



201 Bolivar Street/PO Box 1729 * Sanger, TX 76266
940-458-2059(office) www.sangertexas.org

FIRE SUPPRESSION/ VENT-A-HOOD SYSTEM PERMIT APPLICATION

Date: _____

Property Address: _____

Property Owner: _____ Phone: _____

Contractor: _____

Contractor Address: _____

City, State, Zip: _____

Phone Number: _____

Registered with City YES / NO - Registration #: _____

Signature of Applicant

Date