Please Print

OFFICE OF STATE FIRE MARSHAL APPLICATION FOR FIRE PROTECTION PLAN REVIEW - <u>BUILDING</u>

Please Print

Sussex County Delaware Fire Service Center 22705 Park Avenue Georgetown, DE 19947-6303 302-856-5298/Fax 302-856-5800 Kent County
Delaware Fire Service Center
1537 Chestnut Grove Road
Dover, DE 19904-1544
302-739-4394/Fax 302-739-3696

New Castle County Delaware Fire Service Center 2307 MacArthur Road New Castle, DE 19720-2426 302-323-5365/Fax 302-323-5366

1. Project Name:		Building	Unit	Phase
Subdivison/Complex / Address:				
	Zip Code	County (NC, K, S):	Nun	nber of Stories:
0 1. T D 1M 1			Iding to be sprinkle	
		-		y sprinkler form is required.
Square Footage: Existing:	Proposed:			
2. Project Description: New	☐ Addition ☐ Renovation	☐ Tenant ☐ Other _		
This building will be utilized for:				
3. Fee Calculation: Building Construction	n Cost: Fee:	Check #:	Dер	osit/Rtn Date:
Exempt Status: O State O County O (Check or Money Order made payable to the		ompany/Amb O Municipali NO CASH AC		
4. Applicant Phone:		5. Engineer/Architect	Phone:	
Cell Phone:			Cell Phone:	
*Signature required in Item #8 Fax:			Fax:	
Applicant's Name:		Name:		
Company Name:		Address:		
Address:		City:	State:	ZipCode:
City: State:	ZipCode:	Email:		
Email:				
6. Property Owner: Phone:		7. Contractor/Installer	Phone:	
Cell Phone:			Cell Phone:	
— Fax:			Fax:	
Name:		— Name:		
Address:		Address:		
City: State:	ZipCode:	City:	State:	ZipCode:
Email:		Email:		
Any approval of the submitted project doc to comply with applicable provisions of the 8. Applicant Signature:	e Delaware State Fire Prevention	Regulation.		ive from their responsibility
FOR OFFICE USE ONLY:				
FIRE PR		DATE		
I.D. # Plan Review #			Rolled plans	



GROVER P. INGLE STATE FIRE MARSHAL DOVER OFFICE HEADQUARTERS

Building Plan Submittals

Is you	r building plan drawn to scale and does it include the following information?
	Name and address of building
	Owner of the building
	Name and address of applicant submitting plans
	Design Professional's name and address
	Detailed construction information
	Narrative description of building occupancy and operations
	Full height cross section plan of building including all vertical openings, shafts, enclosures, etc.
	Note whether building is to be sprinkled and, if so, what areas
	Detailed HVAC information
	Specific information on all means of egress components including clear widths, fire resistance rating,
	direction swing of doors and locking mechanisms on exit doors
	Location of all "hazardous areas" as defined in the Life Safety Code, NFPA 101
	Floor plan of seats, tables, displays, decorations, etc. in all places of assembly which do not have fixed seating or displays
	Electrical plan including location of exit signs and emergency lighting when required
	Detailed information pertaining to any detection or alarm systems to be installed including but not
	limited to the make, type and location of all associated equipment
	Narrative description of proposed method for sealing penetrations of fire rated assemblies.
	For new buildings that will include automatic sprinklers, the <i>Preliminary Sprinkler Form</i> and applicable attachments are required to be submitted with building plans
	For installations of new fire pumps driven by an electric motor please refer to Electrical Plans for Fire
	<i>Pumps.</i> Approval documentation will need to accompany the building plan submittal.
Do yo	u have the following items ready for submittal?
П	One (1) copy of your building construction plans
П	Application for Fire Protection Plan Review
	Building Plan Review Fee: Multiply the construction costs by \$0.007 for the first million, and \$0.003
	over the first million. A check, money order, or cashier's check is to be made payable to State of
	Delaware) NO CASH. A minimum \$150.00 Building Plan Review Fee is required for plan submittal