



**Department of Military Affairs and Public Safety**

Cabinet Secretary Jeff S. Sandy, CFE, CAMS

State Fire Marshal Kenneth E. Tyree, Jr.

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**OFFICE OF THE STATE FIRE MARSHAL**

1207 Quarrier St, 2<sup>nd</sup> Floor

Charleston, WV 25301

www.firemarshal.wv.gov

**SPRINKLER SYSTEM** Resubmittal: \_\_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: \_\_\_\_\_

Plan Submitter: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Approx. Date of start: \_\_\_\_\_ Plan Submitted on CD: \_\_Yes \_\_No

Occupancy Type (as defined by NFPA 101, Life Safety Code): \_\_\_\_\_

Total Square Footage: \_\_\_\_\_

System Type:  13  13D  13R  Low Hazard  Ordinary  Extra Hazard

Number of each type Sprinkler Heads: \_\_\_\_\_

Total number of Sprinkler Heads: \_\_\_\_\_ Standpipe: \_\_\_\_\_

Provide Fire Pump Type with Manufacturer Data GPM: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Bill Invoice To: \_\_\_\_\_

**ONE SET OF PLANS AND SPECIFICATIONS ARE REQUIRED – ADDITIONAL SETS RETURNED UPON REQUEST WITH SHIPPING AND BILLING INFORMATION PROVIDED WITH SUBMITTAL.**