

# FIRE ALARM PERMIT APPLICATION

<b>FOR OFFICE USE ONLY</b>
Permit No. _____
File No. _____

**INSTRUCTIONS:** Submittals shall include the **Attached Fire Alarm System Checklist**. Application must be typed or printed in ink. Submit original application signed and notarized. **Attach (2) two sets** of hardcopy plans, specs, product approvals and calcs.  
For further assistance call (954) 635-2130.

<b>1. BC Proj. Mgr:</b>	Mobile: (    )    -	Email:
<b>2. BC Project No.:</b>		
3. Campus: <input type="checkbox"/> North <input type="checkbox"/> Central <input type="checkbox"/> South <input type="checkbox"/> DTC <input type="checkbox"/> Cypress <input type="checkbox"/> Coral Springs <input type="checkbox"/> Miramar <input type="checkbox"/> Other:		
<b>4. Building No. / Location:</b>		
5. Proposed Work: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alter <input type="checkbox"/> Maint. <input type="checkbox"/> Demolition <input type="checkbox"/> Other Scope of Work: _____ _____ _____		
<b>6. Est. Cost</b> \$	<b>Est. Duration</b>	<b>Days</b>
<b>7. Contracting Firm:</b>		
Address:		
Qualifier Name:		
License No.:	Phone:	
<b>8. Architect / Engineer:</b>		
Address:		
Qualifier Name:		
License No.:	Phone:	
9. Present Occupancy		
10. Proposed Occupancy		

This application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, ROOFS, FURNACES, BOILERS, HEATERS, TANKS, AND AIR CONDITIONERS, etc...

**OWNER/CONTRACTOR AFFIDAVIT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

**“NOTICE:** In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies or federal agencies.”

**WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.**

**11. Owner (or Project Manager):**

\_\_\_\_\_  
 Print Name of Owner (or PM)  
 Date: \_\_\_\_\_  
 \_\_\_\_\_  
 Owner or Program Manager Signature

STATE of FLORIDA, COUNTY of \_\_\_\_\_  
 Sworn to and subscribed before me this \_\_ day of \_\_\_\_\_, 20\_\_, by \_\_\_\_\_.

\_\_\_\_\_  
 Notary Signature  
 (SEAL)

Personally known  OR produced identification   
 Type of identification produced \_\_\_\_\_

**Contractor Qualifier:**

\_\_\_\_\_  
 Print Name of Contractor  
 Date: \_\_\_\_\_  
 \_\_\_\_\_  
 Contractor (Qualifier) Signature

STATE of FLORIDA, COUNTY of \_\_\_\_\_  
 Sworn to and subscribed before me this \_\_ day of \_\_\_\_\_, 20\_\_, by \_\_\_\_\_.

\_\_\_\_\_  
 Notary Signature  
 (SEAL)

Personally known  OR produced identification   
 Type of identification produced \_\_\_\_\_

Building Code Administration Use Only	
<b>BCAD Approval Signatures:</b>	
Recommended for Approval: _____	Date: _____
Application Approved by: _____	Date: _____

## Fire Alarm System Checklist for Plan and Submittal Review

The following **is intended to assist** the engineer and or installing contractor in designing and submitting for review - a "code compliant" - fire alarm system. **This document in no way details all of the requirements that may be necessary for a complete code compliant system.**

**Note: Systems shall be designed in accordance with the codes adopted in State Fire Marshal Rule 4A-3 and specifically, NFPA 101 and NFPA 72 .**

- YES  NO      1. Is the **project name** identified on the drawing?
- YES  NO      2. Is the **project address/campus** identified on the drawing?
- YES  NO      3. The **job is valued under \$5000.00** and bears no engineer seal. As such, a copy of the signed contract or a notarized affidavit from the installing contractor (deemed as acceptable proof) is required.
- YES  NO      4. The **job value exceeds \$5,000.00**. As such, a Florida Registered Professional Engineer must seal shop drawings, or provide a set of sealed-engineered documents that parallel the shop drawings (FBC 104.4.1.3 (5) and s. 471.025 FS; each sheet of plans and prints which must be sealed under the provisions of Chapter 471 FS shall be sealed, signed and dated by the professional engineer in charge in accordance with Rule 61G15-23.002 (2) F.A.C.
- YES  NO      5. What **type of license** does the qualifier hold as required by the State of Florida?  EC  EF  EH  EY  
**License #:** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_
- YES  NO      6. **Occupancy type(s):** \_\_\_\_\_ Class (if applicable): \_\_\_\_\_  
**ASSEMBLY** in particular \_\_\_\_\_  
**Occupant Load:** \_\_\_\_\_ (show occupant load calculation breakdown)
- YES  NO  N/A      7. Is a **comprehensive "Scope of Work"** statement provided (FAC 61G-15-32.003)?
- YES  NO  N/A      8. In an **addressable** system, is the **number of devices** shown in the submittal/drawings?
- YES  NO      9. In a **non-addressable** system, is the **number of zones** shown in the submittal/drawings?  
A) **Number of Stories?** \_\_\_\_\_ Height? \_\_\_\_\_  
B) **Sq. Ft.?** \_\_\_\_\_ (Per floor and building total).
- YES  NO      10. To your knowledge, is this a "**Required System**"?
- PL  NPL      11. Is the system compliant with MDC Standards & the state requirements for educational facilities, FBC 423.
- YES  NO      12. Is the system **Power-Limited** or **Non-Power Limited**?

