



Form Name: _____ Receipt: _____
Annual Inspection Entered By: _____

Fire and Life Safety Inspection Application (Annual Inspections)

Please mail or deliver this completed application form, a copy of your license, and payment. Payment must, Money Order, or Cashier's Check, styled to Waller County. No personal or company checks accepted. Make fees payable to Waller County Fire Marshal's Office. No refunds will be permitted once the application has been received.

***Required Fields – Your application will be rejected if any of these are left blank.**

Customer Information

Customer Name*: _____

Physical Address*: _____ City*: _____ Zip*: _____

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

Contact Person*: _____ Phone*: _____ Email: _____

Licensing Agency Information

Licensing Agency*: _____ Representative*: _____

Licensing Phone*: _____ Licensing Email (or Fax)*: _____

Application Instructions

Your application packet should include:

- This application, filled out entirely
- The appropriate fee and payment type
- A copy of your license (required)

Fee Schedule

Foster Care/ Daycare/ Commercial Business	\$110
Nursing Home/ Assisted Living/ School	\$275

Delivery Options

Option 1: Hand Delivery

Waller County FMO
836 Austin Street, Suite 103
Hempstead, Texas 77445

Option 2: Mailing Address

Waller County FMO
836 Austin Street, Suite 103
Hempstead, Texas 77445

It takes up to two weeks between the date we receive the complete application and inspection.

If you submit or alter any of this application or WCFMO document with false information, you may be charged with tampering with a government document, under Texas Penal Code 37.10 TAMPERING WITH GOVERNMENTAL RECORD.