



## Building Safety Division

Planning & Community Development Department  
2 Park Drive South, Rm. 112  
P.O. Box 5021  
Great Falls, MT  
59403  
Building Department: 406-455-8430  
Fire Department: 406-727-8070

**For Office Use Only:**

Date Received: \_\_\_\_\_

Permit Number: \_\_\_\_\_



### FIRE SPRINKLER / ALARM PERMIT APPLICATION 4 COPIES OF PLANS REQUIRED

Project Address: \_\_\_\_\_ Const Type: \_\_\_\_\_

Project Name: \_\_\_\_\_ Occupancy Type \_\_\_\_\_

OWNER: \_\_\_\_\_ Phone Number: ( ) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Building Fire Sprinklered: Yes ☐ No ☐ Building Fire Alarm Yes ☐ No ☐

Type of Permit (check one): RESIDENTIAL ☐ COMMERCIAL ☐

Valuation of Project \$ \_\_\_\_\_ Description of Work \_\_\_\_\_

(Check all categories below that apply)

<input type="checkbox"/> Fire Sprinkler System*	<input type="checkbox"/> Kitchen Hood Fire Suppression System
<input type="checkbox"/> Fire Alarm System	<input type="checkbox"/> Fire Stopping – Proprietary System
<input type="checkbox"/> Other:	<input type="checkbox"/> Standpipe system

\*Type of Fire Sprinkler System: 13 ( ) 13R ( ) 13 D ( )

Contractor: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Contractor's License # \_\_\_\_\_ City Business License # (Required) \_\_\_\_\_

Email Address: \_\_\_\_\_ @ \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I hereby certify that the above information is correct and that the construction on, and the occupancy and the use of, the above-described property will be in accordance with the laws, rules, and regulations of the State of Montana. A written letter of authorization from the property owner, if other than the applicant, shall be submitted indicating knowledge of the applicant's intent.

Applicant's Signature

Print Name

Date

Permit fees are based on total valuation of work performed

Permit Entered By:	Fees Due:	Building Dept. Approval



W O M E R & A S S O C I A T E S

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## Information for Review - Fire Sprinkler or Alarm Design Basis - Send with Plans

**Questions? Please contact:** Larry Johnson, PE (larryj@wwomer.com)

Company:

Contact:

Project:

Address:

Project Description/scope of work:

Description of any existing system this work will connect to:

- Show existing FDC, PIV and source on TI/retrofit projects
- Existing panel location and type for FA.

Authority Having Jurisdiction:

New Building (SF):

Retrofit (SF):

Addition (SF):

Stories:

Referenced Building and Fire codes:

Occupancy Classification/Building Uses:

Available Water Supply:

Design Specifications (NFPA Standard, Date):

Device (Sprinkler or Alarm) Characteristics:

Calculations (Hydraulic/Seismic or Battery):

- Include path to main on TI/retrofit projects

Monitoring?:

Any Unusual Acceptance Criteria?:

This information is provided as a summary of the fire protection design basis as represented in the shop drawings submitted to this office.