- YES  NO 13. Is "**Emergency Forces Notification**" or "**sprinkler supervision**" provided?
- YES  NO  N/A 14. Is **Off-site monitoring** provided and is the **name of** the monitoring station identified?
15. What is the **method of communication** to the monitoring station?  
\_\_\_\_\_.
- YES  NO 16. Are two **(2) phone lines** connected to dialer?
- If a **long distance telephone service** (including WA TS) is used, are there two different long distance service providers?
- YES  NO  N/A 17. If **radio system** is used does it transmit over 2 "independent" channels?
- YES  NO 18. Are **ALL** components "**compatible**" and "**listed**" for fire service? (All devices shall be compatible and shall be listed for fire service use by a nationally Recognized Testing Laboratory - NFPA 72 1-5.3). Has verification of compatibility between components and panel been provided?
- YES  NO 19. Are devices "**listed**" for "**conditions**", i.e., **voltage, temperature and humidity**? NFPA 72 1-5.5.1, 1-5.5.2.4
- YES  NO 20. Are **ALL** device and component **model #s and quantities** of each, specified on the plan?
- YES  NO 21. Are **floor plans drawn to scale**? (1/8" scale is preferred)
- YES  NO 22. Have Standardized **NFPA 170 Symbols** been utilized?
- YES  NO 23. Have all **required EXITS** been indicated on the Floor Plans?
- YES  NO 24. Is **each** device, appliance, and component indicated and numbered on the floor plan?
- YES  NO 25. Are **Emergency Control Functions** indicated on floor plans and riser and have they been detailed in the Sequence of Operations? (**Door release, smoke control, or stair pressurization**, etc.)
- YES  NO 26. Are the appropriate **existing, new, replaced or relocated** devices delineated/clouded?
- YES  NO 27. Are **ALL** rooms & spaces **labeled clearly** on floor plans, w/occupant loads clearly indicated for any Assembly Occupancies?
- YES  NO 28. Are **ceilings higher than 10' & not smooth or flat** indicated on plans?
- YES  NO 29. Is the **Riser Diagram** provided showing each floor and zone of all devices?
- YES  NO 30. Are all **Notification Appliance Circuits (NACs), Initiating Device Circuits (IDCs) & Signaling Line Circuits (SLCs)**... including appropriate EOLs. clearly labeled & shown & are congruent on the Riser & Floor plans?
- YES  NO 31. Is the "**Sequence of Operation**" specified on the plan, or with the submittal?
- YES  NO 32. Are **ALL wire sizes, types, number of, and conduit sizes and type**, listed on the **riser diagram**... (and Floor Plan when appropriate)?

