

Application for Permit  
Request for Service

**Kern County Fire Department**

Office of the Fire Marshal – Fire Prevention

2820 M St. ~ Bakersfield, CA 93301

Telephone (661) 391-3310 ~ Fax (661) 636-0466 or (661) 636-0467

Website: kerncountyfire.org

Email: fireprevention@kerncountyfire.org



Date: \_\_\_\_\_

*To be completed by permit Applicant (PLEASE TYPE)*

Project Name: \_\_\_\_\_

Project Street Address: \_\_\_\_\_

City: \_\_\_\_\_

**Fire Alarm**  
\_\_\_\_ # of Devices

**Hood Suppression**  
Fire Protection Systems

**Automatic Sprinkler**  
Remodel  or New

**Flammable Liquids**  
\_\_\_\_ # of tanks

**Flow Test**

**LPG Tank(s)**  
\_\_\_\_ # of tanks

**Spray Booth**  
spraying & dipping

**Tents/Canopies**  
complete Tent Handout

**Explosives**  
Storage or Use

Name of Water District:

**Special Effects**

**Plan Review**

**Knox Box**

**Other**  
\_\_\_\_\_

Contact # for Water District:

Description of project: \_\_\_\_\_

If additional space is needed please attach to this Application

Will any hazardous materials be stored:  Yes  No

If yes, include a list of containers and quantities: \_\_\_\_\_

**Customer/Applicant Information**

Applicant Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Contractor/Company: \_\_\_\_\_ Phone #: \_\_\_\_\_

Contractor Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contractor License #: \_\_\_\_\_ Class: \_\_\_\_\_ Fax #: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Permit applications may be submitted in person or mailed to:  
**Kern County Fire Department**  
2820 M St.  
Bakersfield, CA 93301  
Attn: Fire Prevention--Permits

**Visa and MasterCard Accepted**  
Please include a check made payable to: **Kern County Fire Department**

FOR OFFICE USE ONLY

Signature

Permit Number: \_\_\_\_\_