



City of Phoenix

Fire Department

FIRE PERMIT

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150 South 12th Street
Phoenix, Arizona 85034
General Information (602)262-7462

POST THIS PERMIT ON JOB SITE

Permit # F171 1205767	Issue Date 08-OCT-2012	Expires 08-OCT-2015
Permit Description CONDUCT BUSINESS PERMIT		
Project 12-2611		
Address 1830 N 95TH AVE PHOENIX AZ 85037-4407		Zoning
L 5 B * WEST 101 COMMERCE CENTER		Q S Q13-5 APN 102-34-987 Dist 07
Description/Scope of Work: FP FIRE PROTECTION EQUIP COMPANIES		
PERMIT TO CONDUCT THE BUSINESS OF INSTALLING AND SERVICING THE FOLLOWING FIRE PROTECTION SYSTEMS IN THE CITY OF PHOENIX: ***FIRE ALARM SYSTEMS*** ***PORTABLE FIRE EXTINGUISHING SYSTEMS*** ***AUTOMATIC SPRINKLERS***		
BUSINESS CERTIFICATE HOLDER: STEVEN N. KLEIN NICET III		
COMPANY NAME: COPPERSTATE FIRE PROTECTION 1830 N. 95TH AVENUE, SUITE 106 PHOENIX, AZ 85037 623-936-4081		
CUSTOMER COPY		
THIS PERMIT IS NOT TRANSFERABLE		
<i>Steven Klein</i> 10/10/12 COPY RECEIVED BY DATE		
<i>Dean Parkman</i> 10-8-12 ISSUED BY DATE		
<p>I HEREBY CERTIFY THAT I AM CURRENTLY EMPLOYED BY THE COMPANY THAT SEEKS THIS BUSINESS CERTIFICATE. MY SIGNATURE INDICATES THAT I AM THE RESPONSIBLE PARTY FOR SUCH COMPANY, AND AS SUCH, I ACCEPT FULL RESPONSIBILITY FOR ALL JOBS PERFORMED BY COMPANY EMPLOYEES PURSUANT TO THIS BUSINESS CERTIFICATE. I UNDERSTAND THAT AS THE COMPANY'S RESPONSIBLE PARTY, ANY CITATIONS FOR VIOLATIONS OF THE FIRE CODE WILL BE ISSUED TO ME. I AM AWARE EMPLOYEES MUST HAVE A VALID CSA COMPETENT PERSON CARD ON SITE DURING ANY FIRE INSPECTION TO REVIEW WORK PERFORMED UNDER THE AUSPICES OF THIS BUSINESS CERTIFICATE. I AGREE TO NOTIFY THE CITY OF PHOENIX FIRE DEPARTMENT IN WRITING IN THE EVENT I LEAVE EMPLOYMENT OF THIS COMPANY. I UNDERSTAND THAT IF I FAIL TO PROVIDE THE FIRE DEPARTMENT SUCH WRITTEN NOTIFICATION, I WILL CONTINUE TO BE LISTED AS THE RESPONSIBLE PARTY, SUBJECT TO CITATION UNDER THE FIRE CODE FOR ALL WORK PERFORMED BY COMPANY EMPLOYEES. THIS PERMIT SHALL ALSO SERVE AS A CONTRACT BETWEEN THE ABOVE NAMED COMPANY AND THE CITY OF PHOENIX. THE CITY OF PHOENIX, A MUNICIPAL CORPORATION ITS AGENTS, EMPLOYEES AND VOLUNTEERS" SHALL BE NAMED AS AN ADDITIONAL INSURED AND CERTIFICATE HOLDER ON THE COMPANY'S GENERAL LIABILITY POLICY. CERTIFICATE OF INSURANCE AND ARIZONA REGISTRAR OF CONTRACTORS LICENSE MUST REMAIN CURRENT FOR THIS PERMIT TO REMAIN VALID.</p>		
Owner Information		Certificate of Occupancy Type: COFC
Name Address		
Contractor Information		Contact Phone
Name OWNER/GENERAL	Ins	Exp
Address	City/St/Zip PHOENIX AZ 85027	Phone
Instructions and Comments		Permit Issued By JPA1 Entered By JPA1
Inspections Required: FIRE-GEN		