



APPLICATION

CHULA VISTA FIRE DEPARTMENT

Other Activities

Name of Project: _____ **Submittal Date:** _____

Project Address (range): _____

Bldg Permit Number: _____ **Installing Contractor's City of Chula Vista Business License # :** _____

Installing Contractor: _____ **Contractors License # :** _____

Contractor Address: _____ **City:** _____ **State:** _____ **Zip :** _____

Contact Person: _____ **Phone:** _____ **Fax:** _____

Company / Person paying for permit: _____ **Phone:** _____

E-Mail: _____

Fire Permit Number: _____ **Inspector / Area:** _____

Check / Mark if applicable, indicate quantity, multiply with fee amount and type/write subtotal. Add subtotals in TOTAL box.

<input checked="" type="checkbox"/>	#	Other Activities	Fee	x Qty	Subtotal \$
<input type="checkbox"/>	20.1	Other Activities [per hour, one-hour minimum]	\$160		
<input type="checkbox"/>	20.2	Other Activities [each additional .25 hour increment]	\$40		
<input type="checkbox"/>	20.3	Partial Work Fee [contractors that perform design only versus installation only]	50% of the Total Permit		
<input type="checkbox"/>	20.4	Accelerated Plan Review [two-hour minimum]	\$160		

1. Item #20.1 and 20.2 are for FSE services not specifically identified in this fee schedule.
2. Item #20.4 is in addition [separate] to the primary permit.
3. Item #20.4 is per review.
4. Item #20.4 has a two-hour minimum per Accelerated Plan Review.

TOTAL:

REMIT TO:

Chula Vista Fire Department • Fire Prevention Division
 276 Fourth Avenue • Building C, Suite B-143 • Chula Vista CA 91910 • (619) 691-5029 • fax (619) 691-5204

OFFICIAL USE:

Deposit Account # 1563000-4782 (156304) Accepted by: _____ Date: _____