Sacramento Metropolitan Fire District
Community Risk Reduction Division

10545 Armstrong Avenue, Suite 310 · Mather, CA 95655 · Phone (916) 859-4330 · Fax (916) 859-3717

Mark A. Wells
Fire Chief

LOW LEVEL KNOX DEVICE

(Emergency Gate Access)

1. PLEASE COMPLETE THE FOLLOWING THREE (3) APPLICATIONS:

Sacramento Metropolitan Fire District Knox Project Application
Complete all sections. Order will not be processed without a parcel number.
For a parcel number contact the **Sacramento County Assessor at (916) 875-0700**.

Sacramento County Sheriff's Department Gate Emergency Access Permit
Only one address per application permitted.

Knox Authorization Order Form
Complete sections 1, 3, 4, 5 & 6. ***Do not fill out Section 2 - This section is for Official use only.*** After review by Sacramento Metropolitan Fire District, we will forward the forms onto the necessary parties for processing. Delivery will take approximately 10-15 business days. Your product will ship to the address listed in section 6.

Time-Sensitive Orders: Please call the Knox Company at (800) 552-5669 to get a quote for "Next Day" or "2nd Day" Priority Shipping rates.

2. FEES ARE MADE PAYABLE TO THE FOLLOWING:

Sacramento Metropolitan Fire District
A $91.00 processing fee – Metro Fire accepts: Check, Money Order, Master Card or Visa.

County of Sacramento
A $32.00 Permit fee – County of Sacramento accepts: Check or Money Order Only.

The Knox Company
For the total cost of your Knox order - Shipping & Handling and 8.0% Sales Tax must be included. The Knox Company accepts: Check, Money Order, Master Card or Visa.

3. PROCESSING INFORMATION:

The three (3) completed forms and funds are to be sent or delivered to the following address for processing:

SACRAMENTO METROPOLITAN FIRE DISTRICT
Attention: KNOX PROGRAM
10545 ARMSTRONG AVENUE, SUITE 310
MATHER, CA 95655

Please Do Not send your order directly to the Knox Company or your order will not be processed.

Notice

Per the Sacramento County Amendments to the 2007 California Fire Code, all new gates or barriers shall meet the minimum requirements as set forth in the County/City Emergency Access Gates and Barriers Standard. If you are ordering KNOX equipment for a new gate or barrier installation, you must obtain a permit for installation prior to ordering the equipment. Failure to comply will subject the applicant to this District's Administrative Fine Policy.

Sacramento Metropolitan Fire District
Community Risk Reduction Division

10545 Armstrong Avenue, Suite 310 · Rancho Cordova, CA 95655 · Phone (916) 859-4330 · Fax (916) 859-3717

Mark A. Wells
Fire Chief

KNOX PROJECT INFORMATION

Please print clearly and enter all of the information requested.

A PROCESSING FEE OF $93.00 MADE PAYABLE TO SAC METRO FIRE IS DUE AT THE TIME OF SUBMITTAL.

LOCATION OF KNOX DEVICE:

Parcel Number: _____ - _____ - _____
You may contact the County Assessor's Office at **916-875-0700** to obtain the Parcel Number requested below.

Project Name: _____

Project Address: _____ City: _____ Zip: _____

Reason for Inspection: _____

APPLICANT INFORMATION:

Company Name: _____

Contact Name: _____ Phone: _____ Fax: _____

Cell: _____ E-mail Address: _____

Address: _____ City: _____Zip _____

By: (PRINT/TYPE) _____ Signed: _____

OFFICE USE ONLY

SUBMITTED TO KNOX CO. ON: SUBMITTED BY: MAIL ☐ EMAIL ☐

OCCUPANCY ID: _____ PERMIT #: _____

ACCOUNT ID: _____ INVOICE #: _____

Sacramento Metropolitan Fire District

Community Risk Reduction Division **www.metrofire.ca.gov**

10545 Armstrong Ave., Suite 310 · Mather, CA 95655 · Phone (916) 859-4330 · Fax (916) 859-3717

Mark A. Wells
Fire Chief

CREDIT CARD PAYMENT AUTHORIZATION FORM

Please print clearly and enter all of the information requested. Complete this form and return it by fax to 916-859-3717 or by E-mail To crrdstaff@metrofire.ca.gov

FOR OFFICE USE ONLY

Occupancy ID: _____ Received Stamp:

