



Application to the Fire Marshal

1. Applicant: _____ Telephone #: _____
 Mailing Address: _____ FAX #: _____
 Email Address: _____ Cell #: _____
2. Agent: _____ Telephone #: _____
 Mailing Address: _____ FAX #: _____
 Email Address: _____ Cell #: _____
3. Property Owner: _____ Telephone #: _____
 Mailing Address: _____ FAX #: _____
 Email Address: _____ Cell #: _____
4. Person to Contact: _____ Daytime Telephone # _____
 Email Address: _____

Description of Property

5. Street Address/Location: _____
 Assessor's Map #: _____ Block #: _____ Lot #: _____ Zone: _____

Project Information

6. Project description: _____

This review is being done for an application which is to be submitted to:

- Planning & Zoning Commission Zoning Board of Appeals

The Owner and applicant hereby grant the Clinton Fire Marshal, or authorized agents, permission to enter upon the property above identified for the purpose of inspection to assist the Clinton Fire Marshal in their review.

7. Signatures:
- Applicant: _____ Print Name: _____ Date: _____
- Agent: _____ Print Name: _____ Date: _____
- Owner: _____ Print Name: _____ Date: _____