



**Sanford Fire Department
Fire Marshal's Office**

***APPLICATION FOR FIXED FIRE SUPPRESSION
SYSTEM***

EXCLUDING FIRE SPRINKLER SYSTEMS

Application is hereby made for the installation of a Fixed Fire Suppression System, excluding Fire sprinkler systems. The Sanford Fire Department Office of the Fire Marshal requires certain information prior to the installation. Plans and installation shall conform to NFPA 1, NFPA 17, NFPA 96 (editions as adopted by ME Fire Code) standards and local ordinances.

This application shall be filled out completely and returned to the Sanford Marshal's Office.

Submit one (1) set of COMPLETE plans. "Complete" means that the plans and applications shall be accompanied by a letter from the designer that plans meet all requirements of state code and local ordinances. The plans submitted shall include all information regarding the system or system alteration including specification sheets for devices, wiring diagrams/riser diagrams, floor plans (including location of devices). One set of plans may be submitted electronically, and one set may be retained at the job site. *WE PREFER ELECTRONIC SUBMISSION.*

Approved plans must be on file with the Sanford Fire Department Office of the Fire Marshal and a permit issued BEFORE installation work begins. Failure to obtain a permit before installation begins may lead to fines.

The Office of the Fire Marshal shall be notified and review any deviations from the approved plan before final testing.

All inspections require a minimum of 48 hours advance notice by the Installer. A Fire Official shall witness any operational and final tests as required. The Official shall not perform the test. The installer shall provide adequate manpower and equipment for such test.

The Sanford Fire Department requires a functional test be witnessed by a fire official. Furthermore, the company and installers shall hold current registration cards with the Sanford Fire Marshal's Office.

COMMERCIAL COOKING FSS INDUSTRIAL FSS CLEAN AGENT FSS
GAS STATION FSS

Date of Application: _____ FD Registration # (Supervising Installer): _____

Property Name and Address: _____



**Sanford Fire Department
Fire Marshal's Office**

Installing Company Name: _____

Installing Company Phone #: _____ Installing Co. Fax #: _____

Installer Name (Individual in charge of job): _____

Email Address: _____

Fee of \$75.00 for a puff test and plan review. Retest fee of \$100.00

THIS IS NOT A PERMIT