

Nancy S. Mikeska, Director

Chuck Purvis, Certified Building Official



CITY OF CONROE
COMMUNITY DEVELOPMENT
(936) 522-3610

**CONROE FIRE DEPARTMENT
CANDLE PERMIT APPLICATION**

Date: _____ Time: _____ Permit# _____

Candles Used For _____

Name of Building: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____

Occupancy Class: _____

- Temporary Permit
- Permanent Permit

Applicants Name: _____

Use Will Commence on Date: _____ Time: _____

And Will Terminate on Date: _____ Time: _____

Inspected By: _____ Date: _____ Time: _____

Permit:

- Approved
- Disapproved

Reasons or Comments:
