

# SUBMITTAL REQUIREMENTS FOR COMMERCIAL FIRE ALARM SYSTEM PROJECT

When submitting your application for Commercial projects please include the following:

1. Completed Building Permit Application with page 2 stamped by a design professional.
2. If you don't know your tax parcel number for your property to put on your application, please contact the Tax Office at 724-465-3812.
3. Two (2) complete sets of sealed drawings for your building project.
4. Your contractor's workman's compensation and liability insurance. If you are not using a contractor or your contractor doesn't have workman's compensation insurance, please complete the Workman's Comp form and have it notarized.
5. Sub-division and land development approval, if required.
6. Current Certificate of Occupancy from Labor & Industry.
7. \$150.00 application fee (\$50.00 of which is non-refundable) – please make check payable to ***Indiana County Code Division***.

# INDIANA COUNTY

Office of Planning and Development  
801 Water Street  
Indiana, PA 15701  
(724) 465-3870 Fax (724) 465-3151

FOR OFFICE USE ONLY	
Permit #	_____
Date:	_____

## Building Permit Application ~Commercial Fire Alarm System~

**\*\*\* All Drawings Must be Sealed by an Architect or an Engineer \*\*\***

### Company at Site Address Information

Company Name at Site Address \_\_\_\_\_

Site Address \_\_\_\_\_

City \_\_\_\_\_ State PA Zip \_\_\_\_\_

Municipality \_\_\_\_\_ Township / Borough \_\_\_\_\_



**YOU MUST PROVIDE A TAX PARCEL NUMBER FOR THE PROPERTY AT THE SITE ADDRESS LISTED ABOVE**

Tax Parcel # \_\_\_\_\_

Company at Site Mailing Address (if different than site address) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Person (for above Company) \_\_\_\_\_

Phone Number \_\_\_\_\_ Cell Phone \_\_\_\_\_

Fax Number \_\_\_\_\_

Contact Person's E-mail Address: \_\_\_\_\_

**Estimated cost of the project:** \$ \_\_\_\_\_

Water Supply \_\_\_\_\_

Sewage \_\_\_\_\_

Electricity provider \_\_\_\_\_

Gas Provider \_\_\_\_\_

# of multi-family dwelling units \_\_\_\_\_

# of accessible dwelling units \_\_\_\_\_

Fire suppression  Full  Partial  None

If this is an existing commercial building, please provide our office with a copy of the Certificate of Occupancy

Is this permit for a medical care facility regulated by the Health Care Facilities Act?  
 Yes  No If "yes," please attach copy of plan approval issued by the PA Department of Health.

# Contractor's Information

Contractor: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## To be completed by the Design Professional

(Affix seal to the right of name and address)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

PA License # \_\_\_\_\_

E-Mail: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

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### Alternative Construction Method/Material

Will an alternative construction method or material be used on this project?  Yes  No  
If "Yes," applicant or design professional must submit a signed statement indicating that the proposed method or material meets the requirements of 34 PA Code § 403.44.

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Applicant:

\_\_\_ OWNER \_\_\_ ARCHITECT \_\_\_ ENGINEER \_\_\_ CONTRACTOR \_\_\_ AGENT/OTHER \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

## **BUILDING PLAN REQUIREMENTS FOR COMMERCIAL PROJECTS**

The following items are required for new commercial projects. Drawings should be drawn to ¼" or 1/8" scale and shall provide the necessary information to verify compliance with the building code. **All drawings shall bear the stamp of the design professional responsible for the design, with their signature on the first page of each set of drawings.**

The construction drawings shall be submitted and shall include:

- **Title Page Drawing:** to include the contact information for all design professionals, description of square footage per floor, number of floors, type of construction to be utilized, area modifications utilized, use group classification(s), separation or non-separation of mixed use groups, design occupant load(s), finish materials classification, design codes utilized.
- **Site Plan Drawings:** to include all utility layouts handicap parking & access, designated fire lanes, distance between adjacent structures and property lines.
- **Floor Plan Drawings:** to include the use of all areas, location & types of fire resistant construction, U.L. Listing of fire resistant construction, means of egress components, handicap access.
- **Structural Drawings:** to include the structural design calculations, geo-technical engineering report, uniform live loads, dead loads, roof & snow loads, wind loads, footing, foundation, framing, concrete masonry, wood and steel construction details.
- **Electrical Drawings:** to include all lighting facilities, electrically operated equipment, and electrical circuits required for all service equipment of the building or structure. Drawings should include panel schedules, grounding systems, and wiring methods.
- **Mechanical Drawings:** to include size & type of appliances, construction of flues and chimney systems, ventilation air provided, fresh air make-up provided, location of all ducting and piping.
- **Plumbing Drawings:** to include a plan view and a riser diagram of waste and water piping, pipe sizing, grade of piping, drainage fixture unit loads on stacks and drains, water distribution design criteria.
- **Fire Protection Systems:** to include the submittal guide for each type of system. See specific submittal guide requirements.