- YES  NO  N/A 33. Is the system **zoned**?
- YES  NO  N/A (By floor, smoke zone, sprinkler zone, (**size < 15,000 sq. ft.?**)
- YES  NO 34. Is a **class/style** shown on the drawings for all **initiating, notification, and signaling** line circuits? NFPA 72 3-4.2
- YES  NO 35. Are **battery calculations** detailed in a "**chart format**" for **EACH battery back-up power supply. in the system?** This shall include remotely located control equipment such as control units, circuit interfaces, and other equipment essential to system operation. NFPA 72 1-5.2.8.1
- YES  NO 36. Is the Fire Alarm System and other power supplies on a **dedicated circuit?** NFPA 72 1-5.2.5.2
- YES  NO 37. Is the appropriate breaker **LOCKED OPEN** and **MARKED** per code (Labeled at all panels locations)? NFPA 72 15.2.5.2
- YES  NO  N/A 38. A) Is FACP or a remote annunciator **located at the main entrance?** NFPA 72 1-5.7.1.1
- YES  NO  N/A B) If the FACP is not then is a **durable sign at the main entrance indicating its location?**
- YES  NO  N/A 39. Is the Trouble "**Buzzer**" or **Sonalert** located in an area likely to be heard?
- YES  NO  N/A 40. If the control panel is located in a space that is not occupied 24 hours per day, is it **protected with smoke detection?** (This includes all FACP's, Annunciators with control, and power supplies/extenders that control system functions) NFPA 72 1-5.7.1.1
- YES  NO  N/A 41. Are sub panels that are located in unoccupied areas **protected with smoke detection?** NFPA 72 1-5.7.1.1
- YES  NO  N/A 42. Are **relays** for control devices **located within 3'** of the controlled circuit or appliance and is the installation wiring between the fire alarm control unit and the relay or other appliance monitored for integrity or fail-safe? NFPA 72 3-9.2.1
- YES  NO 43. Is there **at least one (1) Pull Station** on each floor or at least one per system? Are manual pull-stations located within 5' of each exit opening on each floor? NFPA 72 2-8.2.2
- YES  NO 44. Is the horizontal distance that needs to be traversed on the same floor to reach a manual pull station <200? NFPA 72 28.2.4, NFPA 101 9-6.2.4
- YES  NO 45. Is there **at least one (1) pull station** for each fire alarm system using automatic fire detection or waterflow detection devices? NFPA 101 9-6.2.5
- YES  NO  N/A 46. Does each. Horn / Strobe device... have its **Candela rating** listed on the floor plan, adjacent to each device?
- YES  NO  N/A 47. Is each Strobe adequate for the area covered, **and located per NFPA 72** requirements (see also the Appendix section)?
- YES  NO  N/A 48. In **RESIDENTIAL** occupancies, are the required **HANDICAPPED rooms and their bathrooms properly covered?** ("**WP**" strobes in bathrooms, proper

**Candela ratings, and proper locations in the Sleeping areas)**

- YES  NO  N/A 49. In **bathrooms accessible to the Public**, are proper AN device(s) installed? If stalls constitute individual rooms, is a Visual device inside each stall? If Showers and/ or Saunas are present are "**WP**" devices installed?
- YES  NO  N/A 50. Are **Horn/ Strobes** placed **no more than 100' apart in corridors** and **within 15' from end of the corridor** (including jogs in corridors and changes in elevations and within 15 foot of corridor doors which close)? NFPA 72 4-4.4.2.2
- YES  NO 51. Are any devices **obstructed** (racks, shelves, furnishings, equipment, etc.)?
- YES  NO  N/A 52. Are **Horn/Speaker Strobes** located **no less than every 3 floors in stairwells?** NFPA 72 3-8.4.1.3.5.6.4
- YES  NO  N/A 53. Will **Horns/ Speakers** provide a **min. of 15dbA above ambient noise levels or 5dbA above peak levels >60 sec?** (in Public Mode) NFPA 72 4-3.4
- YES  NO  N/A 54. With respect to sleeping areas, will **Horns/Speakers** provide a **minimum of 70 DBA** in the occupiable areas measured at the pillow level? NFPA 72 4-3.4
- YES  NO  N/A 55. Is the audible level a **min. of 85dbA** in all **mechanical rooms** NFPA 72 4-3.1.4 ((**not to exceed 120dB per NFPA 72 4-3.1.2**))?
- YES  NO  N/A 56. Is there **at least 1 listed "WP" Audio/ Visual device**, located **both facing the street** to which arriving Fire Apparatus will arrive and at the end of the building closest to the Fire Sprinkler Riser (if the building is Fire Sprinklered)?
- YES  NO  N/A 57. Are **Spot Type Smoke Detectors (S/D's)** located on smooth ceilings on 30'centers or within 21' (.7) to any point? NFPA 72 23.4.5.1.2
- YES  NO  N/A 58. Are **S/D's** that are located on solid joists or beams placed per NFPA 72 2-3.4.6?
- YES  NO  N/A 59. Are **S/D's** on peaked or sloped ceiling located per NFPA 72 2-3.4.6.2?
- YES  NO  N/A 60. Are **S/D's** located **> 3' away** from **A/C diffusers, kitchen and bathroom doors?** NFPA 72 2-3.5.1
- YES  NO  N/A 61. Are **S/D's** placed in a proper position **under raised floors?** NFPA 72 2-3.4.9
- YES  NO  N/A 62. Is **S/D** or **H/D** spacing reduced for partitions extending **to within 18" of ceilings, and is the CEILING HEIGHT been indicated**, on which the detectors are to be installed? NFPA 72 2-3.4.10.
- YES  NO  N/A Is there a possibility of **smoke stratification** in high ceilings (designer may need to select a more **sophisticated type** of detector)? NFPA 72 2-3.6.1.4
- YES  NO  N/A 63. Are **Projected Beam Type S/D's** spaced/installed per mfr. specs? NFPA 72 2-3.4.4 and 2-3.6.3
- YES  NO  N/A 64. Are **Duct Smoke Detectors** installed in the **supply of all HVAC Systems >2000 cfm ((FBC 606.2.1 & NFPA 90A 4-4.2))?**