Permit #: _____

Account#: _____

Invoice #: _____

RCV'D By:_____

Occupancy ID: _____ Permit #: _____

Project Name: _____

Project Address: _____

City: _____ Zip:_____

Type of Card ☐ Visa ☐ MasterCard ☐ Discover

Card #_____ 3-digit security code (on back of card): _____

Expiration Date _____ Authorized Charge Amount: $ _____

Cardholder Name: _____ Phone#_____

Credit Card billing address: _____ Zip Code: _____

Email Address: _____

Cardholder Signature: _____ Date:_____

***** YOUR SIGNATURE HEREBY AUTHORIZES SACRAMENTO METROPOLITAN FIRE DISTRICT TO CHARGE THE CREDIT OR DEBIT CARD REFERENCED ABOVE FOR THE AMOUNT STATED ON THIS FORM. *****

MECHANICAL GATE EMERGENCY ACCESS CONTROL PERMIT INFORMATION SHEET

It is impossible for each Fire Department or Sheriff's Department emergency vehicle to carry separate keys, cards, remote control transmitters, etc., to gain access through the numerous vehicle and pedestrian gates in the unincorporated area of the county. Emergency response must be accomplished in a timely non-destructive manner. Consequently, it is a legal requirement that you provide access for emergency service providers through your mechanical gate, pursuant to the Uniform Fire Code and Sacramento County Code 16.70.

The procedure for permit, purchase and installation of an emergency access control device(s) are as follows:

1. Completion of Sacramento County Sheriff's Department "Mechanical Gate Emergency Access Control Permit Application" form. Payment of **$32.00** fee payable to County of Sacramento – **Check or Money Order ONLY**.

   Conform to permit requirements. (Consultation with your local Fire Marshal and the Sheriff's Crime Prevention Unit will be necessary.)

2. Completion of the access control device order form (white with red print), accompanied by payment in full for the device(s) to "The Knox Company" (to be completed after consultation with the Fire Marshal and/or the Sheriff's Crime Prevention Officer).

3. The permit application, process fee, access control device order and payment are to be sent to:

   Sacramento Metropolitan Fire District
   10545 Armstrong Avenue, Suite 310
   Mather, CA 95655
   Attn: Knox Program Manager
   (916) 859-4330

   When approved, the order will be forwarded to the vendor.

4. On receipt, the access control device(s) are to be installed and maintained in working order.

5. The Fire Marshal must be called for final inspection prior to use of gate(s).

If you have any questions, consult you local Fire Marshal and/or Sacramento County Sheriff's Department Towing Enforcement Unit at (916) 876-6641.

SCOTT R. JONES
Sheriff

SACRAMENTO COUNTY SHERIFF'S DEPARTMENT
MECHANICAL GATE EMERGENCY ACCESS CONTROL PERMIT APPLICATION
PLEASE PRINT OR TYPE

LOCATION OF GATE(S) (EXISTING OR PROPOSED) – Include address and cross streets

TYPE OF DEVICE ☐ PADLOCK ☐ KEY SWITCH ☐ KEY-BOX

1. NAME OF BUSINESS/RESIDENTIAL COMPLEX _____ PHONE _____

ADDRESS _____
NUMBER STREET CITY STATE ZIP

2. EMERGENCY CONTACT

_____
OWNER'S NAME HOME ADDRESS CITY STATE HOME PHONE

It is your responsibility to notify the Sheriff's Department Crime Prevention Unit, in writing, of any changes in ownership and key personnel to be notified in an emergency.

PERMIT REQUIREMENTS:

1. Permittee(s) to submit plans indicating location(s) and specifications of gate(s) for approval (when requested).
2. Permittee(s) to provide access roadway to the satisfaction of the Fire Department pursuant to Section 10.207 A-D of the Sacramento County Uniform Fire Code.
3. Permittee(s) to provide and post "No Parking-Fire Lane" sign at gate(s), if needed.
4. Permittee(s) to provide "Knox Box" key operated override switch and/or "Knox Box" vault and/or "Knox Lock" padlock system at gate(s) to the satisfaction of the Sheriff.
5. Payment of the appropriate permit fees.

NOTE: Final approval will not be granted until the system is physically inspected for proper operation and compliance with County Code requirements.

