

**Application for  
Fire Safety System  
Highlands County, Florida**

Date \_\_\_\_\_ Permit # \_\_\_\_\_

Owner \_\_\_\_\_

Address \_\_\_\_\_

Legal Description \_\_\_\_\_

Fire Safety Contractor \_\_\_\_\_

Building Contractor \_\_\_\_\_

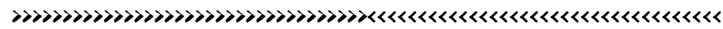
Type of System \_\_\_\_\_

Valuation \$ \_\_\_\_\_ Fee \$ \_\_\_\_\_

State Surcharge \$ \_\_\_\_\_

Certificate of Completion \$ \_\_\_\_\_

Total: \$ \_\_\_\_\_



This Application is made Subject to all Highlands County codes.

\_\_\_\_\_  
Signature of Applicant                      Competency Card #

\_\_\_\_\_  
State Number

I do hereby certify that any work subcontracted on this job,  
Permit # \_\_\_\_\_, are duly certified and licensed  
Contractors, and hold a Competency Card in Highlands County.

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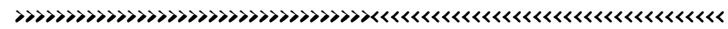
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