Memorandum

To: All Fire Alarm (Class D & D-1) Firms

From: Jerry W. Jones
Chief Architect/Deputy Assistant Secretary

RE: Exemption Request Form for Non-Required Fire Alarm Systems

Date: May 18, 2000

During the recently completed special session of the Louisiana Legislature, it became necessary to impose a fee for processing non-required fire alarm exemption requests. In order to implement this fee, this office has developed a standard exemption request form. By providing the exemption request form, this office will be able to review and process your non-required fire alarm system in a timely manner. In addition, the exemption request form will improve not only serviceability, but also accountability - because this exemption request form will be assigned a project number so it can be tracked in our office; which will allow anyone to inquire as to the status of their project on our website.

Please be advised that work shall not commence until the exemption request form has been reviewed and granted by this office.

Should you have any questions regarding this matter, please contact the Plan Review Section of this office at 1-800-256-5452 or (225) 925-4920.

This memorandum voids and replaces the February 25, 1998 memorandum concerning non-required fire alarm submittals.

The effective date for this policy is June 6, 2000.

JWJ/MCM/kmw

"Is Yours Working" ??

Smoke Detectors Save Lives !!

OFFICE OF STATE FIRE MARSHAL • 5150 FLORIDA BOULEVARD, BATON ROUGE, LA 70806
(504) 925-4911 1-800-256-5452
Non-Required Fire Alarm Systems
REQUEST FOR EXEMPTION

LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS
OFFICE OF STATE FIRE MARSHAL
5150 FLORIDA BOULEVARD
BATON ROUGE, LOUISIANA 70806
PHONE (225) 925-4920   FAX (225) 925-4414
WEB SITE: www.dps.state.la.us/sfm

REVIEW FEE
$20.00

DATE of Application:

STATE FIRE MARSHAL
ARCHITECTURAL REVIEW NUMBER

PO

PROJECT TITLE
(Name of Business)

NAME OF BUILDING/
SHOPPING CENTER

PHYSICAL LOCATION
OF PROJECT
Inside City Limits ☐
Outside City Limits ☐

ADDRESS (Street/Suite)
CITY (In or Near)
ZIP CODE
PARISH

PROFESSIONAL OF RECORD (P.O.R.) (If none, then MUST be Owner)

NAME
PHONE ( )

MAILING ADDRESS (Street/P.O. Box)
CITY
STATE
ZIP CODE

P.O.R. LICENSE NO
EMAIL ADDRESS

FIRE ALARM SYSTEM INFORMATION

OCCUPANCY
CLASS (NFPA 101)

TYPE OF ALARM SYSTEM OR SERVICE
☐ LOCAL ☐ REMOTE STATION ☐ OTHER
☐ AUXILIARY ☐ PROPRIETARY ☐ EMERGENCY VOICE/ALARM SERVICE
☐ CENTRAL STATION

DESCRIPTION OF FIRE ALARM SYSTEM

AREA COVERED BY
SYSTEM (SQ.FT.)

NUMBER OF
FLOORS IN
THE BUILDING

SQUARE FOOTAGE
PER FLOOR

SYSTEM CONTRACTOR / ENGINEER / DESIGNER (not the Professional Of Record)

NAME
EMPLOYEE LICENSE NO.

FIRM NAME
FIRM MAILING ADDRESS

CONTACT NAME
PHONE NO ( )
FAX NO ( )

FIRM LICENSE NUMBER
EMAIL ADDRESS

FOR FIRE MARSHAL
USE ONLY

Accepted ☐ Comments ☐

Denied ☐

DATE RECEIVED
PROJECT NUMBER
REVIEW ARCHITECT

[Signature]

3048