

OFFICE OF STATE FIRE MARSHAL APPLICATION FOR FIRE PROTECTION PLAN REVIEW

TENANT FIT OUT / RENOVATION / OCCUPANCY CHANGE

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

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

1. Project Name: _____

Phase: _____ Please note: One phase per application. One building per application.

Address: _____

Complete Tax Parcel Number: _____ County: _____

Number of Stories: _____ Total Square Footage: _____

2. Project Description: Tenant Fit Out Renovation Occupancy Change from _____ to _____

Description / Use Details: _____

An incomplete application may cause a delay in the processing of the project.

3. Fee Calculation: Building Construction Costs: _____ Check #: _____ Fee: _____

Check or Money Order made payable to the "State of Delaware" NO CASH ACCEPTED

Exempt Status: State County Federal DSHA Fire Co. / Ambulance Municipality No Impact

4. Property Information (see checklist on page 2 for details)

Property Name: _____

Building Name: _____

Suite / Unit: _____

5. Primary Point of Contact

Phone: _____

Signature required in Item #8 Cell: _____

Name: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

6. Property Owner Info Phone: _____

Cell: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

7. Tenant Info Phone: _____

Cell: _____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

8. Applicant Signature: _____ Date: _____

FOR OFFICE USE ONLY:

FIRE PROTECTION SPECIALIST

Plan Review # _____

DATE

Deposit / Return Date: _____



STATE OF DELAWARE
OFFICE OF THE STATE FIRE MARSHAL

JOHN W. RUDD
STATE FIRE MARSHAL

DOVER OFFICE
HEADQUARTERS

TENANT FIT OUT / RENOVATION / OCCUPANCY CHANGE SUBMITTAL

The following items are required for submittal.

Application

1. 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>
Provide the number of stories and total square footage.
2. Give a brief description of the scope of work.
3. Provide a construction cost. See below for fee calculations.
4. Provide information about the Property, Building, and Suite/Unit without this information, your application will be incomplete.
5. Provide the Primary Point of Contact.
6. The property owner's information: equitable owner of property i.e.: landlord
7. Provide the Tenant information.
8. The applicant shall sign and date the application. Without an applicant signature and date, the application is incomplete.

One (1) copy for each building plan drawn to scale to include the following information as described on the DSFMO webpage. <https://statefiremarshal.delaware.gov/plan-review-and-inspections/plan-review/building-plan-submittals/>

- For new tenants/renovations that will include automatic sprinklers, the Preliminary Sprinkler Form and applicable attachments shall be submitted with the building plans.
- For installations of new fire pumps driven by an electric motor please refer to Electrical Plans for Fire Pumps. Approval documentation from a licensed electrical inspection agency will need to accompany the building plan submittal. A list of Licensed Electrical Inspection Agencies can be found on our website: <https://statefiremarshal.delaware.gov/electrical-inspection-agencies/>

Building 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.**

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