

FIRE PROTECTION

County of Stafford

Department of Public Works
P.O. Box 339
1300 Courthouse Road
Stafford, Virginia 22555-0339
Phone: (540) 658-8650
www.staffordcountyva.gov
Permit Status: <http://hello.stafford.va.us>



RECEIVED BY: _____

DATE: _____

R/E TAXES CURRENT: _____

A/P #: _____

PARENT A/P#: _____

New Plans Revised Plans

JOB LOCATION

STREET ADDRESS: _____ SUITE: _____ CITY: _____ ZIP: _____

TAX MAP #: _____ SECTION: _____ LOT: _____

SUBDIVISION/DEVELOPMENT: _____

CURRENT OWNER INFORMATION

NAME: _____

CURRENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

DESIGNER/CONTRACTOR INFORMATION

DESIGN PROFESSIONAL NAME: _____ PHONE: _____ EMAIL: _____

CONTRACTOR/ INSTALLING COMPANY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

PRINT NAME _____ SIGNATURE: _____

VIRGINIA CONTRACTORS LICENSE #: _____

LICENSE CLASS: _____ CERTIFICATIONS OR SPECIALTIES: _____ EXPIRATION DATE: _____

By signing the above, I certify that (1) I am duly licensed under the Virginia Code to perform the work contemplated by this application, and/or (2) I am authorized by the contractor stated above to sign on behalf of the contractor, which is duly licensed to perform the work contemplated by this application.

TENANT INFORMATION

N/A SAME AS OWNER

NAME: _____

CURRENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

APPLICANT INFORMATION

SAME AS CONTRACTOR SAME AS OWNER

NAME: _____

CURRENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

TOTAL VALUATION

DECLARED PROJECT VALUE \$ _____
(Total contract value)

CALCULATED PROJECT VALUE \$ _____
(Per ICC)

DESCRIPTION OF WORK:

VUSBC EDITION: _____

TOTAL SQUARE FEET: _____

(Check one – see next page for plan submittal checklists)

- Automatic Sprinkler System
- Fire Alarm System
- Alternative Fire Extinguishing System
- Underground Fire Line or Standpipe System
- Other Fire or Life Safety System

Hard copy of approved plans requested.

*ALL plans and design documents MUST be submitted on a CD in PDF format for review. Approved plans will be returned on a CD in PDF format unless this box is checked **AND** hard copies are submitted for stamping.*

PROJECT INFORMATION (Complete only the information that applies to this permit application):

Automatic Sprinkler System:

- Sprinkler System Light Hazard
- Sprinkler System Ordinary Hazard or Rack Storage
- Sprinkler System Extra Hazard
- NFPA 13R System
- NFPA 13D System

- # of Sprinkler Heads
- # of Limited Area Sprinklers
- # of Dry Pipe/Pre-Action Valves
- # Fire Pumps
- # Backflows Prevention Devices
- Contractor Certified for Backflow

Alternative Fire Extinguishing System:

- # of Kitchen Hood Suppression Systems
- # of Carbon Dioxide Ext Systems
- # of Clean Agent Ext Systems
- # of Chemical (Dry/Wet) Ext Systems

Underground Fire Line or Standpipe Systems:

- # of Underground Fire Lines
- # of Standpipe Systems
- # of Standpipes

Other Fire/Life Safety Systems

- # of Smoke Control Systems
- # of Delayed Egress Devices
- # of Devices Other Fire /Life Safety Systems

Fire Alarm Systems:

- # of Fire Alarm System Devices
- Elevator Recall Included

TIME LIMITATION OF APPLICATION

Virginia Uniform Statewide Building Code 108.8

An application for a permit for any proposed work shall be deemed to have been abandoned six months after the date of filing unless such application has been pursued in good faith or a permit has been issued, except that the building official is authorized to grant one or more extensions of time if a justifiable cause is demonstrated.

APPLICANT INITIALS: _____

APPLICANT AGREEMENT

All information on this form is part of the application and must be complied with. I hereby certify that I have authority to make this application, that the information is complete and correct and that the work performed and equipment installed will conform to the Virginia Uniform Statewide Building Code and other applicable laws and regulations which relate to the property.

NAME: _____

SIGNATURE: _____ DATE: _____

ISSUANCE OF PLANS OR APPROVED DOCUMENTS (COMPLETE AT PERMIT ISSUANCE)

I have received county approved plans or documents.

SIGNATURE: _____ DATE: _____

PLAN SUBMITTAL CHECKLIST

The following checklists are provided as a GUIDE to the applicant regarding the minimum information required on Fire Protection System plans. These lists are not intended to illustrate the only requirements but rather to highlight the common items that often must be included. In all cases, the design documents must illustrate compliance with the applicable code and standards and the requirements therein.