Signed _____ Title _____

FOR OFFICE USE ONLY

PLAN REVIEW
COMMENTS: _____ FIRE DEPARTMENT _____

KNOX® Rapid Entry System Fire • EMS • Law Enforcement • Government

2016 AUTHORIZATION ORDER FORM

800-552-5669 • 623-687-2300 • Fax: 623-687-2290 • WWW.KNOXBOX.COM

FIRE DEPARTMENT KNOX LIFE SAFETY SYSTEM FIRE & RESCUE ENTRY

Effective January 1, 2016

16- 045791

Section 1 ORDERED BY ☐ CONTRACTOR ☐ PROPERTY OWNER ☐ GOV. AGENCY

COMPANY / AGENCY

DATE ORDERED

STREET

SUITE / BUILDING

CITY, ST, ZIP CODE

CONTACT NAME

P.O. NUMBER (GOV. AGENCIES ONLY)

PHONE NUMBER

E-MAIL ADDRESS

Section 2 ORDER WILL NOT BE PROCESSED Without Authorized Signature

Sacramento Co Sheriffs Dept Towing Enf
2897 KILGORE RD
RNCHO CORDOVA CA 95670-6105

Authorized Signature and Date

Print Name Clearly

PS-01-0145-03-82

System Code

Low Level Security Device for Gates

Section 3 PRE-PAYMENT INFORMATION REQUIRED

☐ Check or Money Order made payable to:
KNOX COMPANY Federal I.D. #95-3617858

VISA MasterCard DISCOVER AMERICAN EXPRESS

EXP. DATE (MM / YY)

CARD NUMBER

NAME ON CARD

Credit Card Orders can be FAXED or scanned and emailed to: **orders@knoxbox.com**

Cardholder Signature

Section 4 ORDER PRODUCT HERE – USE ATTACHED PRICE LIST

Quantity	Part#	Weight Ea.	Price Ea.	Extended Price
			$	$
			$	$
			$	$

Sub-master Fee (if required, $7.00 ea.) $

Shipping and Handling $

Subtotal $

CA TAX Required

Sales Tax $

Pre-payment Total $

Ground Shipping & Handling

1 lb.	to	7 lbs.	$15.00
8 lbs.	to	16 lbs.	$28.00
17 lbs.	to	30 lbs.	$40.00
31 lbs.	to	50 lbs.	$50.00
51 lbs.	to	75 lbs.	$60.00

Please call Knox for quote: 75 lbs.+ and/or Alaska, Hawaii, Canada

Section 5 INSTALLATION ADDRESS - REQUIRED BY AUTHORIZED AGENCY

☐ NEW CONSTRUCTION ☐ RETROFIT

BUILDING NAME (WHERE ITEM WILL BE INSTALLED) - PLEASE TYPE ADDITIONAL INSTALLATION ADDRESSES ON A SEPARATE SHEET (REQUIRED BY FIRE DEPT.)

STREET ADDRESS (NO P.O. BOXES)

CITY, ST, ZIP CODE

Section 6 SHIP TO ADDRESS IS REQUIRED ☐ SAME AS INSTALL ADDRESS

SHIP TO CONTACT NAME

COMPANY NAME

SUITE

STREET ADDRESS (NO P.O. BOXES)

CITY, ST, ZIP CODE

RUSH? Call for Rates and Check Box: ☐ Next Day Air ☐ 2nd Day Air

OFFICE USE ONLY

O/N

REC'D

Send this form with payment to:
KNOX COMPANY
1601 W. Deer Valley Road
Phoenix, AZ 85027

2016 Low Level Security Price List - www.knoxbox.com

Pedestrian Gate Box 1650

Holds 1-2 Keys
Ship Weight = 7 lbs.

#1658

#1650

Door Type	Mount Type	Tamper Switch	Color	Part Number	Price
Hinged Door	Surface Mount	—	Black	1658	$231.00
Lift-Off Door	Surface Mount	—	Black	1650	$205.00

Knox® Padlock

Ship Weight = 2 lbs.

