



Prosper Fire Department

1500 E First Street.

Prosper, TX 75078

PHONE: (972) 346-9469

FAX (972) 347-3010

www.prosperfire.com

ACCESS CONTROL PERMIT		
PERMIT #:	DATE:	
CONTRACTOR INFORMATION	PROJECT INFORMATION	
NAME:	NAME:	
ADDRESS:	ADDRESS:	
Email:		
FIRST SUBMITTAL (CHECK ONE) <input type="checkbox"/>	RESUBMITTAL (2) (PLANS REJECTED) <input type="checkbox"/>	ADDITIONAL SUBMITTAL (2) (DEVICES ADDED, REMOVED OR RELOCATED) <input type="checkbox"/>
NUMBER OF DEVICES INSTALLED (1) (2):		

PERMIT FEES

\$75.00, plus an electrical inspection and 3rd party review fee(s).

To request a final field inspection call (972) 346-9469 and include the following information: Your company name, name and address of the project, permit number, call back number, contact person and requested date of inspection. **The field inspection requested date is not valid until confirmed by a returned call from this department.**

REFERENCE NOTES:

- (1) INCLUDES ADDING NEW AND/OR RELOCATING EXISTING ELECTRONIC LOCKS, EGRESS, OR INGRESS SYSTEM DEVICES.
- (2) FULL SET OF PLANS AND EQUIPMENT SUBMITTAL REQUIRED. EXCLUDE EQUIPMENT LIST IF ONLY RELOCATING DEVICES.

PERMIT NUMBER: _____

MARK EACH BOX THAT THE REQUIRED INFORMATION IS INCLUDED WITH THE SUBMITTAL OR MARK "NR" IF THE INFORMATION IS NOT REQUIRED.

INCOMPLETE PERMIT APPLICATIONS WILL BE RETURNED WITHOUT A REVIEW.

ALL PLANS SHALL BE FOLDED TO FIT AN 8 ½" X 11" FOLDER and include an electronic copy.

ROLLED PLANS WILL BE RETURNED WITHOUT A REVIEW.

PROVIDE THE FOLLOWING ON ALL PLAN SHEETS (3 SETS REQUIRED):

- _____ 1. YOUR COMPANY NAME, ADDRESS AND PHONE NUMBER.
- _____ 2. PLANNER'S NAME.
- _____ 3. PROJECT NAME AND ADDRESS.
- _____ 4. SYMBOL LEGEND INDICATING THE DEVICE SYMBOL AND DEVICE DESCRIPTION.
- _____ 5. LOCATION OF EACH DEVICE (LOCK, EGRESS BUTTON, CARD READER, POWER SUPPLY ETC.)
- _____ 6. LOCATION OF FIRE ALARM SYSTEM INTERFACE POINT (IF FIRE SYSTEM EXISTS).

PROVIDE THE FOLLOWING IN THE EQUIPMENT SUBMITTAL (3 SETS REQUIRED):

- _____ 8. MANUFACTURER CUT SHEET FOR EACH DEVICE, POWER SUPPLY AND CONTROL PANEL.

I HEREBY CERTIFY THAT THIS SUBMITTAL CONTAINS THE ABOVE INFORMATION AS REQUIRED BY THE TOWN OF PROSPER CODES AND STANDARDS.

SIGNATURE:

(MUST BE SIGNED BY SAME PERSON THAT DESIGNED THE PLANS)

PRINT NAME:

TELEPHONE #:
