Minimum **FOUR** sets of plans required for plan review.
- Plan Review and Permit Fees are due when permit is ready for pick-up.
- Complete applicable areas of "Fire Permit Application" form pertaining to permit request.
- Submit "Authorization Letter" with a copy of license at time of plan submittal and permit request.
- The applicant is required to pay the \$25 permit fee at time of Permit Application submittal (effective 08-12-2008).
- Applicable to Fire Sprinkler, Fire Pump, U/G Fire Line, and Standpipe permit requests: provide a current fire hydrant fire flow that has been done within the last six months attached to plans.
- Prior to issuance of a Final Certificate of Completion for any permit, the applicant must submit a final digital "as-built plan" of the work in PDF format through email or a USB flash drive (effective 08-12-2008).



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REGISTRATION / AUTHORIZATION LETTER

PLEASE PRINT OR TYPE ALL INFORMATION

NOTE: COPIES OF ALL REQUIRED LICENSES MUST BE ATTACHED TO THIS LETTER

License Holder Name:	State License #:
Firm / Business Name:	
Address:	
Phone:	Fax:
Email:	

I HEARBY AUTHORIZE THE FOLLOWING INDIVIDUALS TO ACT AS MY AGENT IN ALL AREAS OF THE PERMITTING PROCEDURES WITH THE BONITA SPRINGS FIRE CONTROL AND RESCUE DISTRICT

- I am authorizing **ONLY** those listed below
- I am authorizing the following individuals **IN ADDITION** to a previously submitted authorization form
- I am rescinding all previously submitted authorization form, and I am authorizing **ONLY** those listed below
- This authorization is for **ONE JOB ONLY**

Job Site Address:	Job Site Permit #:
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AUTHORIZED PERSON(S)	AUTHORIZED PERSON(S) SIGNATURE

I UNDERSTAND THAT I REMAIN FULLY RESPONSIBLE AND LIABLE FOR ALL ACTS PERFORMED UNDER SAID PERMIT. UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AUTHORIZATION LETTER AND THE FACTS STATED IN IT ARE TRUE.

SIGNATURE OF LICENSEE

DATE



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FIRE PERMIT APPLICATION

PLEASE PRINT OR TYPE ALL INFORMATION

PERMIT # : FIRE		PERMIT # : COM	
LDO / DOS # :		MASTER PLAN #:	
STRAP # :		ESTIMATED JOB VALUE:	
PROJECT NAME:		SUBDIVISION:	
JOB ADDRESS:		SQ FT:	
CONTRACTOR/BUS. NAME:		CONTACT PERSON:	
MAILING ADDRESS:		LICENSE #:	
PHONE #:		FAX #:	
EMAIL:			
JOB DESCRIPTION:			

CHECK ALL INFORMATION THAT APPLIES BELOW

- | | |
|--|--|
| <input type="checkbox"/> FIRE ALARM (SQ FT: _____) | <input type="checkbox"/> KITCHEN GREASE HOOD |
| <input type="checkbox"/> MONITORING SYSTEM (<input type="checkbox"/> Single Bldg <input type="checkbox"/> Campus Style) | - NUMBER OF: _____ |
| <input type="checkbox"/> FIRE SPRINKLER (SQ FT: _____) | - TOTAL LENGTH: _____ |
| <input type="checkbox"/> FIREWORKS / SPARKLERS s791 | <input type="checkbox"/> HOOD SUPPRESSION |
| <input type="checkbox"/> U/G FIRE LINE | - LENGTH: _____ |
| <input type="checkbox"/> DRY HYDRANT | <input type="checkbox"/> FIRE PUMP (GPM: _____) |
| <input type="checkbox"/> STANDPIPE | <input type="checkbox"/> PAINT BOOTH |
| <input type="checkbox"/> SUPPRESSION | <input type="checkbox"/> FUEL TANK(S) / PIPING |
| <input type="checkbox"/> LPG TANK | - NUMBER OF TANKS: _____ |
| - NUMBER OF TANKS: _____ | <input type="checkbox"/> NATURAL GAS (BTUs: _____) |
| <input type="checkbox"/> CLEAN AGENT | <input type="checkbox"/> TWO-WAY RADIO COMMUNICATION
ENHANCEMENT SYSTEM |

DO NOT WRITE BELOW THIS LINE

PLAN REVIEW:	FIRE PERMIT FEE:	REVISION FEE:
DATE:	PLAN REVIEW FEE:	RESUBMITTAL FEE:
FEES PAID:	FIRE INSPECTION FEE:	
DATE:	TOTAL:	TOTAL: