# **CHARLESTON FIRE DEPARTMENT**

# Fire Marshal Division

			M D11 D	#DC	
Fire Alarm Quick Permit Application			Master Bldg. Permit:	#BC	
Submit plans to: Per	Permit Center 2 George Street, Charleston, SC 29401		Fire Alarm Permit:	#FI	
2 G		29401	Project Value:	\$	
Quick Permit Scope and Limi	itations				
review comments will not be accordance with the IFC 202 contractor may submit this coweek after the permit date—your work commences. Con work and initiate the standard	r modifications to existing systems a generated prior to permitting. Ap 18 and NFPA 72 2016 requirement documentation and obtain a permit this will allow time for the Fire Matractors who proceed with the Quird permitting process.	proval of the instant and is at the day. It the same day. It arshal Division to	tallation will be subject iscretion of the field insupections may not be o receive and review yo	to satisfactory inspection in spector. A properly licensed requested less than one our documentation while	
nstallation Location					
Business/Location Name:		5 1111 /0 1			
Street Address:		Building/Suite:			
Property Owner/Rep Name		Owner/Rep. Contact Number:			
Current use of structure:					
Proposed use of structure:					
Installation Contractor Respon	nsible for Fire Alarm System				
Contract company:		Fire Alarm Sta	te License #:	Expiration Date:	
Address:		City, State & Z	Zip:		
Contact person name:		Contact Phone:			
Contact fax:		Contact E-ma	act E-mail:		
Installing entire system, o	r Name of contractor installing	wire/conduit:			
Fire Alarm System Details  Describe the scope of the m	odifications and the reason for the	improvements of	or changes:		
Describe the devices involve	ed. Include the quantity of each dev	vice and if this w	ill be new or relocation	of an existing device:	

Fire Alarm Quick Permit Application

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1. Entire area of work to be shown on a single  $11 \times 17$ " sheet at 1/8" scale – no multiple sheet plans.

Drawings for notification appliances and area smoke detectors must be scaled to 1/8" and fit on an 11 x 17" sheet.

Exact scaling is not required if it is not applicable for code verification.

Projects larger than this may not utilize the quick permitting process.

# **Quick Permit Scope and Modification Limitations**

- 1. No change in occupancy classification, no new alarm panels (FAC or NAC), circuits added, or battery upsizing needed.
- 2. Area of work limited by plan size requirements listed above.
- 3. Work may include addition and/or relocation of: pull stations, duct detectors, smoke damper in-duct detectors, notification appliances, sprinkler monitoring devices, area smoke detectors, connection of exit access controlled egress or delayed egress, or connection of cooking hood or other suppression systems to the alarm system.

#### Plan Submittal Checklist

The following checklist is provided as a <u>summary of the minimum</u> information required before a review will be initiated. It is the contractor's responsibility to have a thorough working knowledge of the applicable ordinances, codes, and/or standards. Failure to provide the needed information will delay the review process.

- 1. Fire Alarm Quick Permit Application, 3 sets of prints, 1 set of documents (specs, etc.)
- 2. Name, address, phone, fax, e-mail, and state contractor's license number on the prints.
- 3. Name, address, phone, fax, e-mail, and state contractor's license number of the licensed contractor.
- 4. Creation date of plan, revision dates, point of compass, scale and graphic representation of scale.
- 5. Manufacturers cut sheets for all new equipment, clearly indicating which models will be utilized.
- 6. Floor plan indicating all device locations and clearly identifying rooms, areas, etc.
- 7. Floor plan shall distinguish between new and existing devices (such as clouding new work, etc.).
- 8. Conductor types and sizes for new work areas.
- 9. Revised battery calculations for affected FAC or NAC (If batteries must be upsized the quick permit does not apply). Voltage drop calculations for affected notification circuits.
- 10. Clear description of ceiling construction.
- 11. Operation of any specialized equipment (smoke control/exhaust or other life safety systems).
- 12. Compatibility listings to verify component compatibility with the FA control panel
- 13. Provide a copy of the most recent annual inspection report.

# **Pre-Final Inspection Checklist**

The contractor shall verify completion of the following items prior to scheduling the final inspection. Any item from this general list found outstanding at the time of the final will result in termination of the inspection and assessment of a re-inspection fee.

- 1. All equipment, devices, etc. have been installed per the submitted prints. Any deviations, as approved prior to the final, shall be noted on as-built drawings that will be provided to the inspector.
- 2. 100% pre-test has been completed and documented by the contractor.
- 3. Contractor has current State License and proper documentation indicating adequate training and qualifications to install the selected system, permit, stamped drawings, system manual(s), and needed testing equipment.
- 4. Final Inspection to include: verification of device placement, functional test of system, response time test, review of contractors 100% self-inspection documentation.
- 5. Provide a Record of Completion attesting to proper installation.
- 6. A copy of the Record of Completion shall be issued to the owner and the inspector.
- 7. A copy of the submittal package and the Record of Completion shall be placed in a plan tube or binder marked "Fire Alarm Plans Do Not Remove From Site" shall be installed at the fire alarm panel.

### Request for review and permit

I understand and agree that this permit is only for this project and provides authorization for the limited scope of work identified on the permit and the permit remains the property of the City of Charleston. By signing below I certify that I am an authorized agent for the company performing the work stated above, appropriately trained and qualified for the scope of work proposed, and all information provided is true and correct. I understand that if any information provided is found to be incorrect or falsely stated that any permits granted from this application are immediately null and void. I agree to comply with the ordinances of this jurisdiction and to perform the work herein stated in accordance with the submitted plans, specifications, applicable codes and standards, and shall be responsible for any and all violations of state laws and local ordinances. I understand that any alternation or change in plans made without written approval subsequent to the issuance of the permit shall constitute grounds for revocation of such permit and that all work is subject to field inspections. Permit void if work is not started within six months of the date of issue or if work stops for a period of six months. All permits expire two years from the date of their issuance. Additional permits shall be required for any additional work not authorized under a permit issued for this application. Applicant is responsible for calling to schedule all required inspections.

Name of person making application	Signature	Date

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