- YES  NO  N/A 65. Are duct smoke detectors installed at each story where return air and supply air risers serve two or more stories and are part of a return air and supply air system having a design capacity greater than 15,000 cfm? ((FBC 606.2.3 and NFPA 90A 4.4.2))?
- YES  NO  N/A 66. Are **Duct Smoke Detectors** rated for the **air velocities and conditions (temp. / humidity)** in which they are installed?
- YES  NO  N/A 67. Are **Smoke Detectors** installed **within 10'** of the door to any smoke proof enclosure ((NFPA 101 72.3.10.1 ))?
- YES  NO  N/A 68. Is **H/D** spacing reduced on solid joist or beam construction > 4" and **properly placed**? Has a **detailed sketch been submitted**? NFPA 72 2-2.4.2 and 2-2.4.3
- YES  NO  N/A 69. Is **H/D** spacing reduced on high ceilings per NFPA 72 22.4.5.1 and Table 2-2.4.5.1?
- YES  NO  N/A 70. Are there **H/D's** on peaked or sloped ceilings per NFPA? NFPA 72 2-2.4.4.1 and 2-2.4.4.2
- YES  NO  N/A 71. Is the **Fire Pump monitored** for **run, phase reversal & power failure**? NFPA 72 3-8.3.3.2
- YES  NO  N/A 72. Is the **Generator monitored** according to NFPA 110? (note class or type) NFPA 72 1-5.2.10.1 and 1-5.8.1
- YES  NO 73. Is the **Elevator Recall** detectors connected to the fire alarm system as required by NFPA 72 3-9.3
- YES  NO  N/A Are heat detectors used to shutdown elevator power? If so, the interconnecting conductor or equivalent path shall be monitored for integrity. NFPA 72 3-9.3
- YES  NO  N/A 74. Are **F/A panels interconnected** in accord with NFPA 72 3-8.1?
- YES  NO  N/A 75. Are **all sprinkler systems connected** to the F/A system NFPA 72 3-8.3.2.4? 3-
- YES  NO  N/A 76. Are **all other type Suppression systems connected** to the fire alarm system (FM-200, Halon system, Hood system, Pre-action system etc.)? NFPA 72 3-8.3.2.5.2
- YES  NO  N/A 77. Is the **control circuit used to shut down elevator power** monitored for presence of operating voltage? **Loss of this voltage shall indicate a supervisory signal at the control unit and remote annunciators.** NFPA 72 3-9.4.4.
- YES  NO  N/A 78. Are calculations provided **for each notification appliance circuit**?
- YES  NO  N/A 79. Is the **wattage tap indicated for all speakers and circuits**?
- YES  NO  N/A 80. Are **wattage calculations provided for each amplifier**?
- YES  NO  N/A 81. **Do all calculations correlate with the Catalog/Spec. sheets and indicated/highlighted for the plan reviewer?**
- YES  NO  N/A 82. What **type** of fire alarm system was specified?  Central Station  Local



