As an aid to streamline our fire suppression system review process, we ask that you complete this checklist, and attach it to your Plan Review Application. Please address each checklist item in your package, whether the item is conveyed on the shop drawings, manufacturer cut sheets, general notes, pre-engineered data/calculations, or cover letter, etc. Any items not addressed may cause unnecessary delays or project "hold" on your review. Your help, up front, will facilitate a complete submittal package, shorten our review time, and help us to get your project reviewed and returned sooner. Please verify that each numbered item below is: A. in your submittal, B. correct, and C. is coordinated within the submittal (shop drawings match pre-engineered data/calculations and cut sheets). Then provide a check mark adjacent to each numbered item, or print "N/A" for items not applicable to this submittal. Thank you for your help, in completing and coordinating the items in this checklist.

Project Name (please print): __________________________________________________________________________

Project Address: ________________________________________________  Architectural Review No. ______________

Checklist Completed By: _________________________________________________________  Date: ______________

PLAN REVIEW APPLICATION

1. This office cannot complete the review of the suppression system until we have issued an "appears to comply" architectural review letter for the protected space: either a room (computer room, telecommunications equipment room, paint spray room, etc.) or special area (kitchen hood, paint spray booth, computer floor, etc.). Please provide one of the following:
   ___ A. Furnish the State Fire Marshal project number, denoting review of the protected space (room or area). If this protected space is part of a previously reviewed architectural package, then provide the State Fire Marshal architectural review project number. (If there is no existing "appears to comply" architectural review letter from this office, or if the architectural review exists as a "Preliminary, Information Request, or Not-In-Compliance" type, the suppression package may be found not-in-compliance, and returned without benefit of a review.
   ___ B. If a previous appeal determination is involved with this fire suppression package, furnish copy of determination letter.
   ___ C. If the protected space is existing, then the Professional of Record (otherwise the Owner) shall denote such and include reason for this suppression submittal (replacing existing suppression system, modification of existing suppression system, order of correction by inspector, etc.) in writing, with the submittal. Otherwise, an architectural review letter of the protected space must accompany the suppression system submittal.


3. Project name, address, occupancy, and owner denoted on application, (and matches that of architectural review, if applicable).

4. System type (Chemical, Wet Hood System, Dry Hood System).

5. Professional of record name, address, licensee number, and signature.

6. Copy of inspection report (State Fire Marshal, suppression contractor, etc.).

7. Preparer of shop drawings information complete on application. All information shall match the State Fire Marshal Fire Protection Licensing & Registration Listing Of Certified Firms.

SHOP DRAWINGS

8. Drawings are to be legible bluelines, photocopies, or computer plots (any live ink applied by hand is not acceptable), and all drawn to scale.

9. Professional of record shop drawing review and review stamp on each shop drawing sheet, and on cover of cut sheets (and on cover of calculations if applicable).
10. Denote specific type of suppression system (total flooding, local application pre-engineered, etc.), and associated NFPA standard(s) utilized in design.

11. Manual activation type and location.

12. Sequence of operations, (include actuation of building fire alarm system or hood suppression fire alarm, and/or simultaneous operations of multiple hazards, if applicable).

13. Supervision type (electric or pneumatic).

14. Clearances to electrical hazards.


17. Method of operation (expellant gas releasing mechanisms, dry chemical discharge controls, shutdown of appliances or equipment, common or multiple hood configurations).

18. Complete detection and suppression system with all devices labeled for type, size, quantity, location, and arrangement (pipe and fittings, nozzles, appliances, detectors, extinguishant type and containers, alarms and indicators).

19. Two sources of electric power for alarms and indicators.

20. Hood and ductwork configuration, for verification of compliant detection and suppression.

21. For total flooding systems, denote dimensions of protected enclosure, method of closure for closable openings, area of unclosable openings.

22. For local application systems, denote the location of the hazard, physical extent of the hazard, method for inspection, maintenance, and recharging.

PRE-ENGINEERED DATA OR HYDRAULIC CALCULATIONS

24. For pre-engineered systems, provide listed data (such as Underwriters Laboratories) denoting compliance and compatibility of the specific components and arrangement in the system.

25. For calculated systems, provide calculations denoting suppression chemical amount, piping type, size, length, and arrangement, nozzle descriptions and locations of flow points, and nozzle flow rates.

26. Location and function of detection devices, operating devices, auxiliary equipment, and electrical circuitry.

27. Battery calculations.

28. Reserve supply of extinguishant.

CUT SHEETS OF SUPPRESSION SYSTEM AND APPLIANCE PROTECTION

29. Hood and ductwork configuration with listed protection criteria.

30. Appliances with listed protection criteria.

31. Pipe and fittings.

32. Nozzles.

33. Extinguishing agent containers.

34. Detectors, indicators, and alarms.

35. Operating devices.

36. Fuel shutoff devices.

37. Portable fire extinguishers.

FEE CALCULATIONS

1. Devices limited to suppression nozzles only.

2. Money orders, cashier’s checks, certified checks, and company checks are accepted. NO PERSONAL CHECKS ACCEPTED, EFFECTIVE 9-1-00.

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