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| Current Systems Permit No:  |
| Are you seeking to amend the scope of your current Permit? | Yes [ ]  | No [ ]  |
| Type of Amendment: | Change of Technical Nominee [ ]  | Add [ ]  | Remove Technician [ ]  |
| **You must provide details for Change of Technical Nominee or the Added Technician** |
|  |
| Fire Protection System Re-application to  | Install [ ]  | Maintain [ ]  | Repair [ ]  |

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| **Type of System/s this application relates to:** |
| [ ]  Automatic Fire Sprinkler System | [ ]  Smoke Detection Systems |
| [ ]  Automatic Fire Detection & Alarm System | [ ]  Sound System & Intercom System for Emergency purposes |
| [ ]  Fire Extinguishing System | [ ]  Other – Please describe below |
|  |  |

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| **Applicant Details (These details are mandatory, please provide all details requested)** |
| Name of Applicant |  |
| Name of Company |  |
| Postal Address |  |
| Telephone (Business Hours) |  |
| Telephone (After Hours) |  |
| Mobile |  |
| Email |  |
| ABN |  |

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| **Are you an accredited building practitioner?** | [ ]  No | [ ]  Yes  | Accreditation No. CC |

The Permit holder is responsible for all aspects of work relating to this Permit. As part of the Re-application process, please address the following:

1. When installing, maintaining and/or repairing a fire protection system, the Permit holder must conduct work strictly in accordance with the relevant requirements detailed in the [Tasmania Fire Service “Fire Protection Systems – Code of Practice](https://www.fire.tas.gov.au/userfiles/leighr/file/20220705%20-%20Code%20of%20Practice%20reloaded/TFS%20Code%20of%20Practice%20-%20Decembe~n%202_1%20%28Inc_%20ASE%20Installations%29.PDF)
2. Do you understand and agree to comply with the relevant sections of the Code?

[ ]  Yes [ ]  No

1. Do you have any new employees that now undertake work that were not listed on your previous Permit Application. Have you included all details and documents required?

☐ Yes ☐ No

1. Have any new staff members been fully briefed about their roles and responsibilities working for a Permit holder?

☐ Yes ☐ No

1. Please provide details of adequate after-hours service contact details:

|  |  |  |
| --- | --- | --- |
| Name | Mobile  | Email  |
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| **DECLARATIONS** |

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| **Wet Permit Applicant Declaration** |
| Print Name: of |
| And holding the position of |
| Signed |
| Dated |

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| **Dry Permit Applicant Declaration** |
| Print Name: of |
| And holding the position of |
| Signed |
| Dated |

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| **Gaseous Permit Applicant Declaration** |
| Print Name: of |
| And holding the position of |
| Signed |
| Dated |

Please email your completed application to buildingsafety@fire.tas.gov.au

An invoice will be provided to you and on receipt of your payment, your application will be processed accordingly. Our fees can be found here: [Permit Fees and Charges 2024-2025](https://www.fire.tas.gov.au/userfiles/saraha/file/20230630/Permit%20Fees%20and%20Charges%202023-2024.pdf)

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| **PERMIT SERVICE SCHEDULE**Work completed in the last 12 months |
| Premises(provide all information required to accurately identify the premises) | Type of Systems(e.g. Sprinkler) | Date work conducted | Work conducted(e.g. new installation, routine service etc) | By Whom(who conducted work) |
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