

Elburn and Countryside Fire Protection District

Fire Prevention Bureau
200 E. Route 38
Elburn IL 60119
Office: (630)365-6855 / Fax: (630)448-1253

Fire Alarm Submittal Form

PROPERTY INFORMATION:

Building Name: _____
Building Address: _____
Owner Name: _____
Owner's Address: _____
Owner's Phone _____ Fax: _____ E-mail: _____

SYSTEM DESIGNER/CONTRACTOR:

Company Name: _____
Company Address: _____
Contact Person (Designer): _____
Phone: _____ Fax: _____ E-mail: _____

Building Use and Occupancy Classification -Per International Building Code Chapter 3

- | | | | | | |
|--|---|--|--|--|--|
| <input type="checkbox"/> Assembly-1 | <input type="checkbox"/> Assembly-2 | <input type="checkbox"/> Assembly-3 | <input type="checkbox"/> Assembly-4 | <input type="checkbox"/> Assembly-5 | <input type="checkbox"/> Business |
| <input type="checkbox"/> Educational | <input type="checkbox"/> Factory-1 | <input type="checkbox"/> Factory-2 | <input type="checkbox"/> High-Hazard-1 | <input type="checkbox"/> High-Hazard-2 | <input type="checkbox"/> High-Hazard-3 |
| <input type="checkbox"/> High-Hazard-4 | <input type="checkbox"/> High-Hazard-5 | <input type="checkbox"/> Institutional-1 | <input type="checkbox"/> Institutional-2 | <input type="checkbox"/> Institutional-3 | <input type="checkbox"/> Institutional-4 |
| <input type="checkbox"/> Mercantile | <input type="checkbox"/> Residential -1 | <input type="checkbox"/> Residential -2 | <input type="checkbox"/> Residential -3 | <input type="checkbox"/> Residential -4 | <input type="checkbox"/> Storage-1 |
| <input type="checkbox"/> Storage-2 | <input type="checkbox"/> Utility | | | | |

Plans Are For:

- New building, new fire alarm system
 Retrofitting a new fire alarm system within an existing building
 Modifying an existing fire alarm system within an existing building
 Other _____

Square footage covered by the alarm system: _____

Total number of Initiation devices: _____

Total number of Warning devices: _____

Number of stories in the building:

One Two Three Four Five "High Rise" (>75ft.) Total # of Floors _____

Is there a basement? Yes No

The Fire Alarm System is located on what level of the building:

Entire Basement First Floor Second Floor Third Floor Fourth Floor Other _____

ALARM SYSTEM TYPE (check all that apply)

- | | | |
|--|---|---|
| <input type="checkbox"/> Manual System | <input type="checkbox"/> Point Addressable system | <input type="checkbox"/> Automatic smoke and fire detection |
| <input type="checkbox"/> Analog Addressable system | <input type="checkbox"/> Manual and automatic detection | <input type="checkbox"/> Conventional zone system |
| <input type="checkbox"/> Addressable system | <input type="checkbox"/> Wireless system | |

ALARM SYSTEM SUPERVISION-FIRE DEPARTMENT NOTIFICATION (check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Central station system | <input type="checkbox"/> Proprietary system | <input type="checkbox"/> Remote station system |
| <input type="checkbox"/> Auxiliary system | <input type="checkbox"/> Local Alarm | <input type="checkbox"/> Other _____ |

FIRE PROTECTION AND LIFE SAFETY SYSTEMS INTEGRATED WITH ALARM SYSTEM (check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Wet sprinkler system | <input type="checkbox"/> Clean agent suppression system | <input type="checkbox"/> Smoke control exhaust |
| <input type="checkbox"/> Dry pipe sprinkler system | <input type="checkbox"/> Kitchen suppression systems | <input type="checkbox"/> Emergency generator supervision |
| <input type="checkbox"/> Preaction sprinkler system | <input type="checkbox"/> Private water supply supervision | <input type="checkbox"/> Delayed egress unlocking devices |
| <input type="checkbox"/> Deluge sprinkler system | <input type="checkbox"/> Fire Pump | <input type="checkbox"/> Elevator automatic recall |
| <input type="checkbox"/> Standpipe | <input type="checkbox"/> Door hold-open release | <input type="checkbox"/> HVAC equipment supervision |
| <input type="checkbox"/> Municipal water supply supervision | <input type="checkbox"/> Fire shutter hold-open release devices | <input type="checkbox"/> Smoke control stairway pressurization |
| <input type="checkbox"/> Sprinkler/standpipe supervision | <input type="checkbox"/> Other | |

ALARM SIGNAL (check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> Pre-alarm notification signal | <input type="checkbox"/> Audible alarm signal | <input type="checkbox"/> Pre-recorded voice notification |
| <input type="checkbox"/> Visual alarm signal | <input type="checkbox"/> Manual paging notification | <input type="checkbox"/> Other _____ |

ALARM ANNUNCIATION (check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Fire alarm control panel | <input type="checkbox"/> Remote annunciator(s) |
|---|--|

POWER EQUIPMENT FOR FIRE ALARM SYSTEM (check all that apply)

- | | | |
|--|--|--|
| <input type="checkbox"/> AC power source circuit breaker | <input type="checkbox"/> Emergency generator | <input type="checkbox"/> Secondary Public Power Source |
| <input type="checkbox"/> Other _____ | | |

DOCUMENTATION

PROVIDE PRODUCT DATA SHEETS FOR THE FOLLOWING COMPONENTS OF THE ALARM SYSTEM

- | | | |
|---|--|--|
| <input type="checkbox"/> Fire alarm control panel | <input type="checkbox"/> Audible notification devices | <input type="checkbox"/> Power boosters |
| <input type="checkbox"/> Remote annunciators | <input type="checkbox"/> Visual notification devices | <input type="checkbox"/> Standby batteries |
| <input type="checkbox"/> Alarm, re-transmission equipment | <input type="checkbox"/> Exterior notification devices | <input type="checkbox"/> Sprinkler water flow switches |
| <input type="checkbox"/> Manual pull boxes | <input type="checkbox"/> Remote test devices | <input type="checkbox"/> High/low water pressure switches |
| <input type="checkbox"/> Smoke detection devices | <input type="checkbox"/> Protective covers | <input type="checkbox"/> High/low air pressure switches |
| <input type="checkbox"/> Heat detection devices | <input type="checkbox"/> Relays | <input type="checkbox"/> Sprinkler control valve tamper switches |
| <input type="checkbox"/> Control modules | <input type="checkbox"/> Power supplies | <input type="checkbox"/> Fire pump controllers |
| <input type="checkbox"/> Wiring & conduit | | |

SUBMITTED PLANS AND DOCUMENTS SHALL CONTAIN THE FOLLOWING INFORMATION OR NOTE THE LOCATION OF THE FOLLOWING EQUIPMENT AND/OR DEVICES

- | | | |
|----------------------------------|------------------------------------|------------------------------------|
| • Legend of symbols & scale used | • Manual pull boxes | • Remote annunciation |
| • Room dimensions | • Notification audible devices | • System riser diagram |
| • Building elevations | • Notification visual devices | • F.A. system operational sequence |
| • Fire alarm circuits | • Exterior audible/visual devices | • Standby battery calculations |
| • Heat detection devices | • Candela rating of devices | • Voltage drop calculations |
| • Smoke detection devices | • F.D. communication devices | • Power supply calculation |
| • Duct smoke detection devices | • Fire alarm control panel | • Special Hazards |
| • Flame detection devices | • Fire alarm communications center | • System integration features |

Submitter

Date

Notes:
