



**MERCEDAS FIRE DEPARTMENT
FIRE MARSHAL OFFICE
INSPECTION/TEST REQUEST**



APPLICANT'S NAME: _____

ADDRESS: _____

PHONE: _____ **DATE:** _____

INSPECTION/TEST SITE: _____

INSPECTION/TEST	FEE	AMT.DUE
Annual/Adult Day Care/Child Day Care/Foster Home Inspection	\$50.00	\$ _____
Annual Health Care/ Nursing Home/Hospital Inspection	\$50.00	\$ _____
Business Occupancy Inspection	\$30.00	\$ _____
Plan Review/Inspection after normal working hours (2 hours minimum)	\$25.00/Hr	\$ _____
Burning Permit	\$50.00	\$ _____
LPG Tank Permit	\$50.00	\$ _____
Underground Storage Tank Inspection (Installing, Interior Lining, Inserting or Removal)	\$50.00	\$ _____
Above ground Storage Tank Inspection	10,000 gal or less more than 10,000 gal	\$ _____ \$ _____
Above ground Flammable Liquid Tank Permit	Temporary A. 90 days Temporary B. 180 days Temporary C. 1 year	\$ _____ \$ _____ \$ _____
Automatic Hood Fire Extinguisher Test (Trip/Fire Suppression Test)	\$50.00	\$ _____
Fire Sprinkler/Standpipe Test/Fire Pump/	\$50.00	\$ _____
Above Ground/Underground Hydrostatic Test (allow 2 hrs)		
New Sprinkler System (Plan review)	1-200 HDS 201 or More Over 3,000 HDS	\$ _____ \$ _____ \$ _____
Sprinkler Modify	1-9 HDS 10-2000 HDS	\$ _____ \$ _____
Fire Alarms System Test	\$50.00	\$ _____
Fire Alarm Modify	1-9 Devices	\$ _____
New Fire Alarm (Plan Review)	1-200 Devices	\$ _____
False Alarm (After 2 nd Call/Monthly base)		
	Commercial	\$ _____
	School	\$ _____
	Residential	\$ _____
Fire Reports	\$10.00	\$ _____
Working without permit/Investigation fee	Double Permit Fee	\$ _____
Stand By Fire Company	\$250.00	\$ _____
NSF	\$30.00	\$ _____

INSPECTION OUTSIDE CITY LIMITS
Standard Fee: _____ X 2=
Total Amount Due: \$ _____

NOTE: RETEST AND REINSPECTION WILL BE BILLED AT THE SAME RATE AS THE INITIAL TEST/INSPECTION

White: Fire Marshall

Yellow: Applicant

Pink: Accounting