



DEFOREST WINDSOR FIRE & EMS DISTRICT

110 S. STEVENSON STREET, DEFOREST, WI 53532

PHONE: 608.846.4364 FAX: 608.846.6786

WWW.DEFORESTWINDSORFIRE.COM

FIRE SUPPRESSION SYSTEM INSTALLATION PERMIT APPLICATION

PROJECT NAME: _____
PROJECT ADDRESS: _____
CONTRACTING COMPANY: _____
CONTRACTOR ADDRESS: _____
CONTRACTOR CONTACT: _____
PHONE NUMBER: _____ EMAIL: _____

APPLICATION IS MADE TO DEFOREST WINDSOR FIRE & EMS TO

INSTALL NEW SYSTEM

ADD TO EXISTING SYSTEM (REMODEL)

ADD TO EXISTING SYSTEM (NEW)

UPGRADE/REPAIR EXISTING SYSTEM

APPROVAL OF PLANS AND SYSTEM

Submission of digital copies (*preferred*) or three (3) printed copies of plans and specifications shall be submitted to the Fire Inspector for review. Plans should include the following information:

PRE-ENGINEERED SYSTEMS: Submit a specification sheet describing the make, model, and size of the extinguishing system. Also include the location of where the system will be installed, the type of fuel shutoff device to be used, and the hazard that is protected. Technical sheets for equipment used in this system and plan approval letter from The State of Wisconsin (if applicable) must also be submitted.

ENGINEERED SYSTEMS: A drawing must be submitted that shows the locations of all devices, piping, and manual operation devices. Technical sheets for equipment used in this system and plan approval letter from The State of Wisconsin (if applicable) must also be submitted.

APPROVALS REQUIRED BEFORE ANY WORK IS PERFORMED

1. If applicable system plans MUST be conditionally approved by the authority having jurisdiction.
 - **Village of Windsor:** Visit <https://www.windsorwi.gov/inspection> for plan review instructions
 - **All other municipalities:** Plans are reviewed by The State of Wisconsin.
2. A signed permit must be obtained from the Fire Inspector prior to any work being performed.

FEE SCHEDULE

Fire suppression systems (other than sprinkler) - \$250

Review the fee schedule for a full list of fees

Fees must be received prior to the permit being approved.

Checks may be made payable to DeForest Windsor Fire & EMS – No credit cards are accepted at this time.

DEPT USE ONLY		
Date Received: _____	Amount Received: _____	Check#: _____
Notes: _____		

Conditionally Approved: _____	Inspection #: _____	Delivered: _____
Fire Inspector Signature: _____		