



# Fairbanks North Star Borough

ASSESSING DEPARTMENT

## Fire Prevention Equipment Exemption Application

DEADLINE to apply is FEBRUARY 14<sup>th</sup>

assessor@fnsb.gov  
Main: (907) 459-1428  
Fax: (907) 459-1416

Date of Application: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Parcel Account Number: \_\_\_\_\_ Situs Address: \_\_\_\_\_

Property Description: \_\_\_\_\_

Type of qualifying fire prevention system installed (see attached list): \_\_\_\_\_

\_\_\_\_\_

Date of Installation: \_\_\_\_\_ Name of Installer: \_\_\_\_\_

### AFFIDAVIT:

To be signed by a licensed installed, qualified system inspector, Fire Marshall or designated representative. (Signature waived if supported with attached documents demonstrating qualifications of system.)

**I hereby certify that the above listed equipment is installed and operating at the location stated above.**

\_\_\_\_\_  
Signature Date Title

Contact Person: \_\_\_\_\_ Telephone No.: \_\_\_\_\_