Ensure that all applicable items are provided for the type of permit requested.

Automatic Sprinkler System:

- The approved address of the location (Number, Street Name, Suite #)
- The stamp or signature, license number and contact information of the design professional (Minimum NICET III, IV or P.E.).
- An illustration of the location of the work within the overall site, or building.
- Description of the "Scope of Work" and clear illustration of the areas not included.
- Building floor plan (to scale) indicating size, type and location of rooms and building components including fire walls, partitions, ceilings, stairs, concealed or non-combustible spaces, building equipment (obstructions), and other related items.
- Hazard classification including commodity classification and storage arrangement (type, height, fixed or rack, aisle spacing and flue space if applicable). An attached letter or paragraph format may be most effective.
- The type, location and size of all piping, valves, sprinklers and other components.
- The sprinkler legend shall provide the following information: type, symbol, SIN, temperature classifications, orifice size, K-factor, manufacturer, and quantity.
- Details (including all devices such as risers and valves, backflow prevention, pumps and FDC interconnection).
- Hydraulic calcs and illustration of calc-plates where required by NFPA 13.
- For modifications or additions, the original design information including remote area, design density, hazard classification, system type, etc.
- Capacities and pressure settings (normal, alarm, high, low, etc.) for dry or pre-action systems.
- Indicate the latest water supply data available from the Stafford County Department of Utilities at 540-658-8616.
- Equipment cut-sheets and specifications for ALL components.

Fire Alarm System:

- The approved address of the location (Number, Street Name, Suite #).
- The stamp or signature, license number and contact information of the design professional (Minimum NICET III, IV or P.E.).
- An illustration of the location of the work within the overall site, complex or building.
- The "Scope of Work" being performed (including the number of devices).
- Building floor plan (to scale) indicating size, type and location of rooms and building components including fire walls, partitions, ceilings, stairs, concealed or non-combustible spaces, building equipment (obstructions), and other related items.
- The type and location of ALL devices (include the height from the finished floor where applicable).
- The method, listing and contact information of the system supervision per NFPA 72.
- Identification of the system zones (fire alarm zones must be coordinated with sprinkler zones).
- A component wiring riser diagram and wiring runs illustrated on the plans.
- Complete battery and voltage drop calculations for ALL applicable devices.
- A sequence of operations matrix illustrating the function of all initiating devices or other components and the related action or interface with other building systems.
- Equipment cut-sheets and specifications for ALL components.

Alternative Extinguishing System:

- The approved address of the location (Number, Street Name, Suite Number).
- The stamp or signature, license number and contact information of the design professional.
- An illustration of the location of the work within the overall site, complex or building.
- Description of the "Scope of Work" and clear illustration of the areas not included.
- Building floor plan (to scale) indicating the type, location and size of all piping, nozzles and other components. Include the details and dimensions of the room or area and the appliance or equipment protected. Isometric and/or elevation views may be required.
- The type, location, quantity and function of detecting devices (fusible links, detectors, etc) including temperature classifications.
- The type and quantity of extinguishing agent with the corresponding calculations or equipment cut sheets to determine agent quantity.
- The location and type of all alarms, manual actuation devices, means of egress and portable fire extinguishers.
- The method of utility (electric, gas, etc) shut down and system interconnection to the associated equipment, exhaust fans, and building fire alarm system.
- Equipment cut-sheets and specifications for ALL components.

Underground Fire Line or Standpipe System:

- The approved address of the location (Number, Street Name, Suite Number).
- The stamp or signature, license number and contact information of the design professional.
- An illustration of the location of the work within the overall site, complex or building
- Description of the "Scope of Work" and clear illustration of the areas not included
- A site or building plan (to scale) indicating the location, type and size of all piping and valves.
- Any design details for valve arrangements, fire department connections or signage.
- The depth of cover and change in elevation of piping.
- Any construction specifications notes including wrapping of pipe, pipe restraints, thrust blocks, etc.
- Equipment cut-sheets and specifications for ALL components.

Other Fire or Life Safety System:

- The approved address of the location (Number, Street Name, Suite Number).
- The stamp or signature, license number and contact information of the design professional.
- An illustration of the location of the work within the overall site, complex or building.
- Description of the "Scope of Work" and clear illustration of the areas not included
- Building floor plan (to scale) indicating size, type and location of rooms and building components including fire walls, partitions, ceilings, stairs, concealed or non-combustible spaces, building equipment and other related items.
- The type, location, quantity and function of all devices or system components
- Equipment cut-sheets and specifications for ALL components.

SIGNATURE:

I hereby certify that the design documents submitted complies with the above checklist and the following VUSBC, VSFPD and NFPA Standards (edition): _____

Name: _____ Signature: _____ Date: _____