Edward P. Mangano

County Executive

Scott D. Tusa Chief Fire Marshal



Nassau County Fire Commission Office of the Fire Marshal

1194 Prospect Avenue Westbury, N.Y. 11590 (516) 573-9900

Sprinkler Head Relocation Test Permit Application (For relocation of 25 or less sprinkler heads only)

Make Checks Payable to: "Nassau County Treasurer"

Site Information (Location where work is to be performed)					
Business Name					
Former Tenant Name (if applicable)			Phone #		
Jobsite Address					
Village			State	Zip	
Brief description of proposed relocated sprinkler heads work to be performed,(include number of heads to be relocated):					
Licensed Sprinkler System Installer Information					
Business/Corporation Name			Federal ID #		
D/B/A Name (If different fron	n above)			····	
Mailing Address					
Village		_ State	Zip	Phone #	
I, the undersigned. understand that the issuance of a permit for the type which herein applied for is based on the agreement to conform to the regulations and requirements of the Nassau County Fire Marshal's Office. I further understand that non compliance of said requirements, by myself or any officer or employee of the firm or the individual signing as installer on this form, shall be cause for revocation of said permit. Upon revocation of said permit the applicant or any employee of the applicant shall be prohibited to conduct such work for which this permit was issued. The re-issuance of a permit shall be based upon review of the circumstances leading to the revocation, by the Fire Marshal. Any false statement(s) made herein are punishable as a Class A misdemeanor pursuant to Section 210.45 of the Penal Law.					
Installer (Print Name)		Title			
Installer (Signature)		Date	-		
For Fire Marshal Use Only					
Permit #					
	Cash Recpt. ID		_ Location ID		
Date Issued	•		_		
Date Issued	Check #		Fee on Acc		