West Metro Fire Protection District

433 S. Allison Pkwy. Lakewood, CO 80226 Phone: 303.989.4307 www.westmetrofire.org



Emergency Responder/Radio Amplification System Permit Application

NEW INFORMATION - PLEASE READ

A West Metro Fire Rescue New Building or Tenant Improvement permit <u>SHALL</u> be approved, issued and paid for <u>PRIOR</u> to any required deferred submittal reviews for that project

** \underline{NO} field work of any kind shall be allowed without an approved permit and stamped plans on site. Work performed without a permit may be assessed an additional fee.**

| APPLICANT INFORMATION | | | | | | |
|---|--------|-----------------|---------------------|--|--------------------------|------------|
| Company Name: | | Contact Person: | | | | |
| Project Name/Tenant: | | | | | | |
| Project Address: | | | | | | |
| City: | | State: | | | ZIP Code: | |
| Phone: | Email: | | | | | |
| Design Professional: | | | | | Phone: | |
| Email: | | | | | | |
| PROJECT INFORMATION (CHECK ALL THAT APPLY) | | | | | | |
| Type of Building: □ New Building | | | □ Existing Building | | | |
| Type of Work: | | New Install | | | ☐ Extend/Repair Existing | |
| Design Standard: ☐ 2009 IFC | | □ 2015 IFC □ 20 | | | | □ 2021 IFC |
| Description of Work/Scope of Work: | | | | | | |
| After Hour Review (\$240.00 fee in additional to standard review fee) *this is the only expedited plan review service offered at this time* *Qualifications for this review type will be determined by the intake person and you will receive a status log notification after acceptance via Mobile Eyes if your project meets the qualifications set forth by the reviewers. This review type is accepted on a case by case basis that will be dependent on project size or device count (whichever is applicable)* Construction plans and documents shall be complete and of sufficient clarity to indicate the location, nature and extent of the work proposed and show in detail compliance with the applicable codes, standards and amendments. Electronic Floor Plans to Scale Showing Location of ALL Equipment One-Line Diagram Written Scope of Work Equipment Data Sheets Copy of Valid FCC-Issued Radio Operators License Copy of Certification from a Nationally Recognized Organization, School, or Certificate from Equipment Manufacturer of Equipment being Installed. | | | | | | |
| ☐ I, the applicant, verify that plans have been fully <u>unlocked</u> and <u>unsecured</u> at the time of plan submittal. | | | | | | |
| BY SIGNING BELOW, I CERTIFY THAT: I have thoroughly read and understand all information on this Permit Application and that all information supplied is true and correct to the best of my knowledge. I understand that Construction Plans and Documents shall be complete and of sufficient clarity to indicate the location, nature and extent of the work proposed and show in detail compliance with the applicable codes, standards and amendments. If this is not the case, my plans may be rejected and a re-submittal fee may be assessed. Review and approval by the Fire Code Official shall not relieve the applicant of the responsibility of compliance with applicable codes, standards and amendments. Date: | | | | | | |

Plan review comments and status regarding projects are available by logging in to your contractor portal at www.mobile-eyes.com/PA Index.asp?Submit=Logon. Feb-20