



Office Use Only	
Permit Num.:	Fee:
Plan Review:	Fee:

Fire Alarm Permit Application

Plan submittals must include this document and may be:

- Delivered to: Building Inspections at 201 Caulder Ave, M-F, 8:00 – 5:00.
- Mailed to: Building Inspections at 440 S Church St. Spartanburg, SC 29306

Total Contract Price: _____

Application Date: _____

Installation Location

Business/Location Name:	
Street Address:	Building/Suite:
Property Owner/Rep Name:	Owner/Rep. Contact Number:

Installation Contractor Responsible for Fire Alarm System

Contract company:	Address:
Fire Alarm State License #:	Expiration Date:
Contact person name:	Contact Phone:
Contact fax:	Contact E-mail:
<input type="checkbox"/> Installing entire system, or <input type="checkbox"/> Name of contractor installing wire/conduit:	

Fire Alarm System Details

<input type="checkbox"/> New system in new building <input type="checkbox"/> New system in existing building <input type="checkbox"/> Replacement of existing, add reason in notes <input type="checkbox"/> Modification of existing, add reason in notes <div style="text-align: center;">Designers Information</div> Name: Company: Phone: E-Mail: Qualifications (Ref. 2002 NFPA 72, 4.3.2):	Alarm system coverage: Per 200 IBC/IFC/IMC, 2002 NFPA 72– Check all sections which apply to the new or existing design: <input type="checkbox"/> Required manual fire alarm (IFC 907.2 or 907.3) <input type="checkbox"/> Required automatic detection (IFC 907.2, 907.3, NFPA 72 5.5.2) <input type="checkbox"/> Non-Required detection (NFPA 72 5.5.2.4) <input type="checkbox"/> Audio/visual annunciation (NFPA 72 Ch 7) <input type="checkbox"/> Sprinkler monitoring (IFC 903.4, NFPA 72 5.10, 5.13, 6.8.5) <input type="checkbox"/> Elevators (IFC 607, 907.11, NFPA 72 6.15.3, 6.15.4) <input type="checkbox"/> HVAC detector monitoring (IMC 606.4.1, IFC 907.12, NFPA 72 5.14) <input type="checkbox"/> Smoke rated fire doors (IBC 715.4.7.3, IFC 907.11, NFPA 72 5.14) <input type="checkbox"/> Smoke damper detectors (IBC 716.3.2.1, IFC 907.11/12, NFPA 72 5.14) <input type="checkbox"/> Type I hood extinguishing monitoring (IFC 904.3.5, NFPA 72 6.8.5.6) <input type="checkbox"/> High rise building (IFC 907.2.12, NFPA 72 6.9) <input type="checkbox"/> Special extinguishing system releasing panel (NFPA 72 6.11) <input type="checkbox"/> Other: <input type="checkbox"/> Offsite supervision (NFPA 72, Chapter 8) - Type:
Notes/Comments:	

Submittal Checklist

<input type="checkbox"/> Application and 3 sets of prints (electronic submittal is acceptable – call Fire Marshals Office for details – 596-2083)
<input type="checkbox"/> I have reviewed the checklist on the back of this document (or page 2 of duplicates) and the prints include all items noted
<input type="checkbox"/> Installation contractor is properly trained and qualified to install fire alarm systems

The contact person listed above will receive comments and/or permit approval after the plan review has been completed. A Permit and Plan Review fee will be assessed based on the total value of the project, but not less than a \$40 Permit Fee and a Plan Review Fee (when applicable) of \$40. Permit and Review fees increase proportionally to the contract value of the project.

I hereby make application for permit to perform the work described herein, and if permit is granted, I agree to conform to all review comments, City Ordinances, State/International/National Codes as applicable, and applicable requirements set forth by the City or State Fire Marshals Office, whether specified herein or not, and in accordance with all plans submitted. I certify that the information given is true and accurate:

Print **Sign** **Date**

Plan Submittal Check List

The following check list is provided as a summary of the minimum information required before a review will be initiated. It is the contractor's responsibility to have a thorough working knowledge of the applicable City, State, National Fire Protection Association (NFPA), and International Code Council (ICC) requirements and to include additional information that may be specific to this system. Failure to provide the needed information will delay the review process.

- 1. Name, address, phone, fax, e-mail, and state contractors license number of the licensed contractor.
- 2. Creation date of plan, revision dates, point of compass, scale and graphic representation of scale.
- 3. Description of the scope of work.
- 4. Manufacturers cut sheets for all equipment, clearly indicating which models will be utilized.
- 5. Floor plan(s) indicating all device locations and clearly identifying rooms, areas, etc.
- 6. 1-line diagram (riser), including power connection and conductor type and sizes.
- 7. Battery and voltage drop calculations.
- 8. Clear description of ceiling construction and height or detailed elevation drawing.
- 9. Operation of any specialized equipment (smoke control/exhaust or other life safety systems).
- 10. Compatibility listings to verify component compatibility with the FA control panel
- 11. Alarm response matrix
- 12. Clearly indicate the location and tamper switches for the Knox Box (Knox tampers should be tied to the building burglar alarm when present or to the Fire Alarm as a supervisory signal as an alternate).

Required Inspections

The following inspections are required during the project. Failure to call for an inspection may result in delays or require covered work to be uncovered for visual inspections.

- Rough-in inspection to be completed before wiring or wiring methods is concealed.
- Overhead inspections to be completed before the installation of ceiling tiles or ceiling system.
- Final Inspection to include: verification of device placement, functional test of system, response time test, a review of contractors 100% self-inspection documentation.
- Additional inspections may be required by the State Fire Marshals Office or DHEC for state licensed facilities.

Pre-Final Inspection Check list

The contractor shall verify completion of the following items prior to scheduling the final inspection. Any item from this general list found outstanding at the time of the final will result in termination of the inspection and assessment of a re-inspection fee.

- All equipment, devices, etc. have been installed per the submitted prints. Any deviations must be approved before acceptance testing and shall be noted on as-built drawings that will be provided to the inspector.
- 100% pre-test as been completed and documented by the contractor.
- Any mechanical/electrical systems have been reviewed and approved by the Building Department.
- Contractor has current State License and proper documentation indicating adequate training and qualifications to the install the selected system.
- Permit, stamped drawings, system manual(s), and needed testing equipment.
- Provide a Record of Completion attesting to proper installation.
- A copy of the Record of Completion shall be issued to the owner and the inspector.
- A copy of the submittal package and the Record of Completion shall be placed in a plan tube or binder marked "Fire Alarm Plans – Do Not Remove From Site" shall be installed at the fire alarm panel.
- Fire alarm registration paperwork has been submitted to the Public Safety Alarm Coordinator (596-596-2238).