



# Department of Commerce

Division of State Fire Marshal

## Request for Fire Safety Inspection

**INSTRUCTIONS:** Submit this form to schedule a new construction inspection. **ALLOW 48 HOURS FOR A RESPONSE** to your request. Cancelled inspections will be rescheduled based upon availability of field inspectors.

**Date Submitted:** \_\_\_\_\_ **Permit No.:** \_\_\_\_\_ **Request Date(s) of Inspection:** \_\_\_\_\_

### Facility Information

**Location:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **County:** \_\_\_\_\_

### Requestor Information

**Individual/Company Making Request:** \_\_\_\_\_ **Contact Person:** \_\_\_\_\_

**Contact Phone Number:** \_\_\_\_\_ **Confirmation E-Mail Address:** \_\_\_\_\_

### Inspection Information

**Number of Floors:** \_\_\_\_\_ **Square Footage:** \_\_\_\_\_ **Number of Devices/Heads:** \_\_\_\_\_

### System Type

Fire Alarm System      Hood Suppression      Sprinkler System      AST Installation

AST Removal      UST Installation      UST Removal      New Hotel\*\*

Other \_\_\_\_\_

*\*\*Include a copy of the Hotel/Motel application that has been submitted to the Bureau of Testing and Registration. An inspection will not be scheduled until the Hotel/Motel application is received by the Bureau of Testing and Registration.*

### Test Type

Full Acceptance      Above Ceiling Inspection      Hydro Test      Final Life Safety

Tank Tightness      Tank-Other \_\_\_\_\_      Other \_\_\_\_\_

**List any other specific notes/special instructions that may be needed.**

**Please read before signing:** By submitting this form and signature, the applicant affirms that: 1) the structures/systems subject to this inspection request have been installed in accordance with approved plans and manufacturer's specifications and will be/have been tested in accordance with the manufacturer's specifications and the appropriate installation standard; 2) any deviations from the design standards have been properly documented and approved by the appropriate authority and copies of such documents and approvals shall be provided to the State Fire Marshal Inspector; and 3) all inspections are subject to the inspection fee requirements listed in OAC 1301:7-7-01(L), Ohio Fire Code 112(L). If the State Fire Marshal's inspector arrives on site and is unable to commence testing because the above-mentioned requirements have not or cannot be fulfilled, the applicant will still be assessed an inspection fee. Incomplete submittals will not be scheduled for an inspection.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Office Use Only

<b>Date Scheduled:</b>		<b>Time:</b>		<b>Inspector/Phone Number:</b>	
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**Notes:**