



FIRE SUPPRESSION SYSTEM APPLICATION

State Form 28354 (R / 5-99)
Indiana Department of Fire and Building Services
PLAN REVIEW DIVISION
Office of the State Building Commissioner
402 West Washington Street, Room E245
Indianapolis, IN 46204

OFFICE USE ONLY

PROJECT NUMBER	
RECEIPT NUMBER	
FILING DATE	
FEES PAID	

SUBMITTED BY *(All correspondence will be directed to submitter)*

Name of firm or individual		☐ Mail Out ☐ Pickup
Street address	Telephone number ()	Telephone number ()
City, state, ZIP code		Contact
I hereby certify to the best of my knowledge, the fire suppression system design for the listed installation location conforms to the applicable rules of the Fire Prevention and Building Safety Commission. Also, the design criteria for the facility is correct.		
☐ Fire Suppression Contractor ☐ Architect/Engineer ☐ NICET III ☐ Other _____		
Signature		Name <i>(typed or printed)</i>

OWNER'S CERTIFICATION

As owner of the project for which this application is being filed, I hereby certify:

- (1) The description of facility use is correct, and
- (2) The installation will be constructed in accordance with the released plans and specifications,
- (3) The structure will not be occupied or used until all known code violations are corrected,
- (4) Any changes to the released documents will be filed with the Office of the State Building Commissioner,
- (5) Another application will be submitted at such time as the described use may change.

Signature of owner or legal designee	Name <i>(typed or printed)</i>	Telephone number ()
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PROJECT INFORMATION

Name of project		Project number
Address <i>(number and street)</i>		Code review official <i>(if known)</i>
Suite or floor		
City	County	Facility use
Closest intersecting street or road		Direction from intersection ☐ North ☐ East ☐ South ☐ West

SERVICING FIRE DEPARTMENT

Name of department	Department identification number
Address <i>(number and street, city, township, ZIP code)</i>	

OFFICE USE ONLY

Code review official	Release stamp
Date released	
Processing fees	
Other fees	
Total fees	

(Continued on the reverse side)

FILING REQUIREMENTS

Under the provisions of Indiana Code 22-15-3, plans, specifications, or changes thereto, for all Class 1 structures to be built, added to, altered, moved into or within the State of Indiana, including fire suppression systems, must be submitted to the state building commissioner for state-wide code compliance review before construction or installation begins. This Application must accompany the submission and must be complete and legible. Under the provisions of the General Administrative Rules (675 IAC 12-6-4) a construction release is required for the installation or alteration of a fire suppression system, prior to start of work. Exception: Maintenance and/or repair to existing fire suppression systems need not be filed. Additions or alterations limited to those listed in GAR Section 12-6-4 need not be filed.

DOCUMENTS REQUIRED FOR FILING

1. Completed Application for Fire Suppression System.
2. Appropriate filing fees, see current fee schedule.
3. One complete set of plans, specifications and hydraulic calculations containing the following:
(additional sets if desired)
4. Ceiling construction
5. Full height cross section
6. Location of area separation walls
7. Location of partitions
8. Occupancy (use) of each area or room
9. Size of city main in street, static, and residual pressure, flow (GPM) and whether dead end or circulating.
10. Other sources of water supply, with pressure or elevation.
11. Make, type and nominal orifice size of sprinkler heads.
12. Total area protected by each system on each floor.
13. Number of sprinklers on each riser per floor.
14. All control valves, check valves, drain pipes and test pipes.
15. Total number of sprinklers on each dry pipe system, pre-action system, combined dry/pre-action, or deluge system.
16. Type and location of hangers and sleeves.
17. When an addition to an existing system, enough of the existing system shall be indicated to verify compliance.
18. Hydraulic calculations which includes the water supply, sprinkler, hose stream and in rack demands.

METHOD OF DESIGN

- ☐ Hydraulic Calculations
 ☐ Pipe Schedule
 ☐ Combination (Hydraulic and Pipe Schedule)

TYPE OF SUPPRESSION SYSTEM

- ☐ Halon number _____
 ☐ Water type:
 ☐ Dry
 ☐ Pre-action
 ☐ Quick response
 ☐ Deluge

- ☐ Other (specify) _____
☐ Carbon Dioxide
 ☐ Wet standpipe
 ☐ Dry standpipe
 ☐ Dry chemical
 ☐ Foam
☐ System throughout facilities
 ☐ System in specific areas only (partial) specify area _____
 (complete)

- Total number of heads this application _____ Degree of sprinkler head (typical) _____
☐ NFPA 71
 ☐ NFPA 72B
 ☐ NFPA 72D
☐ System is supervised in accordance with:
 ☐ NFPA 72A
 ☐ NFPA 72C
 ☐ other specify _____
 System is: ☐ Proposed ☐ Existing

FACILITY INFORMATION

Number of stories	Square footage of facility	Height of building feet
☐ New building ☐ Addition ☐ Remodeling ☐ Change of occupancy ☐ Change of use ☐ Building upgrade use of facility _____		
Hazard classification _____ ☐ Solid ☐ Palletized Plastics: ☐ A ☐ B ☐ C ☐ High Pile storage height of racks and piles (maximum) _____ commodity class: ☐ I ☐ II ☐ III ☐ IV ☐ other _____		
Flammable/combustible liquids/gases		☐ Aerosols type
Fireworks/explosives		

WATER SUPPLY INFORMATION

Static pressure PSI	Residual pressure PSI	Gallons Per Minute GPM
Remote area to be used _____ Density used _____ Type of supply: ☐ City water main ☐ Private water main ☐ Fire Pump: Type ☐ Reservoir ☐ Private well ☐ Electric ☐ Diesel ☐ Gravity tank ☐ other _____ ☐ other _____		
Rated: Flow GPM		Pressure PSI

ATTACH SUBMISSION FEES HERE