Remote  Proprietary  Auxiliary

- YES  NO  N/A 83. Does the **Proprietary or Local systems** have the required battery size (**24 hr. standby and 5 alarm**)?
- YES  NO  N/A 84. Does the **Central Station system** have the required battery size (**24 hr. standby and 5 alarm**)?
- YES  NO  N/A 85. Does the **Remote Station system** have the required battery size (**60 hr. standby and 5 alarm**)?
- YES  NO  N/A 86. Does the **Emergency Voice EVAC System** have the required battery size ((**when general evacuation is used, the battery standby requirements must match the fire alarm system type used in the building (24 hours or 60 hours standby) and the alarm must sound for not less than 5 minutes**)) NFPA 72 38.4.1.3.4.2 (when partial evacuation or relocation of occupants is used, 15 minutes of alarm is required NFPA 72 1-5.2.6) NOTE: ALL other battery backups for other panels, power supplies or other equipment essential to system operation, shall meet the same requirements as those of 1-5.2.1 through 1-5.2.8 and 1-5.8.6).
- YES  NO  N/A 87. Does the facility have a compliant emergency **Generator** providing **back-up power to the fire alarm system**? (Still Requires a min. of 4 hours standby and 5 minutes of alarm for battery back-up) NFPA 72 1-5.2.6 (b)
- YES  NO 88. For **Local Alarms Only**; Is the Manual pull station information plate installed at each pull station stating: "**Local Alarm Only - Dial 911**"?
- YES  NO  N/A 89. Are the **interior evacuation devices** activated by operation of the sprinkler flow switches and/or any other suppression system ((Florida Building Code 903.9.3 and 905.1.5.3, NFPA 101 303.4.2.2, 31-3.4.2.2, 12-3.4.2.1 exception #2, and 13-3.4.2.1 exception #2))?
- YES  NO 90. Do the sprinkler valve tamper switches cause an audible, visual and supervisory indication at the annunciator panel only? (Valve tamper shall not cause door closers, chimes, bells or alarms to operate (NFPA 72 3-8.3.3.3.2))
- YES  NO 91. **Are the sprinkler systems supervised** in accordance with the 2004 edition of the Florida Building Code Section 903.9.3?
- YES  NO Are all waterflow alarms non-silenceable while water is flowing?
- YES  NO 92. Is all fire alarm equipment installed in **locations that do not exceed the voltage, temperature or humidity limits** ((NFPA 72 1-5.5.1))?
- YES  NO 93. Is the **Control Equipment** mounted in **air-conditioned, temperature controlled spaces**? Are details submitted on the plans? ((NFPA 72 1-5.5.2.4))
- YES  NO 94. Are **all Audible Devices / Circuits** programmed in the "**Temporal Code of Three**" pattern? (NOTE: NOT Required if the intent is to relocate persons to another area, and not to evacuate the building) ((NFPA 72 3-8.4.1.2 and NFPA 101 9-6.3.5))





**Submit this Checklist with Fire Alarm  
Permit Application and Plan submittals.**

- YES  NO      95. Has the systems been designed to comply with ADA and the Florida Accessibility for Construction. **If more than two visual devices** can be seen in **135° field of view, and within 55'**, are the circuits "**synched**"? NFPA 72 (4-4 and A-4.4.4.1.1(3))
  
- YES  NO      96. Is **all wiring** that is located in **wet or damp** locations, **listed** for this use (**Wet & Direct Burial**) & **Cut Sheets** included?
  
- YES  NO      97. Is the **depth and installation method** of the **U/G** burial cable, **indicated on** the drawings?
  
- YES  NO      98. Is the **wiring installation method - indicated on** the drawings (**free wired, wire mold, conduit, etc.**)? Is the method per MDC Standars?
  
- YES  NO      99. Are **the locations of ALL required. Surge Suppressors indicated** on **both the Riser and Floor Plans**, and are ALL Cut Sheets included in submittal (120 Power supplies; both telephone lines; all wiring which enters and/or leaves the building; any wiring which could introduce current from a "Lightning Strike" into the F/A system)?
  
- YES  NO      100. Are **ALL** submittals congruent with one another? **Cut sheets, Bill of Materials List, Floor Plans, Riser Diagram, etc.?** Thorough and Comprehensive in nature and in scope? Neatly and Professionally packaged?
  
- YES  NO      101. Has the fire alarm system been designed to comply with the ADA and the Florida Accessibility Code? (2004 edition Florida Building Code 905.1.5.2, 905.1.5.5 and 11-4.28; CABO/ANSI A117.1)
  
- YES  NO      102. Are visual signal appliances provided in each of the following areas: restrooms and any other general usage areas, meeting rooms, conference rooms, hallways, lobbies and any other area for common use?

NOTE: Common use areas also include classrooms, cafeterias, filing and photocopy rooms, employee break room, dressing rooms, examination rooms, treatment rooms, and similar spaces that are not used solely as employee work areas. ((2004 edition Florida Building Code 905.1.5.2, 905.1.5.5 and 11-4.28; CABO/ANSI A117.1; U.S. Architectural and Transportation Barriers Compliance Board - Bulletin #2)

I hereby attest that, to the best of my knowledge, the aforementioned checklist information and the battery calculation(s) are accurate and adequate for the monitoring system being submitted.

Date: \_\_\_\_\_

Applicant Signature

State Registration Number

Applicant Name (print)

Applicant Company

Address

City

State

Zip Code

Telephone

Facsimile Number