

**FREDERICK-FIRESTONE  
FIRE PROTECTION  
DISTRICT**



**Community Risk Reduction  
Division**

Office: (303) 833-2742  
Fax: (303) 833-3736  
E-Mail: [siacino@fffd.us](mailto:siacino@fffd.us)  
[dpuccetti@fffd.us](mailto:dpuccetti@fffd.us)  
[jvenerable@fffd.us](mailto:jvenerable@fffd.us)

---

---

**APPLICATION FOR PLAN REVIEW AND PERMITTING**

Fire Permit(s) # \_\_\_\_\_ Fee(s) \_\_\_\_\_

**Type of Plan Review:**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Site Development    | <input type="checkbox"/> Building and Floor Plans | <input type="checkbox"/> Tenant Finish      |
| <input type="checkbox"/> Kitchen Hood System | <input type="checkbox"/> Fire Sprinkler System    | <input type="checkbox"/> Fire Alarm System  |
| <input type="checkbox"/> Standpipe System    | <input type="checkbox"/> Spray Booth Operations   | <input type="checkbox"/> Fire Pump          |
| <input type="checkbox"/> AST Installation    | <input type="checkbox"/> UST Installation         | <input type="checkbox"/> UST Removal        |
| <input type="checkbox"/> High Piled Storage  | <input type="checkbox"/> LPG Storage              | <input type="checkbox"/> Clean Agent System |
| <input type="checkbox"/> Tanks & Tank Farm   | <input type="checkbox"/> Construction Permit      | <input type="checkbox"/> Special Use Permit |

Date: \_\_\_\_\_ Type of Building Construction: \_\_\_\_\_ Occupancy Classification: \_\_\_\_\_

Project Name: \_\_\_\_\_

Project Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_ County: \_\_\_\_\_

Total Development Square Footage: \_\_\_\_\_ Building Square Footage: \_\_\_\_\_

Number of Stories: \_\_\_\_\_ Basement: Yes:  No:

**General Contractor**

Name: \_\_\_\_\_ Town License# \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

Site Superintendent: \_\_\_\_\_ Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

**Fire Alarm Systems Contractor**

Fire Systems Contractor Name: \_\_\_\_\_ Town License # \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: Address: \_\_\_\_\_

Site Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

**Fire Sprinkler Systems Contractor**

Fire Systems Contractor Name: \_\_\_\_\_ Town License # \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

Site Contact: \_\_\_\_\_ Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

**Architect**

Architect Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

**Owner**

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email Address: \_\_\_\_\_

Owner Name/ Representative: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**NOTE: Subcontractors will not be allowed to start construction until a final set of approved drawings and all applicable fees have been paid to the Frederick-Firestone Fire Protection District. Failure to comply with this requirement will result in a Stop Work Order and an additional permit fee.**

**By submitting this Application, the applicant affirms that all information contained in this application is true and accurate, and that the applicant has full authority to submit this application. The applicant affirms and agrees that the owner, contractor, architect, subcontractors and their employees, agents, and representatives, will comply with all requirements of the Fire Code, Building Code, Mechanical Code and any other applicable Codes or standards. The applicant agrees to reimburse the Fire District for all fees (including attorneys' fees) costs and expenses it may incur because of a failure of the owner, contractor, architect, subcontractors and their employees, agents and representatives, to comply with all requirements of the Fire Code, Building Code, Mechanical Code and any other applicable Codes or Standards.**

\_\_\_\_\_  
**Applicant Name and Title** **Date**

**Fire Department Use Only**

Fire Plan Log #	_____	Plans Received	_____
Submitted to Hughes	_____	Completed by Hughes	_____
FFFPD Final Approval	_____	Called for Pickup	_____
Picked up by	_____	Fees Paid	_____