



West Hartford Fire Department Fire Prevention Bureau

Room 204 50 South Main Street, West Hartford, CT 06107
Telephone: 860-561-8320 / Facsimile: 860-561-7551

APPLICATION FOR FIRE PREVENTION PLAN REVIEW

DATE		<input type="checkbox"/> Building Permit Application has been submitted with West Hartford Building Department																																																																																		
LOCATION OF PROPERTY		Plans Attached <input type="checkbox"/>	Specifications Attached <input type="checkbox"/>																																																																																	
APPLICANT'S NAME		COMPANY NAME																																																																																		
APPLICANT'S ADDRESS		TOWN/CITY	STATE ZIP CODE																																																																																	
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BUSINESS NAME																																																																																				
CHANGE OF USE <input type="checkbox"/>		TYPE OF PROPOSED USE																																																																																		
USE GROUP(S) per CT Fire Code: [For mixed use buildings, check all that apply]		<table style="width: 100%; border-collapse: collapse;"> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>A-1</td><td>Assembly- production and viewing of performing arts or motion pictures</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>A-2</td><td>Assembly- food and/or drink consumption</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>A-3</td><td>Assembly- worship, recreation or amusement</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>A-4</td><td>Assembly- viewing of indoor sporting events and activities</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>A-5</td><td>Assembly- participation in or viewing outdoor activities</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>B</td><td>Business- use of building/structure for office, professional or service-type transaction</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>B</td><td>Business- medical/dental occupancy, provide service/treatment four/more patients</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>E</td><td>Educational and/or day care</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>F-1</td><td>Factory and industrial- moderate hazard</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>F-2</td><td>Factory and industrial- low hazard</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>H-1</td><td>High Hazard- explosives, detonation hazard</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>H-2</td><td>High Hazard- pose deflagration hazard or hazard from accelerated burning</td></tr> <tr><td style="text-align: center;"><input type="checkbox"/></td><td>H-3</td><td>High Hazard- contain materials that 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PROJECT DESCRIPTION:	NEW CONSTRUCTION <input type="checkbox"/>	ADDITION <input type="checkbox"/>	RENOVATIONS <input type="checkbox"/>	OCCUPANT LOAD (Persons)
	TOTAL FLOOR AREA (Sq. Ft.)	NUMBER OF FLOORS	ABOVE GRADE	BELOW GRADE
	BRIEF SUMMARY: _____ _____ _____			

FEE SCHEDULE: [Fire Prevention fees are based on a percentage of the Building Permit fee]	Architectural Fire Plan Review	65% BPF	\$ _____
	Mechanical Systems Fire Protection Systems & Type 1 Hoods (Sprinkler, Fire Alarm, Type 1 Kitchen Hoods Special Fire Protection Systems)	100% BPF	\$ _____
	Electrical Systems	35% BPF	\$ _____
	HVAC Systems	35% BPF	\$ _____
	Plumbing Systems	35% BPF	\$ _____
	Tents, Membrane Structures	\$50.00	\$ _____
	Total		\$ _____
Building Permit Fee \$ _____	PAID via		
	AGENCY:		<input type="checkbox"/> Card
	<input type="checkbox"/> Town of West Hartford		<input type="checkbox"/> Cash
	<input type="checkbox"/> Board of Education		<input type="checkbox"/> Check # _____

CERTIFICATION:	I have personally examined and am familiar with the information contained in this document and all attachments and certify, to the best of my knowledge and belief and based on reasonable investigation, including but not limited to my inquiry of those individuals responsible for obtaining the data, that the submitted information is true, accurate and complete. I agree to comply with all West Hartford ordinances, state statutes and regulations relating to fire safety and building construction.	
	APPLICANT'S SIGNATURE	DATE

TO BE COMPLETED BY FIRE MARSHAL'S OFFICE	
DATE RECEIVED (stamp)	DATE REVIEWED
	FIRE MARSHAL
	Plans and/or specifications appear to comply with applicable codes: <input type="checkbox"/> Yes <input type="checkbox"/> No, refer to comments
	copy to: <input type="checkbox"/> Applicant <input type="checkbox"/> Building Official <input type="checkbox"/> File