FIRE SUPPRESSION / FIRE ALARM

Application For Plan Review and Permit

132 North Elmwood Avenue
Phone: 330-722-9030
www.medinaoh.org
permits@medinaoh.org

The City Of Medina Ohio
Preserving the Past. Forging the Future.

Permit Number _____ Date of Application _____

GENERAL

Property Location _____

Name of Project _____

Property Owner _____

Address _____ City _____

State _____ Zip _____ Phone _____ Email _____

CONTACT INFORMATION

Submitter

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Reg. No. _____ Email _____

System Designed By _____

State Fire Marshal # _____ Expiration Date _____

Installation Contractor: (if different from submitter)

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Reg. No. _____ Email _____

State Fire Marshal # _____ Expiration Date _____

Underground Water Supply Contractor:

Name _____

Address _____ City _____ State _____ Zip _____

Phone _____ Reg. No. _____ Email _____

State Fire Marshal # _____ Expiration Date _____

PROJECT INFORMATION

Type of improvement: New Building ☐ Addition ☐ Alteration ☐ Change of Use ☐

Use Group: *(check all that apply)*

A-1 ☐ A-2 ☐ A-3 ☐ A-4 ☐ A-5 ☐ B ☐ E ☐ F-1 ☐ F-2 ☐ H-1 ☐ H-2 ☐
H-3 ☐ H-4 ☐ H-5 ☐ I-1 ☐ I-2 ☐ I-3 ☐ I-4 ☐ M ☐ R-1 ☐ R-2 ☐ R-3 ☐
R-4 ☐ S-1 ☐ S-2 ☐ U ☐

Construction Type: *(check all that apply)*

I-A ☐ I-B ☐ II-A ☐ II-B ☐ III-A ☐ III-B ☐ IV ☐ V-A ☐ V-B ☐

Building Size: _____ sq.ft. **Size Covered By Suppression or Alarm System:** _____ sq.ft.

Type of System Being Installed: Wet Pipe ☐ Dry Pipe ☐ Preaction ☐ Deluge ☐ Ltd. Area ☐
Combined Dry Pipe - Preaction ☐ Antifreeze ☐ Circulating Closed Loop ☐ Smoke Control ☐
Hood Suppression ☐ Describe if other: _____

Fire Alarm and Detection System: Manual ☐ Automatic ☐ Sprinkler Monitoring and Alarm ☐

Occupancy Hazard Classification: Low-Hazard Occupancy ☐ Moderate-Hazard Occupancy ☐
High-Hazard Group ☐ Multiple-Hazard Group ☐

SUBMITTAL PROCESS

Submittal process:

3 sets of plans and documents are required and must include the following:

1. System drawings
2. Hydraulic calculations
3. Copy of current State Fire Marshal's certificate for:
   - System designer
   - Installation contractor
   - Underground installation contractor
   - Field personnel assigned to project

Submit to ► **Medina City Building Department** **Building Official**
132 N. Elmwood Ave.
Medina, Ohio 44256 **Phone 330-725-0521 fax 330-764-4385**

Allow minimum of 2 weeks for plan review

ACCEPTANCE TESTING

Acceptance testing:

Installation inspections:

Contact: Building Department @ 330-722-9030 allow 24 hours' notice

Testing acceptance inspections (underground, suppression, hood, alarm, etc.):

Contact: Fire department @330-725-1772 allow 48 hours' notice

You must have on the job site:

Copy of approved plans
Hydraulic calculations
Test certificate (s) – above ground certificate or underground certificate

On-site personnel m**ust have on their person** all required state certificates.

Final inspection:
Contact: Building Department @ 330-722-9030 allow 24 hours' notice

Fire Department - copy of NFPA 25 for building owner and copy of the approved, or as-built approved, plans for building owner.

Application By: _____ Date _____
Signature of owner, contractor, or authorized agent

Print name of Applicant: _____

OFFICIAL USE

Suppression Systems: $100.00 base + $2.00 per 100 sq. ft.

Plan Review: $140.00/hr. or portion of an hour.

(MCO 38-05 Passed 2-14-05)

3% BBS fee

Base Fee	**$**
$2.00 per 100 sq. ft.	**$**
Plan Review Fee	**$**
3% BBS fee	**$**
Total	**$**

Signature _____ Date _____
Building Official