



PLAN SUBMITTAL FORM

- Fire and Life Safety Plan Submittal
- Site Plan Submittal
- Automatic Fire Alarm Plan Submittal
- Automatic Fire Sprinkler Plan Submittal
- Cooking Hood Fire Protection Submittal
- Other:

Date: _____ Building Permit Number: _____

Project Name: _____

Address: _____

Subdivision: _____ Lot Number: _____

Contact Person: _____

Address: _____

Telephone: _____ Fax Number: _____

Email Address: _____

Company: _____

Designer: _____ License Number: _____

Address: _____

Telephone: _____ Fax Number: _____

Email Address: _____

Documents Submitted for Review

- Drawings – Sheet Number(s) _____ of _____
- Calculations – Page Number(s) _____ of _____
- Material Data Sheets
- Water Supply Analysis
- Other Documents:

Plans / Documents Submitted for Review Based on The Following:

Fire and Life Safety Plan Submittal

- IFC – 2018 Edition
- IBC – 2018 Edition
- Payson City Ordinance

Automatic Fire Sprinkler Plan Submittal

- NFPA 13 – 2016 Edition
- NFPA 13D – 2016 Edition
- NFPA 13R – 2016 Edition

Site Plan Submittal

- Payson City Ordinance
- IFC – 2015

Cooking Hood Fire Protection Plan Submittal

- NFPA 17 – 2016 Edition
- NFPA 17A – 2016 Edition
- NFPA 96 – 2017 Edition
- Other:

Automatic Fire Alarm Plan Submittal

- NFPA 72 – 2016

Expected Completion Date: _____ Expected 70% Completion Date: _____

Description of Occupancy: _____

Type of Occupancy (IBC): _____ Type of Construction: _____ Licensed as Health Care: _____

Number of Stories: _____ Height of Structure: _____ Construction Type (IBC): _____

Total Square Footage: _____ Allowable Square Footage: _____

Occupant Load: _____ Occupancy: _____ Sq/Ft per Occupant: _____

Fire Sprinklers Required? _____ Basis: _____

Water Supply Data: Flow _____ (GPM) Static _____ Residual _____ (psi)

Type of Products Stored? _____

Rack Storage? _____ Height _____ Storage above 12 feet Subject to IFC

Racks: Single Row _____ Double Row _____ Multiple Row _____

Type of Shelves: Open _____ Solid Shelves _____

Provide Material Safety Data Sheets (MSDS) and Hazardous Materials Management Plan (HMMP) for any/all
Chemicals.

Form must be filled out separately for each item listed at top of page.

Contact person is who the letter and question will go to