



**Fire Service Authorization
Engineering Department**

Date: _____ Project File No.: _____ Building Permit No.: _____
Federal Tax ID: _____ Business License No.: _____

Box below to be filled out completely by the applicant

GC _____ Ontario Ranch _____	Development No.: _____	Parcel/Tract No.: _____	APN: _____
Industrial _____ Commercial _____ Residential _____	Lot No.: _____	Phase No.: _____	
Land Use: _____	Project Area: _____ ac		
Service Address*: _____			
Business Name: _____		Contact Name: _____	
Billing Address: _____			
City, State, ZIP: _____			
Phone Number: _____		Alt Number: _____ Email: _____	
*PLEASE LIST ALL ADDRESSES WHEN MULTIPLE BUILDINGS ARE BEING SERVICED			
Total Number of Fire Lines within Public Right-of-Way: _____			
	Pipe Size	Location	
Fire Line 1	_____	_____	
Fire Line 2	_____	_____	
Fire Line 3	_____	_____	
Fire Line 4	_____	_____	
<input type="checkbox"/>	Copy of City approved plan with fire service location and size attached (required)		

Important Information:

To have Fire Protection Service turned on, please call Revenue Services Department at (909) 395-2050 at least three days in advance to start service and coordinate backflow testing. An advance water payment may be required along with proper identification and, if applicable, a City of Ontario business license.

_____ Applicant's Name (please print)	_____ Applicant's Signature	_____ Date
Approved: _____ By Permit Engineer for City Engineer	Approved: _____ Inspector Approval for Installation	_____ Date

Distribution: (1) Applicant (2) Engineering (3) OMUC (4) Public works (5) Revenue