

BOSTON

FIRE COMMISSIONER
PAUL A. CHRISTIAN

FIRE MARSHAL
DEPUTY FIRE CHIEF PETER A. LAIZZA

APPLICATION FOR INSTALLATION OF INTERIOR FINISH
VINYL WALLCOVERING AND CEILING TILES
{COMPLETE IN INK ONLY}

DATE: _____

BFD CERT.NO.:
(FOR OFFICE USE ONLY)

SUBMITTER: _____

COMPANY NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

TELEPHONE NO.:(_____) _____ FAX NO.: (_____) _____

STREET ADDRESS OF PROPOSED INSTALLATION: _____

NAME OF PROPERTY: _____

SPECIFIC LOCATION WITHIN PROPERTY: _____

AUTOMATIC SYSTEM: _____

IDENTIFICATION OF MANUFACTURER AND PRODUCT(Pattern No.,Style):

1. _____
2. _____
3. _____

RESULTS OF **ASTM E84** = _____ **FLAME SPREAD**= _____ **SMOKE DEVELOPED**= _____
(Attach **ASTM E84 Tunnel Test REPORT**)

NAME OF TESTING LABORATORY: _____

DATE TEST PERFORMED: _____

OTHER INFORMATION: _____

SIGNATURE OF APPLICANT: _____

ENC: SIGN APPLICATION & ATTACH COPY OF **ASTM E84 FIRE TEST REPORT**, FOR THE PROPOSED PRODUCT TO BE USED AND THE FEE OF **\$14.00** PER **STYLE/MATERIAL**. MAKE CHECK PAYABLE TO THE CITY OF BOSTON. APPROVED PERMITS WILL BE MAILED TO SUBMITTER.
5/29/97