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BUILDING DEPARTMENT CONTRACTOR CERTIFICATION

SPRINKLER INSTALLATIONS

(Please print clearly)

BUILDING PERMIT NO.: _____ - _____

SITE ADDRESS: _____

SPRINKLER CONTRACTOR: _____

ADDRESS: _____

PHONE NUMBER _____ POSTAL CODE _____ - _____

DISTRICT OF KENT BUSINESS LICENCE NO.: _____

NAME OF SPRINKLER FITTER: _____

TQ NO.: _____

TQ HOLDER SIGNATURE: _____
TQ HOLDER

DATE: _____

THIS FORM MUST BE SUBMITTED TO THE BUILDING DEPARTMENT AT THE DISTRICT OF KENT
PRIOR TO THE OCCUPANCY SITE VISIT BEING CARRIED OUT BY THE DISTRICT OF KENT BUILDING INSPECTOR