#3770

Part	Part Number	Price
Exterior - All Weather Conditions 7/16" diameter stainless steel shackle, 1-13/16" H shackle clearance	3770	$94.00

Knox® Key Switch

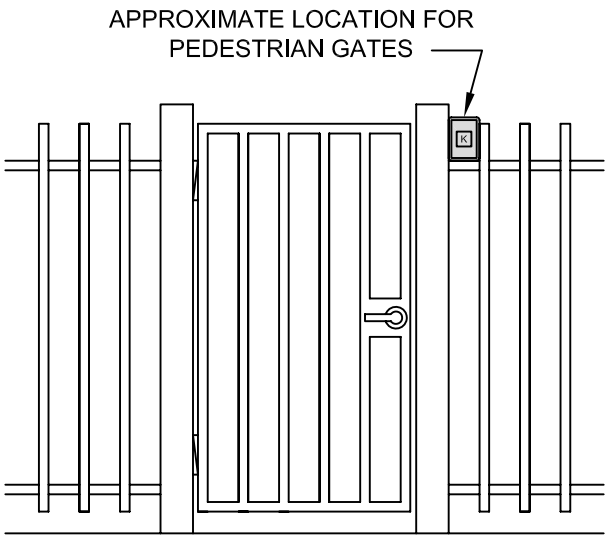
Ship Weight = 1 lb.

#3501

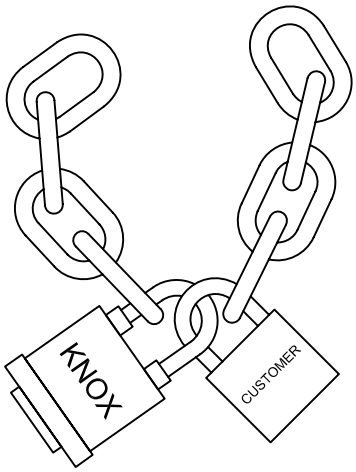
#3502

Part (includes all stainless steel dust cover)	Part Number	Price
Key Switch	3501	$82.00
Key Switch on Mounting Plate	3502	$100.00

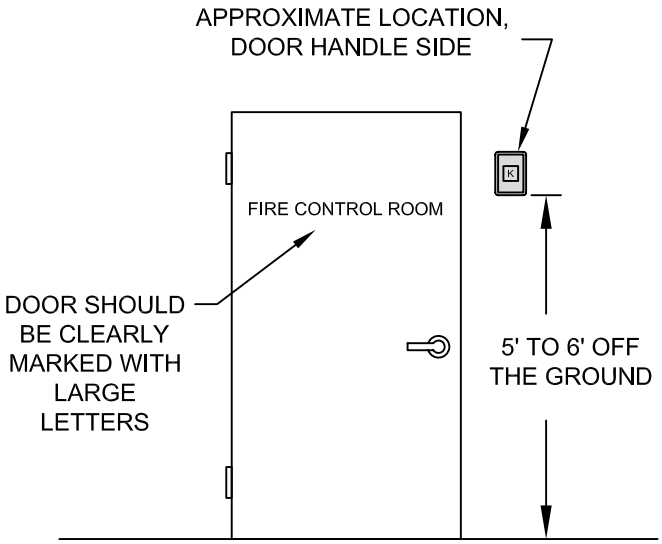
KNOX INSTALLATION GUIDE



PEDESTRIAN GATE



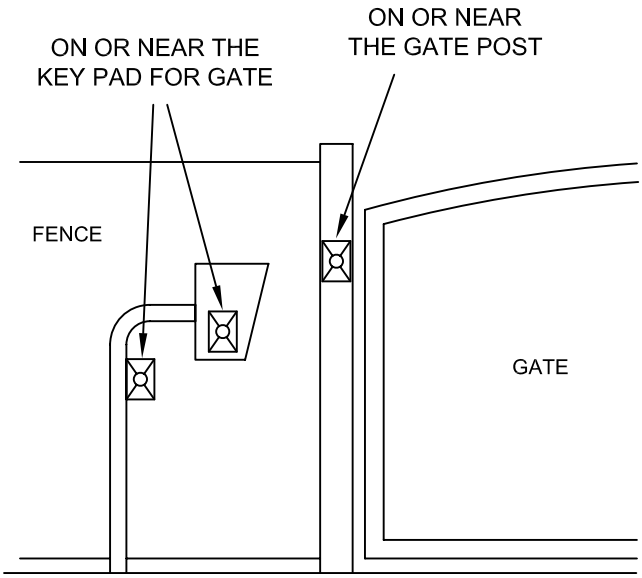
PADLOCK WITH CHAIN



BUILDING INSTALLATION

FIRE CONTROL ROOM,
FIRE ALARM PANEL, SMUD ROOM

(CAN BE MOUNTED AT FRONT ENTRY WITH
FIRE DEPARTMENT PERMISSION)



KEY SWITCH FOR AUTOMATIC GATES

MOUNT KEY SWITCH IN AN
EASY TO SEE LOCATION