

West Haven Fire Services



20 Admiral Street
West Haven, CT 06516
Deputy Chief Mike Esposito

365 Elm Street
West Haven, CT 06516
Fire Marshal Roger Sicotte
203 931-0031

860 Ocean Avenue
West Haven, CT 06516
Fire Marshal Keith Flood

Plan Review Application

Property Name _____ Date ____/____/____

Property Address _____ Phone ____ - ____ - ____

Applicant's Name _____ Fax ____ - ____ - ____

Applicant's Address _____ City _____ State ____ Zip Code ____

Plan /Revision Date ____/____/____ West Haven Building Permit # _____

Architect _____ **Contact person** _____

Mailing Address _____ Email _____

Phone ____ - ____ - ____ Fax ____ - ____ - ____

Contractor _____ **Contact Person** _____

Mailing Address _____ Email _____

Phone ____ - ____ - ____ Fax ____ - ____ - ____

(Check ALL that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Existing | <input type="checkbox"/> Occupancy change |
| <input type="checkbox"/> Renovation | <input type="checkbox"/> Addition | <input type="checkbox"/> Kitchen Hood/Suppression |
| <input type="checkbox"/> Fire Alarm System | <input type="checkbox"/> Sprinkler System | <input type="checkbox"/> Other (describe in summary section) |

Occupancy Classification

___ Assembly	___ Business	___ Daycare	___ Educational
___ Factory	___ Healthcare	___ Institutional	___ Industrial
___ Mercantile	___ Residential	___ Storage	___ Other

Summary of Work

Connecticut General Statute 29-292-4e Plan Submittal and Review

Detailed plans and specifications for new structures and additions, renovations, or alterations to existing structures shall be submitted by the applicant to the local fire marshal having jurisdiction to demonstrate compliance with Section 29-263 of the Connecticut General Statutes. ***Exception one and two family dwellings***

In the event of modifications or changes to the plans that have been submitted, a new set of plans showing the changes must be submitted for review.

Knox Box Application has been received and shall be mounted in a location determined by the Fire Marshal.

Received by _____ Date ____/____/____

Construction value _____ Fee Paid _____ Check # _____

Comments

Fire Marshal Signature _____ Date _____

Plan Review Fees

When any person, firm, business or other entity submits a plan, application or other document in connection with a building permit for review and/or approval to the office of the Fire Marshal, the fees for the said review and/or approval shall be as follows:

Construction Value	Fee
\$0.00 up to and including \$40,000.00	\$100.00
In excess of \$40,000	\$100.00 plus 0.5% per \$1000.00 or portion thereof
Special Installation (hood & duct, computer rooms, kitchen suppression systems, other)	\$100.00 per system

All Fire Marshal Fees must be paid in full in order to receive Fire Marshal approval per the State of Connecticut Building Code 105.3.1.2.

Late fees of 1.5% per month will apply to any unpaid fees not received within 30 days upon receipt.

One and two family occupancies are exempt from the above fees.

Any building plans 10,000 square feet or greater may be required to have an independent plan review, as determined at the sole discretion of the office of the Fire Marshal. The independent plan review shall be conducted by a plan reviewer hired by the applicant and subject to the approval of the Office of the Fire Marshal. The applicant shall pay all costs associated with the contracted plan reviewer's independent review. The applicant shall submit the plan reviewer's written report, along with documentation that the reviewer's costs have been paid in full, prior to the Office of the Fire Marshal's review and approval of such plan.