



ALEXANDER COUNTY FIRE MARSHAL

Mark Earle , Fire Marshal
621 Liledoun Road
Taylorsville NC 28681
(828) 632-9336
(828) 632-1707 FAX

APPLICATION FOR PERMIT

Name of Company or Responsible Party: _____

Address of Company or Responsible Party: _____

Phone Number: _____ Fax Number: _____

Name of Person Making application: _____

Address at site for work to be performed: _____

Directions to site: _____

Date of Function if applicable: _____

Explain below the process for which you are requesting a permit:

If insurance is required please provide a copy of policy with agent, policy number, and coverage type.

To the best of my knowledge the above information is true and accurate.

Signature of Applicant

Date