

OPEN FLAME PERMIT APPLICATION



LINCOLN COUNTY FIRE MARSHAL'S OFFICE
MAILING ADDRESS: 115 WEST MAIN STREET, LINCOLNTON, N.C. 28092
OFFICE ADDRESS: BASEMENT OF COURT HOUSE, LINCOLNTON, N.C. 28092
PHONE 704-736-8516
FAX 704-732-9036



APPLICATION TO MAINTAIN, STORE OR HANDLE MATERIALS, OR CONDUCT PROCESSES WHICH PRODUCE CONDITIONS HAZARDOUS TO LIFE OR PROPERTY, OR TO INSTALL EQUIPMENT USED IN CONJUNCTION WITH SUCH ACTIVITIES AS REQUIRED BY THE NC STATE BUILDING CODE - FIRE PREVENTION CODE

APPLICATION IS HEREBY MADE BY THE UNDERSIGNED FOR A PERMIT TO

OPEN FLAME

____ USE
____ INSTALL
____ OPERATE
____ CONDUCT

IN OR ON THE PREMISES KNOWN AS _____,
THE FOLLOWING MATERIALS, PROCESSES OR OPERATIONS (describe briefly what is to be done and state what hazardous materials are to be used);

INFORMATION REQUIRED: (Continue on additional pages if needed)

1. State what NFPA Codes are to be met
2. State what NC State Building Code – Fire Prevention Codes are to be met
3. Sketch or map showing the location of equipment or operations
4. No smoking and NFPA 704M signage to be placed in accordance to fire official if required
5. Type, size, quantity and location of Fire Protection Equipment
6. Candles on tables shall be properly protected and affixed (mounted in a secure and non-flammable base that will not tip over)
7. The equipment shall not block or impede exit widths or ways
8. All equipment shall be properly affixed
9. The equipment shall be located in a secure area
10. Adequate safe guards are to be provided to avoid danger of injury to occupants or ignition of combustible materials
11. Type of open flame to be used
12. Immediately upon completion of service all flames shall be properly extinguished

This application shall be considered valid as long as the above criteria, codes and local ordinances are met.

Conditions, surroundings and arrangements to be in accordance with the NC State Building Code - Fire Prevention Code. Complete plans and construction details must be filed on all major projects when requested by the Fire Marshal's Office.

BUSINESS NAME

BUSINESS ADDRESS, CITY, STATE, ZIP CODE

APPLICANT'S SIGNATURE

PHONE NO. _____

DATE _____

In so far as the NC State Building Code –
Fire Prevention Code is concerned, this application is

____ Approved ____ Not Approved

FIRE MARSHAL

DATE _____