



DEPARTMENT OF  
BUILDINGS & REGULATORY COMPLIANCE

200 HENRY JOHNSON BLVD.—SUITE 1 | ALBANY, NY 12210  
518.434-5995 | FAX 518.434.6015 | EMAIL: CODES@ALBANYNY.GOV

## SPRINKLER REGISTRATION FORM

This form must be filled out completely and legibly. **Email addresses are now required.**

Building Address \_\_\_\_\_  
Owner of Record: \_\_\_\_\_  
Owner's Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Owner's Phone: \_\_\_\_\_  
**Owner's Email:** \_\_\_\_\_  
\_\_\_\_\_  
Agent's Name: \_\_\_\_\_  
Agent's Address: \_\_\_\_\_  
\_\_\_\_\_  
Agent's Phone: \_\_\_\_\_ (Daytime)  
\_\_\_\_\_ (Alternate)  
**Agent's Email:** \_\_\_\_\_  
\_\_\_\_\_

### OFFICIAL USE ONLY

Date Rec'd \_\_\_\_\_

Fee: **\$50.00** \_\_\_\_\_

Check No. \_\_\_\_\_

Reg. No. \_\_\_\_\_

- If owner does not reside in the tri-county area of Albany, NY an agent within this area must be designated.
- If the owner is a company/partnership/corporation an individual must be designated as the agent.
- If you have any questions on completing the information, please contact the Department of Buildings & Regulatory Compliance - (518) 434-5995.

I hereby certify that the above sprinkler is inspected and/or tested in accordance with the requirements of NFPA 25. Records of such inspection and/or testing is maintained on the property site and will be made available for review at any and all times.

Signed: \_\_\_\_\_ Title: \_\_\_\_\_  
Name: \_\_\_\_\_ Company: \_\_\_\_\_  
Date: \_\_\_\_\_

Please return this form along with the fee to the Department of Buildings & Regulatory Compliance - Make checks payable to "City of Albany".

### Credit Card Information

Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ CVV #: \_\_\_\_\_

Thank you!