



FAIRMOUNT FIRE PROTECTION DISTRICT
4755 Isabell Street Golden, CO 80403 (303) 279-2928

For internal use only

Plan # _____ - _____ Initials: _____

Submittal Date: _____

Re-submittal Re-submittal Date: _____

Amount Pre-paid \$ _____

Plan Review - Permit Submittal Form v2019

Balance Due: \$

Please Submit this completed form and related documents to: plans.permits@fairmountfireco.gov

Requirements:

1. A mandatory One Hundred Dollar (\$100.00) non-refundable fee is required upon submittal of this form.
2. All payments must be made by check to our office.
3. **Electronically submitted plans** in pdf format with cut/installation sheets **are required** for a plan review.
4. Engineers stamp or NICET registration number and signature required on all suppression/detection plans.
 - a. All sprinkler plans must identify an adequate water supply in some manner.
5. The Fire & Life Safety Division **WILL NOT** accept faxed plans.
6. Plans that are not picked up and paid in full within forty-five (45) days of completion will be discarded.

Requirements Check-List:

- Plans (pdf format)
- Cut/Installation Sheets
- Scope Of Work

APPLICANT: (PLEASE CHECK ONE)

Tenant Improvement Fire Alarm Fire Sprinkler Hood U/G Fire Line Other _____

JOB NAME: _____

JOB ADDRESS: _____
USE CORRECT JOB ADDRESS

CITY: _____ STATE: _____ ZIP: _____

CONTRACTOR'S NAME: _____ JOB COST: _____

SQUARE FOOTAGE: _____ sq.ft.

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ PHONE: (____) _____ - _____

EMAIL: _____ CONTACT NAME: _____

Additional/Comments:

NOTE: ANY PLANS SUBMITTED WITHOUT COMPLETE INFORMATION, WILL RESULT IN PLANS BEING DISAPPROVED

SIGNATURE: _____ PRINT NAME: _____

*** PLEASE READ THE ABOVE REQUIREMENTS BEFORE SIGNING THIS APPLICATION FORM

(Fairmount Fire Staff use only)

Accepted By: _____ Title: _____ Date: _____
(print name)

Rejected By: _____ Title: _____ Date: _____