

Department of Military Affairs and Public Safety

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OFFICE OF THE STATE FIRE MARSHAL

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ARCHITECTURAL

Resubmittal: __Yes __No
Prior Walk-In Review: __Yes __No
Plan of Corrections: Yes No

NOTE: ALL BLANKS MUST BE COMPLETED OR PLAN REVIEW MAY BE DELAYED UNTIL ALL INFORMATION IS RECEIVED.

Project Name:		
Street Address:		
City:	Zip:	County:
Owner:		
Mailing Address:		
City:	State:	Zip:
Plans Submitter:Address:	Phone:	
City:	State:	Zip:
Approx. date of start:	Is the building sprinklered:YesNo	
Occupancy Type (as defined by NFPA	A 101, Life Safety (Code):
Total Square Footage:	Plans submitted on CD:YesNo	
Estimated Construction Cost:		
Name:	Signature:	
Bill Invoice To:		

REVIEW FEE INCLUDES <u>ALL</u> CONSTRUCTION INSPECTIONS, FINAL INSPECTION AND THE OCCUPANCY PERMIT.

ONE SET OF PLANS AND SPECIFICATIONS REQUIRED – ADDITIONAL SETS WILL BE RETURNED UPON REQUEST IF SHIPPING AND BILLING INFORMATION IS PROVIDED.