



AP# _____

PERMIT # _____

SUBMIT 4 SETS OF SEALED PLANS

Madison Twp

Village of Groveport

APPLICATION FOR CERTIFICATE OF FIRE ALARM PLAN APPROVAL

1. _____
Name & Address of Project **PARCEL#**

_____ Telephone No.

_____ State Zip

2. _____
Contractor **Telephone No.** **Cell#**

_____ State Zip

3. **COST of work covered by this application: \$** _____

4. Plans Prepared By:

- A. Ohio Registered Architect
- B. Ohio Professional Engineer
- C. Ohio Sprinkler System Designer
- D. Other _____

Ohio Registration Number

5. Number of sheets in one set plans _____

6. A. Description of work _____

B. Change of Occupancy New Building Alteration Addition

C. # of Stories _____ D. # of Units in **each** Building _____ E. # of rooms in **each** building _____

7. A. Type of Construction

- IA IB
- IIA IIB
- IIIA IIIB
- IV
- VA VB

Occupancy Load: _____

B. Current OBC Use Group: _____

C. Proposed OBC Use Group:

- A1 A2 A3 A4 A5 B E
- F1 F2 H1 H2 H3 H4 H5
- I1 I2 I3 M R1 R2 R3
- R4 S1 S2 U

D. If building is Use Group R1, R2, or R3, specify the number of apartments or units: _____

Contact Name and accessible phone number: _____

(Please print)

Signature of Applicant

Date

NUMBER OF DEVICES _____

10. **FEES**

FIRE ALARM PERMITS FEE:

A. \$57.50

B. \$4.60 for each device

PLAN EXAMINATION FEES:

A. \$172.50

B. \$1.15 for each device

(Includes original submittal and one re-submittal, additional submittals are \$75 each)

Subtotal: _____

3% STATE FEE:

A. 3% of the total of the above fees

TOTAL:

**COMPLETE SECTION 1 of RECORD OF COMPLETION AND
SUBMIT WITH DRAWINGS.**

Record of Completion

Name of protected property: _____

Address: _____

Representative of protected property (name/phone): _____

Authority having jurisdiction: _____

Address / telephone number: _____

1. Type(s) of System or Service

_____ NFPA 72, Chapter 3 – Local

If alarm is transmitted to location(s) off premises, list where received: _____

_____ NFPA 72, Chapter 3 – Emergency Voice / Alarm Service

Quantity of voice / alarm channels: _____ Single: _____ Multiple: _____

Quantity of speakers installed: _____ Quantity of speaker zones: _____

Quantity of telephones or telephone jacks included in system: _____

_____ NFPA 72, Chapter 5 – Auxiliary

Indicate type of connection:

_____ Local Energy _____ Shunt _____ Parallel telephone

Location of telephone number for receipt of signals: _____

_____ NFPA 72, Chapter 5 – Remote Station

Alarm: _____

Supervisory: _____

_____ NFPA 72, Chapter 5 – Proprietary

If alarms are retransmitted to public fire service communications centers or others, indicate location and telephone numbers of the organization receiving alarm: _____

Indicate how alarm is retransmitted: _____

_____ NFPA 72, Chapter 5 – Central Station

Prime contractor: _____

Central Station Location: _____

Means of transmission of signals from the protected to the central station:

_____ McCulloch _____ Multiplex _____ One-way Radio

_____ Digital Alarm Communicator _____ Two-way Radio _____ Others

Means of transmission of alarms to the public fire service communications center:

(a) _____

—

(b) _____

—

System Location: _____

	Organization name/phone	Representative name/phone
Installer	_____	_____
Supplier	_____	_____
Service organization	_____	_____
Location of record (as-built) drawings: _____		
Location of owners manuals: _____		
Location of test reports: _____		
A contract, dated _____, for test and inspection in accordance with NFPA standard(s) No(s). _____, dated _____, is in effect.		

2. Record of System Installation

(Fill out *after* installation is complete and wiring checked for opens, shorts, ground faults, and improper branching, but prior to conducting operational acceptance tests.)

This system has been installed in accordance with the NFPA standards as shown below, was inspected by _____ on _____, includes the devices shown below, as has been in service since _____.

___ NFPA 72, Chapters 1 2 3 4 5 6 7 (circle all that apply)

___ NFPA 70, *National Electrical Code*, Article 760

___ Manufacturer's Instructions

___ Other (specify): _____

Signed: _____ Date: _____

Organization: _____

3. Record of System Operation

All operational features and functions of this system were tested by _____ on _____, and found to be operating properly in accordance with the requirements of:

___ NFPA 72, Chapters 1 2 3 4 5 6 7 (circle all that apply)

___ NFPA 70, *National Electrical Code*, Article 760

___ Manufacturer's instructions

___ Other (Specify): _____

Signed: _____ Date _____

Organization: _____

4. Alarm-Initiating Devices and Circuits

Quantity and class of initiating device circuits (*see NFPA 72, Table 3-5*)

Quantity: _____ Style: _____ Class: _____

MANUAL

(a) ___ Manual stations ___ Noncoded, activating ___ Transmitters ___ Coded

(b) ___ Combination manual fire alarm and guard's tour coded stations

AUTOMATIC

Coverage: Complete: _____ Partial: _____

(a) ___ Smoke detectors ___ Ion ___ Photo

(b) ___ Duct detectors ___ Ion ___ Photo

(c) ___ Heat detectors ___ FT ___ RR ___ FT/RR ___ RC

(d) ___ Sprinkler water flow switches: ___ Transmitters ___ Noncoded, activating ___ Coded

(e) ___ Other (list): _____

5. Supervisory Signal-Initiating Devices and Circuits (use blanks to indicate quantity of devices)

GUARD'S TOUR

(a) ___ Coded stations

(b) ___ Noncoded stations, activating _____ transmitters

(c) ___ Compulsory guard tour system comprised of _____ transmitter stations and _____ intermediate stations.

Note: Combination devices are recorded under 4(b) and 5(a).

SPRINKLER SYSTEM

(a) ___ Coded valve supervisory signaling attachments

Valve supervisory switches, activating _____ transmitters

(b) ___ Building temperature points

(c) ___ Site water temperature points

(d) ___ Site water supply level points

Electric fire pump:

(e) ___ Fire pump power

(f) ___ Fire pump running

(g) ___ Phase reversal

Engine-driven fire pump:

(h) ___ Selector in auto position

(i) ___ Engine or control panel trouble

(j) ___ Fire pump running

Engine-driven generator:

(k) ___ Selector in auto position

(l) ___ Control panel trouble

(m) ___ Transfer switches

(n) ___ Engine running

Other supervisory function(s) (specify): _____

6. Alarm Notification Appliances and Circuits

Quantity and class (see NFPA 72, Table 3-7) of notification appliance circuits connected to the system:

Types and quantities of notification appliances installed: Quantity: _____ Style: _____ Class:

*(a) ___ Bells ___ Inch

(b) ___ Speaker

(c) ___ Horns

(d) ___ Chimes

(e) ___ Other: _____

