SOUTH SUMMIT FIRE PROTECTION DISTRICT
P.O. Box 660, Oakley, UT 84055 (435) 640-4737

PROJECT CLEARANCE FORM

Date: _____ Time: _____

Lot #: _____ Permit #: _____

Address: _____

General Contractor: _____

Fire Protection Contractor: _____

Reason for Inspection:

❑ Called ❑ Routine ❑ Complaint

Stage:

❑ Partial ❑ Complete

Building Type:

❑ Commercial ❑ Residential

Inspection Type:

❑ Fire Sprinkler
❑ Hydrostatic: U.G.
❑ U.G. Flush
❑ Hood System
❑ State License
❑ Fire / Life Safety Systems
❑ Overhead Piping
❑ Hydrostatic: A.G.
❑ Alarm System
❑ Hazardous Materials
❑ Special Event
❑ Other

Result of Inspection:

❑ Work Approved
❑ Make Necessary Corrections
❑ Work in Violation
❑ Need Approved Plans
❑ Need Revised Plans Approved
❑ Obtain Proper Permit
❑ Work must be completed within _____ Days
❑ Cannot Locate Structure
❑ Building Inaccessible/Locked
❑ Work Covered
❑ Do Not Proceed with Work
❑ Prior Violations not Corrected
❑ Issued Stop Work Order

Type of Clearance:

❑ Shell/Four-way ❑ Temporary _____ Days ❑ Final

Comments: _____

Inspector: _____

❑ To Reschedule Inspection Contact South Summit Fire District at ....(435) 640-4737