



Nampa Fire District - Prevention Bureau  
 Prevention Phone: 208-468-5751  
 Email: prevention@nampafire.org  
 Admin Office: 9 12th Ave South - Nampa ID 83651

## Fire Alarm Permit Application

### BUSINESS / PROJECT INFORMATION

Business Name &/or Project Name: \_\_\_\_\_  
 Business Address &/or Project Site: \_\_\_\_\_  
 Business Contact Name (if applicable): \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Building Permit #: \_\_\_\_\_ Date: \_\_\_\_\_

### **Designer Information**

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Qualifications (Ref. NFPA 72) NICET : \_\_\_\_\_

### **Applicant / Installer Information**

Company Name: \_\_\_\_\_ Address: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Qualifications (Ref. NFPA 72) NICET : \_\_\_\_\_

### ALARM PROJECT DETAILS

#### Check One Box:

New system (Existing Building)	New system (New Building)	Re-submittal (Occupancy ID#) _____
Modification of existing system	Replacement of existing system (include reason in comments below)	

#### **Scope of Work/Explanatory Comments:**

Describe the work to be performed in detail including the reasons for the purposed work. Please explain any unusual conditions and/or special design considerations necessary to understand the proposed scope of work and system design.

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

Check **ALL** sections applicable to new or existing system design.

<input type="checkbox"/> Complete automatic detection	<input type="checkbox"/> Manual alarm system	<input type="checkbox"/> Partial area automatic detection
<input type="checkbox"/> Audible/Visual annunciation	<input type="checkbox"/> Sprinkler monitoring	<input type="checkbox"/> Non-Required automatic detection
<input type="checkbox"/> Smoke damper detectors	<input type="checkbox"/> Smoke rated fire doors	<input type="checkbox"/> HVAC smoke detector monitoring
<input type="checkbox"/> High Rise Building	<input type="checkbox"/> Elevators	<input type="checkbox"/> Off Site alarm supervision
<input type="checkbox"/> Special Extinguishing System releasing panel	<input type="checkbox"/> Type I cooking hood extinguishing system monitoring	Other: _____

**Building Occupancy Groups:** List all occupancies within the building; verify with architect.

### Internal Information Filled out by Nampa Fire Prevention Bureau

Occupancy ID#: \_\_\_\_\_ Date Application Received: \_\_\_\_\_ Date Approved: \_\_\_\_\_

## **RESPONSIBILITIES & REQUIRED INFORMATION & DOCUMENT**

#1 Fill out NFD Permits Account Request Form on-line (find form on website) #2 You will receive an email after filling out and submitting a NFD Permits Account Request. Be sure to save that email to reference during the application/inspection process. In the email there is a upload link called "application intake folder". Please submit/upload this application along with all additional documents to that folder link. #3 Fees will be invoiced after review and need to be paid before the permit will be issued.

### **Joint Cooperation & Responsibilities**

The applicant shall be responsible to ensure that design specifications and plans are complete and in compliance with the requirements of the Internal Fire Code and all applicable standards. Compliance with standards and codes necessitates joint cooperation. Owners are responsible to provide a proper building alarm system; the architect is responsible to provide the alarm system designer with occupancy classifications and building plans as approved under the building permit; the designer is responsible for code compliant design and proper integration of any modifications into existing systems; the vendor is responsible for providing approved equipment and shop drawings in conformance with the designer's plans; the installer is responsible to follow the approved plans and to ensure the installation meets applicable codes.

### **Construction Documents shall include:**

Plans. Battery calculations for all control panels. Field measurements will be acceptable in lieu of itemizing existing components, to determine existing system standby and alarm loads. Voltage drops calculations for all annunciation circuits. *Exception:* Not required when using 14g wire for the single audible alarm device required for sprinkler monitoring alarm systems. Field measurements will be acceptable in lieu of itemizing existing devices to determine existing circuit loads.

Manufacturer's model numbers and cut sheets for all devices and equipment, including control pane add-on components. Cut sheets shall be marked with asterisk, arrow, etc.; to identify which specific model of device is being used, when multiple models are shown. Compatibility Listings to verify component compatibility with the fire alarm control panel. An alarm response matrix. If applicable, attach a copy of any Fire Department Special approval or upgrade agreements.

### **Site Plan shall include:**

Show entire building and identify areas of project.  Show type of wall separation between contiguous building, which are considered separate buildings.  Identify the building "entrances" where applicable to placement of a new FAC panel or annunciator.  Include surrounding streets where applicable to FD access.

### **Floor Plans shall include:**

The entire project area. Tenant improvement plans shall include adjacent spaces and devices as necessary to show proper device coverage, when the alarm system includes visual annunciation devices or area coverage smoke detection.  Location of all initiating and annunciating devices in the project area.  Circuit zone numbers and/or individual device addresses and approximate wiring information for all initiating and annunciating devices in the project area.  Distinguish new from existing alarm equipment with "N" and "E" subscripts.  Approximate wiring information, include circuit zone numbers/device addresses.  Strobe candela ratings.  Details of ceiling heights and construction, when applicable to smoke detectors and ceiling strobes.  Exterior walls and doors, clearly distinguished from other construction features (irrelevant features such as floor covering boundaries, fences, sidewalks, etc. should not be included or shall be clearly identified).  Interior walls and partitions which extend 6' or more above FFL and the Intended Room use (e.g., classroom, storage restroom, office vestibule, warehouse, manufacturing). *Exception: not required when the alarm system does not include visual alarm devices or area smoke detection.*  Location of all control and booster panels and remote annunciators.  Location of all sprinkler risers, water flow switches, control valves, fire pumps and controllers.  Location of cooking hood extinguishing systems and other special extinguishing systems.  Location of all smoke dampers.  Location of smoke doors on hold open devices or door closing devices.  Elevators and related lobbies, shafts and mechanical equipment rooms.  Air handlers requiring duct detectors.  Ancillary devices, e.g. fuel and power shut offs, release of exit door latching hardware, release of door hold-open devices, elevator shunt trip and recall.  Location of remote indicator devices.  Circuit zone numbers on zoned systems.  Device addresses on addressable system.  Typical device wiring connections.  An equipment legend for all devices, including the model identification.

### **1-Line Riser Diagram of the complete alarm system which shall include:**

All control panels and any proposed additions or modifications.  All new and existing initiating and annunciation circuits.  All new and existing connected devices on all modified circuits. Prior approval required for any exceptions.  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 of batteries.  Include source and location of emergency standby generators.  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 system

### **Resubmittals shall include:**

A properly completed Fire Alarm Permit application shall be attached as the cover document for all resubmittals.  The resubmittal box shall be checked, and the applicable Occupancy ID number shall be indicated in the appropriate box on the resubmittal application.  All changes to previously submitted plans shall be clouded and dated. A concise written response to the previously submitted plan review noted comments.