

# STOREY COUNTY FIRE DEPARTMENT

## Permit Application Requirements

### Contact Information:

**Gary Hames, Fire Chief**

Post Office Box 603  
Virginia City, NV 89440  
Office: (775) 847-0954  
Fax: (775) 847-0987  
ghames@storeycounty.org

**Patty Blakely, Plans Examiner**

Post Office Box 603  
Virginia City, NV 89440  
Office: (775) 847-0954  
Fax: (775) 847-0987  
pblakely@storeycounty.org

**Dean Haymore, Bldg. Official**

Post Office Box 526  
Virginia City, NV 89440  
Office: (775) 847-0966  
Fax: (775) 847-0935  
dhaymore@storeycounty.org

February 4, 2011

# STOREY COUNTY FIRE DEPARTMENT

Post Office Box 603 Virginia City, NV 89440  
 (775) 847-0954 Phone • (775) 847-0987 Fax  
 www.storeycounty.org

Date

## PERMIT APPLICATION

Project Address:		Area: TRI
Project Name:		
Project Description:		
Owner:	Email	Phone:
Address:		Cell:
Builder:	Email	Phone:
Address		Cell:
Contact:	Email	Phone:
Address		Cell:
PERMIT TYPE / PLAN REVIEW:	Detection System: <input type="checkbox"/>	Suppression System: <input type="checkbox"/>
Hazardous Materials: <input type="checkbox"/>	Civil: <input type="checkbox"/>	Other: <input type="checkbox"/>

Project Value	
Based on: <input type="checkbox"/> Actual Value ( <i>Proof Enclosed</i> ) <input type="checkbox"/> Building Standards Valuation: \$ _____	Payment Enclosed: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Permit Amount: \$ _____ Amount Paid: _____ Date: _____ Balance: _____ Receipt #: _____
I will save, indemnify and hold harmless the County of Storey, its officers, employees, and agents against all liabilities, judgments, costs, and expenses which may accrue against them in consequence of the results of the review, inspections, or use of any on-site or off-site improvements placed by virtue hereof, and will in all things strictly comply with all applicable rules, ordinances, and laws. Applicant Signature: _____ Date: _____	

### Hazardous Materials

Anyone storing, handling, or using any amount of hazardous materials is required to complete this section. When quantities of chemicals meet or exceed "Title III of the Superfund Amendments and Reauthorization Act of 1986, and Title III of the Clean Air Act Amendments of 1990" or when required by the Nevada State Fire Marshal, a hazardous materials permit will be required.

Copy this form and complete for EACH chemical.

Item # \_\_\_\_\_ of \_\_\_\_\_

Chemical Name: \_\_\_\_\_ Trade Name: \_\_\_\_\_

Synonyms: \_\_\_\_\_ U.N. #: \_\_\_\_\_

D.O.T. Guide #: \_\_\_\_\_ Chemical Symbol: \_\_\_\_\_ C.A.S. #: \_\_\_\_\_

Nature of Associate Hazard: \_\_\_\_\_ Quantity: \_\_\_\_\_

Product:  Gas  Solid  Liquid

Pressure Stored:  Ambient  High Pressure  Low Pressure

### Fire Department Use Only

#### Description

Physical State: \_\_\_\_\_ Type of Container: \_\_\_\_\_

Appearance/Odor: \_\_\_\_\_

#### Properties

Flash Point: \_\_\_\_\_ Ignition Temperature: \_\_\_\_\_ Boiling Point: \_\_\_\_\_

Vapor Density (Air = 1) \_\_\_\_\_ Water Soluble:  Yes  No  Slightly

Flammable Limits: \_\_\_\_\_ to \_\_\_\_\_ % Specific Gravity (H<sub>2</sub>O = 1): \_\_\_\_\_

#### Health/Safety

Life Hazard Note: \_\_\_\_\_

Recommended Protective Clothing: \_\_\_\_\_

Most Compatible Chemical Suite: \_\_\_\_\_ Level: \_\_\_\_\_

Does Quad County Have This PPE Resource: \_\_\_\_\_

#### Reactivity

Incompatible With: \_\_\_\_\_

Is This On Site:  Yes  No  Not Applicable

Can the Quad County Respond With This Incompatibility: \_\_\_\_\_

#### Recommended Fire Fighting Methods/Agents

Extinguishment Method: \_\_\_\_\_

Neutralization Method: \_\_\_\_\_

Stabilization Method: \_\_\_\_\_

#### Evacuation Distances

Initial: \_\_\_\_\_ Downwind: \_\_\_\_\_ Crosswind: \_\_\_\_\_

Reference # 1 Used: \_\_\_\_\_ Reference # 2 Used: \_\_\_\_\_

Reference # 3 Used: \_\_\_\_\_ Technician Completing: \_\_\_\_\_

Agency: \_\_\_\_\_ Report Attached:  Yes  No

QC Review By: \_\_\_\_\_ Date: \_\_\_\_\_



## Proposed New Permit Fee

**PERMIT FEE TABLE 105.1.1**  
(Adjusted UBC 1997 Table 1A)

TOTAL VALUATION	FEE
\$1.00 TO \$500.00	\$25.85
\$501.00 to \$2,000.00	\$25.85 for the first \$500.00 plus \$3.36 for each additional \$100.00 or fraction thereof, to and including \$2000.00
\$2001.00 to \$25,000.00	\$76.18 for the first \$2,000.00 plus \$15.40 for each additional \$1,000.00 or fraction thereof, to and including \$25,000.00
\$25,001.00 to \$50,000.00	\$430.38 for the first \$25,000.00 plus \$11.11 for each additional \$1,000.00 or fraction thereof, to and including \$50,000.00
\$50,001.00 to \$100,000.00	\$708.13 for the first \$50,000.00 plus \$7.70 for each additional \$1,000.00 or fraction thereof, to and including \$100,000.00
\$100,001.00 to \$500,000.00	\$1,093.13 for the first \$100,000.00 plus \$6.16 for each additional \$1,000.00 or fraction thereof, to and including \$500,000.00
\$500,001.00 to \$1,000,000.00	\$3,557.13 for the first \$500,000.00 plus \$5.23 for each additional \$1,000.00 or fraction thereof, to and including \$1,000,000.00
\$1,000,001.00 and up	\$6,169.63 for the first \$1,000,000.00 plus \$4.02 for each additional \$1,000.00 or fraction thereof

**TABLE 105.1.2**

Service Provided / Special Inspection / Permits	Fee
Fire Hydrant flow test (on-site)	\$150.00/hr
Fire Protection flow test information request	\$25.00/per flow
False Alarm (within 12 months) 3 <sup>rd</sup> and beyond	Cost Recovery Actual Response Minimum \$150.00/hr
Inspections requested after normal duty hours	\$110.00
Additional permit inspections, reinspections due to deficiencies, cancellations, or partial systems including travel time.	\$88.00/hr
Operational permits per IFC section 105	Minimum \$88.00/Permit