



**FIRE
SUBCODE
TECHNICAL SECTION**

Date Received _____
Date Issued _____
Control # _____
Permit # _____

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000

Block _____ Lot _____
 Work Site Location _____
 Owner in Fee _____
 Address _____
 Tele. (_____) _____
 Contractor _____
 Address _____
 Tele. (_____) _____ Fax. (_____) _____
 Lic. No. _____
 Federal Emp. No. _____

B. FIRE PROTECTION CHARACTERISTICS

Use Group Present _____ Proposed _____ Fire Alarm System
 Constr. Class Present _____ Proposed _____ [] New [] Existing
 Heating Systems [] New [] Existing [] HVAC Location of Panel: _____
 Type: [] Gas [] Oil [] Electric [] Solar Fire Suppression/Standpipe System
 [] Other _____ [] New [] Existing
 Location: _____ Location of Main Control Valve: _____
 Total Cost of Fire Protection Work \$ _____

JOB SUMMARY (Office Use Only)

PLAN REVIEW
 [] No Plans Required
 Joint Plan Review Required:
 [] Building [] Plumbing
 [] Electric [] Elevator
 [] Fire Plans Approved
 Date: _____
 Approved by: _____
SUBCODE APPROVAL
 [] CO [] CCO [] CA
 Date: _____
 Approved by: _____

INSPECTIONS
 Type: Alarm System _____ Dates (Month/Day) Failure Approval Initial
 Suppression Sys. _____
 Standpipe _____
 Fire Pump _____
 Pre-Eng. System _____
 Mechanical _____
 Smoke Control _____
 TCO _____
 Final _____
 Other _____

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature _____

U.C.C. F140
(rev. 5.06)

1 White = Inspector Copy
3 Pink = Office Copy

2 Canary = Office Copy
4 Gold = Applicant Copy

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Water Supply Source _____
 Method of Alarm/Suppression System Supervision _____

FEE (Office Use Only)

Storage Tanks
 Type: [] Flammable Liquid [] Combustible Liquid
 [] LPG [] LNG Capacity _____ Fuel _____
Alarm Systems [] 110v Interconnected NUMBER
 [] System
 Alarm Devices (i.e., smoke, heat, pull, waterflow) _____
 Supervisory Devices (i.e., tamper, low/high air) _____
 Signaling Devices (i.e., horn/strobes, bells) _____
 Other Devices _____
 TOTAL _____
Suppression Systems
 Fire Pump _____ GPM Type _____
 Dry Pipe/Alarm Valves _____
 Pre-action Valves _____
 Sprinkler Heads (Dry and Wet) _____
 Standpipes _____
Pre-engineered Systems
 Wet Chemical _____
 Dry Chemical _____
 CO₂ Suppression _____
 Foam Suppression _____
 Halon Suppression _____
 Other _____
 Kitchen Hood Exhaust System _____
 Smoke Control System _____
 Gas [] or Oil [] Fired Appliances _____
 Other _____

Administrative Surcharge \$ _____
 Minimum Fee \$ _____
 DCA Training Fee \$ _____
 TOTAL FEE \$ _____