



PLAN REVIEW APPLICATION

Providence Fire Department
325 Washington Street
Providence, RI 02903

OFFICE USE ONLY

Date of Submission
Plan Number FPB FA
Check # Amount
Assigned FPB FA

Fire Prevention Bureau (401) 243-6050

Fire Alarm Division (401) 243-6008

Two (2) complete sets of plans (1 for Fire Prevention Bureau and 1 for Fire Alarm Division) must be submitted along with this form. However, only one (1) project manual and specification and/ or (1) set of sprinkler hydraulic calculations and cut sheets need be submitted.

This form must be printed on legal size paper (8 1/2 x 14).

I Name of Facility Facility address
Facility owner
Mailing address
City State Zip Code Telephone# Fax#
General Contractor RI License #
Contractor's Address
City State Zip Code Telephone# Fax#
Fire Alarm Contractor RI License # Type of License
Contractor's Address
City State Zip Code Telephone# Fax#
Architect RI License #
Architect Address
City State Zip Code Telephone# Fax#
Engineer RI License #
Engineer Address
City State Zip Code Telephone# Fax#

II TYPE OF OCCUPANCY (Mark all that apply for mixed use buildings)
EDUCATION LODGING/ROOMING STORAGE
MERCANTILE APARTMENT BLDG INDUSTRIAL
BUSINESS HOTEL/DORMITORY DAY CARE
HEALTH CARE BOARDING HOUSE TENT
AMBULATORY HEALTHCARE DETENTION/CORRECTIONS
RESIDENTIAL BOARD & CARE SPECIAL STRUCTURE (SPECIFY)
PLACE OF ASSEMBLY A. >1000 B. 301 -- 1000 C. 50 - 300
If Assembly specify approximate occupant load For restaurants with occupant load < 50 use Mercantile
Is this a change of occupancy? YES NO

III TYPE OF WORK PROPOSED - use X
NEW BUILDING SQ. FT PER FLOOR TOTAL SQ. FT.
ADDITION SQ. FT. PER FLOOR TOTAL SQ. FT.
RENOVATIONS SQ. FT. PER FLOOR TOTAL SQ. FT.
Description of work to be performed

IV BUILDING CONSTRUCTION CLASSIFICATION (SEE DEFINITIONS in NFPA 220)
NFPA 220 TYPE:
TYPE I (FIRE-RESISTIVE) I (443) I (332)
TYPE II (NON-COMBUSTIBLE OR LIMITED COMBUSTIBLE) II (222) II (111) II (000)
TYPE III (ORDINARY CONSTRUCTION) III (211) III (200)
TYPE IV (HEAVY TIMBER) IV (2HH)
TYPE V (WOOD-FRAME) V (111) V (000)
If unknown, write in IBC(State Building Code) construction classification No. of Stories:

V FIRE PROTECTION INFORMATION (CURRENTLY IN PLACE)
Sprinkler system: FULL PARTIAL WET DRY OTHER NONE
Standpipe system: FULL PARTIAL
Fire alarm system: LOCAL MUNICIPALLY CONNECTED BOX # HIGH RISE BOX #
FIRE PROTECTION INFORMATION (PROPOSED)
Sprinkler system: FULL PARTIAL WET DRY OTHER NONE
Standpipe system: FULL PARTIAL
Fire alarm system: LOCAL MUNICIPALLY CONNECTED BOX # HIGH RISE BOX #

VI OTHER INFORMATION
Total estimated cost of construction including structural, architectural, and MEP/FP's:
Type of heating and/or air conditioning: ELECTRIC GAS OIL

I hereby certify that I have the authority to make the foregoing application, that the application is correct and that the owner of this building and the undersigned agree to comply to the applicable codes and ordinance of this jurisdiction.

Telephone # Fax # Print Name Signature