

FAIRMOUNT FIRE PROTECTION DISTRICT
Plan Review Submittal Form



4755 Isabell Street
Golden, CO 80403
(303) 279-2928

Plan # _____ - _____ Initials: _____

Submittal Date: _____

Re-submittal [] Re-submittal Date: _____

Amount Pre-paid \$ _____

Check #: _____ Cash: _____

Visa: _____ MasterCard _____ (Last 4-digits)

Balance Due: _____

REQUIREMENTS:

1. A Seventy Five - dollar (\$75.00) non-refundable fee is required upon submittal of plans.
2. Two (2) sets of bound plans with cut/installation sheets are required for a plan review.
3. Engineers stamp or NICET registration number and signature required on all suppression/detection plans.
 - a. All sprinkler plans must show an adequate water supply in some manner.
4. The Fire Prevention Division will **NOT** accept faxed plans.
5. Plans that are not picked up within forty-five (45) days will be discarded.
6. Job cost is mandatory.

APPLICANT: (PLEASE CHECK ONE)

Tenant Improvement Fire Alarm Sprinkler Hood U/G Fire Line Other _____

JOB NAME: _____

JOB ADDRESS: _____

USE CORRECT JOB ADDRESS

CITY: _____ **STATE:** _____ **ZIP:** _____

CONTRACTOR'S NAME: _____ **JOB COST:** _____

SQUARE FOOTAGE: _____

ADDRESS: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____, **EXT.** _____ (*DO NOT USE A PAGER NUMBER*)

Scope of work/comments: _____

NOTE: **ANY PLANS SUBMITTED WITHOUT THE REQUIRED NUMBER OF COPIES OR INCOMPLETE INFORMATION, WILL RESULT IN PLANS BEING DISAPPROVED**

SIGNATURE: _____ **PRINT NAME:** _____

***** PLEASE READ THE ABOVE REQUIREMENTS BEFORE SIGNING THIS APPLICATION FORM**

For Fairmount Fire Rescue use only

Accepted By: _____ **Title:** _____ **Date:** _____
(print name)

Rejected By: _____ **Title:** _____ **Date:** _____
(print name)