

**FIRE INSPECTION DIVISION**

Office: 400 South Cherry St., Wilkesboro, NC 28697

Tel: 336-667-6228 | Fax: 336-838-9905

**EXHAUST HOOD PERMIT APPLICATION**

All sections are required to be filled out completely and legibly.

**SECTION A - Building Location and Ownership Information**

Building Name	Former Name if Applicable
Building 911 Address	
Building Owner	
Address City, State, Zip	
Phone	Email

**SECTION B - Applicant Information**

Company	Contact Person
Address City, State, Zip	
Phone	Email

**SECTION C - Exhaust Hood System**

Complete for all new exhaust hood installations or alterations to existing systems.

Installer	Installer Email
Hood Type: <input type="radio"/> Type 1 <input type="radio"/> Type 2 <input type="radio"/> Other:	
Size of Hood: Length      Width	Size of Duct
Total Square Feet of Hood Opening	Sq feet of duct
Filter Size      Sq inches per filter	Fan CFM
Total Number of Filters:	Calculated Duct Velocity
Surface the hood is mounted on: <input type="radio"/> Combustible <input type="radio"/> Limited Combustible <input type="radio"/> Non-Combustible	Hood Construction: <input type="radio"/> No. 18ga Carbon Steel <input type="radio"/> No. 20ga Stainless Steel
Indicate clearance provided:      inches	Duct Construction: <input type="radio"/> No. 16ga Carbon Steel <input type="radio"/> No. 18ga Stainless Steel

**SECTION D - Project Specific Details**

All shop drawings should be drawn on sheets of uniform size and at a minimum should include the following information: Submittals shall be in accordance with NFPA 91 and NFPA 96 and the following:

- (a) Plans shall include complete hood, duct, and mounting dimensions.
- (b) Plans shall include distance from combustibles.
- (c) Plans shall include a roof detail showing the exhaust fans and all equipment within 15ft
- (d) Specific information and manufacturers UL listing shall be provided for all hoods calculated for other than code requirements.
- (e) Complete calculations shall be shown for both CFM and FPM used in sizing the exhaust duct fan.

<b>Project Start Date</b>	<b>Project Completion Date</b>
---------------------------	--------------------------------

**SECTION E - Fees**

Hood System	
Consulting Design	\$
(May checks payable to the Town of Wilkesboro) Total Fee	\$
Signature of Applicant:	Your signature attest to the accuracy of the information provided on this form, to include specific manufacturer details.