



San Patricio County Fire Marshal's Office

Scott Marion – Fire Marshal

313 N. Rachal, Room 230

Sinton, Texas 78387

(361) 587-3558

smarion@sanpatriciocountytx.gov

APPLICATION FOR FIRE INSPECTION

APPLICANT INFORMATION

Full Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone 1: _____ Phone 2: _____

Email Address: _____

Name of Business: _____

Address of Business: _____

After Hours Contact for Business: _____ Title for Contact: _____

After Hours Contact Phone: _____

INSPECTION INFORMATION

Need for Inspection:

New Construction: _____ Remodel: _____ Change of Occupancy: _____

Annual Inspection: _____ Foster Care: _____ Re-Inspection: _____

Industrial: _____ Agricultural: _____ Other: _____

Type of Inspection Needed: _____

Operational Permit Required? _____ State or Government Required Inspection? _____

If State or Government Required, who is the Agency Requiring Inspection: _____

Date of Last Inspection: _____ Square Footage of Building: _____

If this is NOT new construction, skip this section and proceed to the next section

NEW CONSTRUCTION INSPECTIONS ONLY:

Permit Number: _____

Construction Company: _____ Main Phone Number: _____

Contact for Construction Company: _____ Contact Phone Number: _____

Email for Contact: _____

Engineering or Architectural Company Drafting Plans: _____

Address of Firm Drafting Plans: _____

Phone Number of Firm Drafting Plans: _____

Contact at Firm Drafting Plans: _____ Phone Number for Contact: _____

Email for Contact: _____

Does Project Include a Sprinkler System: Yes _____ No _____ Fire Alarm: Yes _____ No _____

Date and Type of Last Inspection on Project: _____

ANY ADDITIONAL INFORMATION NEEDED:

FINALIZE APPLICATION

Printed Name of Person Requesting Inspection: _____

Date Application Submitted: _____ Fee Amount Paid: _____

Fire inspection fees are required at the time of the inspection application is submitted. No inspection will be scheduled or acted upon with the inspection fee being paid in advance. The inspection fees are non-refundable. By signing below, I agree that I understand with this policy.

Signature: _____ Date: _____