



City of Phoenix Fire Department

FIRE PERMIT

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150 South 12th Street
Phoenix, Arizona 85034
General Information (602)262-6771

POST THIS PERMIT ON JOB SITE

Permit # F171 2208651	Issue Date 06-SEP-2022	Expires 30-SEP-2025
Permit Description MOUNTAIN ALARM DBA COPPERSTATE		
Project 22-3054		
Address 150 S 12TH ST PHOENIX AZ 85034-2301		Zoning
L 1 B * PHOENIX FIRE OPERATIONS CENTER	Q S Q10-29	APN 116-44-088
		Dist 08

Description/Scope of Work: FP FIRE PROTECTION EQUIP COMPANIES
 COMPANY NAME: Mountain Alarm dba Copperstate Fire Protection / crogers@copperstatefire.com / 623-936-4081
 8415 W Sherman St, Tolleson, AZ 85353

Certificate to conduct the business of installing/modifying/testing the following fire protection systems in the City of Phoenix: SPECIAL SUPPRESSION SYSTEMS - STEPHEN PETTY - CSA 20279 - EXP 09/2024

Certificate to conduct the business of installing/modifying/testing the following fire protection systems in the City of Phoenix: KITCHEN HOOD EXTINGUISHING SYSTEMS - STEPHEN PETTY - CSA 20279 - EXP 09/30/25

Certificate to conduct the business of installing/modifying/testing the following fire protection systems in the City of Phoenix: AUTOMATIC SPRINKERS - STEPHEN PETTY - CSA 20279 - EXP 09/30/24

This certificate expires when the credentials expire earlier than the KIVA permit expiration date.

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 competent person card certification 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.

ISSUED BY _____ DATE _____

Valuation: \$0

Owner Information		Certificate of Occupancy Type: COFC
Name	PHOENIX CITY OF	
Address	251 W Washington St 8th Fl PHOENIX AZ 85003	
		Fax Phone

Contractor Information		Type	Contact Phone 623-936-4081
Name	COPPERSTATE FIRE PROTECTION	Ins	Exp
Address	8415 W. SHERMAN ST.	City/St/Zip	TOLLESON AZ 85353
			Phone 623-936-4081

Permit Issued By	ASM3	Entered By	ASM3
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Instructions and Comments

Inspections Required: FIRE-GEN