OFFICE OF STATE FIRE MARSHAL APPLICATION FOR FIRE PROTECTION PLAN REVIEW $\underline{\textit{FIRE ALARM INSTALLATION}}$

Sussex County

Doc. No. 75-01-24-01-01

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 NewCastle County Delaware Fire Service Center 2307 MacArthur Road New Castle, DE 19720-2426

302-323-5365 / 302-323-5366

Update 01/24

1. Project Name:		Phase:
Address:		
City:	Zip Code:	County: (NC, K, S)
Complete Tax Parcel Number:		Related Project Review #: (See Page 2)
2. Scope of Work:		Please note: only one (1) system per application.
3. Fee Calculation: Installation Co		Gee: Check #:
	der made payable to the " S unty Federal DSH	
4a. System Installer Phon Cell Phon FA Lic # FA Company Name: Certificate Holder: Address: City:State: Email: 4b. If system is monitored: Monitoring Co. Name: SFMO CSRSL#	e:	5. System Owner Info Phone: Cell Phone: Name: Address: City: State: Zip Code: Email: Any incomplete application may cause a delay in the processing of the project.
6. Certificate Holder Signature:		Date:
FOR OFFICE USE ONLY:		
Rolled Plans FIRE PROTECTION SPECIAL Plan Review #		IALIST DATE Deposit / Return Date:



STATE OF DELAWARE OFFICE OF THE STATE FIRE MARSHAL

JOHN W. RUDD STATE FIRE MARSHAL

FIRE ALARM SYSTEM PLAN SUBMITTAL

DOVER OFFICE HEADQUARTERS

The following items are required for submittal.

- Provide the project name with address and the county tax parcel number.
 New Castle County https://www3.newcastlede.gov/parcel/search/
 Kent County https://pride.kentcountyde.gov/
 Sussex County https://sussexcountyde.gov/sussex-county-mapping-applications
- Is this an application in conjunction with anther SFMO Building Permit? If so, you shall provide Related SFMO Project Review Number in space provided in Section 1.
 - 2. Give a brief description of the scope of work.
 - 3. Provide an installation cost. See below for fee calculations.
 - 4. Provide the System Installer's information. The System Installer shall have a SFMO License # and/or a SFMO Certificate #. If system is monitored, provide the monitoring companies name and the SFMO CSRSL number.
 - 5. The system owner's information: equitable owner of the Fire Alarm System.
 - 6. The Certificate Holder shall sign and date the application. Without an applicant signature and date, the application is incomplete.

One (1) copy for each system plan drawn to scale and shall be in accordance with NFPA 72. Include the following as described on the DSFMO webpage. https://statefiremarshal.delaware.gov/plan-review-and-inspections/plan-review/fire-protection-systems-plan-submittals/

- Floor plan layout showing locations of all devices, control equipment, and supervising station and shared communications equipment with each sheet showing the following:
 - o Equipment technical data sheets.
 - o Battery capacity and safety margin calculations.
 - o Voltage drop calculations for notification appliance circuits.
 - o Where occupant notification is required, minimum sound pressure levels that must be produced by the audible notification appliances in applicable covered areas.
 - o Riser diagram
 - ➤ Pathway diagrams between the control unit and shared communications equipment within the protected premises.
 - o Each page of the plan must be signed by the certificate holder of the licensed company and note the company's license number and/or certificate holder's number.

Fire Alarm Plan Review Fee:

For any project less than \$21,428.57, a minimum \$150.00 fee is required for plan submittal. All others multiply the construction costs by \$0.007 for projects up to including the first million. Projects over a million its \$7,000 for the first million and the remainder is multiplied by \$0.003 added to the \$7,000. A check, money order, or cashier's check payable to the State of Delaware. **NO CASH.**

The General Contractor shall call for the final inspection, except for a standalone permit.

A Fire Alarm Signaling System Installation Certificate must be filled out upon final inspection. That form may be found on the DSFMO website: https://statefiremarshal.delaware.gov/wp-content/uploads/sites/110/2017/07/fassinstalcert.pdf

CHECKLIST FOR APPLICANT'S REFERENCE ONLY - DO NOT INCLUDE WITH PLAN SUBMITTAL