INDIANA COUNTY CLIMATIC AND  
DESIGN CRITERIA  
FOR THE PA UNIFORM CONSTRUCTION CODE

Indiana County does hereby adopt the following climatic and geographic design criteria, in accordance with International Residential Code, 2018; Section R301.2, and Table R301.2(1), said Table being attached hereto:

- a. Ground Snow Load is 35 lbs. per square foot
- b. Wind Speed is 90-115 mph depending on exposure area
- c. Seismic Design Category "A"
- d. Weathering – Severe
- e. Frost Line Depth – 36 inches
- f. Termite – Moderate to Heavy
- g. Decay – Slight to Moderate
- h. Winter Design Temperature 0 to 10 Degrees Fahrenheit
- i. Ice Shield Underlayment Required – Yes
- j. Flood Hazard – Reference specific municipal ordinance
- k. Air Freezing Index is 2000
- l. Mean Annual Temperature is 47 Degrees Fahrenheit
- m. Roof Vents shall be a minimum of 16 inches above the roof line

## **PENNSAFE BUILDING INSPECTION SERVICES LLC**

### PLAN SUBMITTAL HANDOUT for FIRE ALARM SYSTEMS

The Project Submittal package is required to include all information on this handout. Check each applicable item. If not applicable, then mark item n/a. This form must be submitted with attached project drawings.

- Permit Application
- Municipal Prior Approval
- Two full sets of Plans (**minimum 24"x 30"**) drawn to scale
- Existing Certificate of Occupancy (if available)

**The applicant shall be responsible to ensure that design specifications and plans are complete and in compliance with the requirements of the International Fire Code and applicable standards.**

**\*\*The following items are required to be included on the Plans\*\***

(Check every item that will be included in the project or mark n/a as not applicable)

#### **Proposed Work:**

- Design Code Used: \_\_\_\_\_; Use Group: \_\_\_\_\_; Construction Type: \_\_\_\_\_
- Provide code compliance path (ie: IBC, NFPA).
- New alarm system within a new building.
- New alarm system within an existing building.
- Replacement of existing system. (Include reason for replacement in explanatory comments).
- Modification of existing alarm system.
- Two-way communication.

#### **Alarm System Coverage:**

- Required manual fire alarm system.
- Required automatic detection.
- Non-required automatic detection.
- Audible/Visual annunciation.
- Sprinkler monitoring.
- HVAC smoke detector monitoring.
- Smoke damper detectors.
- Smoke-rated fire doors.
- High rise building.
- Elevators.
- Type 1 cooking hood extinguishing system monitoring.
- Special extinguishing system releasing panel.
- Offsite alarm supervision; Type: \_\_\_\_\_
- Alternative materials/methods/design of construction or equipment, approved and signed by the Building Official, and where applicable, the Fire Marshal, or Assistant Fire Marshal.

**Documents Provided:**

- Fire alarm permit application.
- Fire alarm plans (2 sets). Plans shall be drawn to minimum 1/8" scale on minimum 24"x30" sheets.
- Letter from designer or engineers approved stamp.
- For engine-driven generators, include verification of conformance with NFPA 72 including the fuel supply.

**Fire Alarm Plans:**

- Site plan.
- All plan sheets to include title block, name and address of project, and north arrow.
- Drawings must include all portions of the building affected by the construction project.
- Floor plan clearly detailing all walls, doors, and identify use of all areas.
- Exterior walls and doors are clearly distinguished from other construction features.
- Details of ceiling heights and construction, when applicable to smoke detectors and ceiling strobes.
- A scaled bar graph shall be shown on all sheets.
- Include source and location of emergency standby generators.
- Legend provided.
- Tenant improvement plans show all adjacent spaces and devices as necessary to show proper device coverage when system includes visual annunciation devices or area coverage smoke detection.
- Location of all initiating and annunciating devices in project area.
- Circuit zone numbers, and/or individual device addresses and approximate wiring information for all devices in project area.
- Distinguish new from existing alarm equipment with "N" and "E" subscripts.
- Strobe candela ratings.
- Location of all control panels, booster panels, and remote annunciators.
- Location of all sprinkler risers, waterflow switches, control valve; fire pumps and controllers.
- Location of all cooking hood extinguishing systems and other special extinguishing systems.
- Smoke damper locations.
- Location of smoke doors on hold-open devices or door-closing devices.
- Air handlers requiring duct detectors.
- Ancillary devices, fuel and power shut offs, release of exit door latching hardware, release of door hold-open devices, elevator shunt trip and recall and control voltage monitoring.
- Location of remote indicator devices.
- Typical device wiring connections.
- Battery and voltage drop calculations (all affected panels).
- Manufacturer's data sheets and model numbers for all equipment and devices. (Identify model used).
- Compatibility listings verifying component compatibility with the FACP.
- Fire alarm riser diagram showing the affected circuits and address/zone numbers, FACP and NAC panel make and model numbers.
- Alarm response matrix (system specific).

**Riser Diagram:**

- All control panels, proposed additions and modifications.
- All new and existing initiating and annunciation circuits.
- New and existing connected devices on all modified circuits.
- An "E" or "N" subscript to distinguish existing from new equipment and devices.
- An equipment legend for all devices, (including the model identification), if different from legend shown on floor plans.
- All power supplies. Include AH rating batteries.
- Offsite monitoring connections.
- Interface of fire safety control functions.
- Conductor types and sizes. Identify if wiring is enclosed in conduit, exposed, power-limited or non-power limited.
- Device addresses for addressable systems; or device locations by room number or name, for zoned systems.

**\*\*THIS COMPLETED FORM MUST BE SUBMITTED WITH PROJECT PLANS\*\***