



BUREAU OF FIRE PREVENTION
 FORT WORTH CITY HALL – LOWER LEVEL
 1000 THROCKMORTON ST.
 FORT WORTH, TEXAS 76102
PHONE: (817) 392-6840 FAX (817) 392-6867
www.fortworthgov.org/fire

FIRE PUMP SUBMITTAL CHECKLIST

SPRINKLER/STANDPIPE PERMIT # _____

APPLICABLE IFC AND IFC STANDARDS AS AMENDED BY THE CITY OF FORT WORTH REQUIRE SPECIFIC ITEMS TO BE PROVIDED FOR PLAN REVIEW. THE CONTRACTOR IS OBLIGATED TO PROVIDE ALL RELEVANT INFORMATION. THE CONTRACTOR SHALL INDICATE BY PLACING A MARK (x) OR THE LETTER 'Y' IN EACH BOX THAT THE REQUIRED INFORMATION IS INCLUDED WITH THE SUBMITTAL. IF SPECIFIC INFORMATION IS NOT REQUIRED FOR THE PROJECT, THE CONTRACTOR SHALL SO INDICATE BY PLACING THE LETTERS 'NR' IN THE APPROPRIATE BOX AND STATE WHY THE INFORMATION IS NOT REQUIRED. ALL BOXES MUST BE FILLED OUT. THE BUREAU OF FIRE PREVENTION WILL NOT ACCEPT AN INCOMPLETE CHECKLIST. **ALL PLANS SHALL BE FOLDED TO FIT AN 8 1/2" X 11" FOLDER.**

	PROVIDE ON <u>ALL</u> PLANS NAME, STATE LICENSE NUMBER, ORIGINAL SIGNATURE OF RME, AND UNDERGROUND FIRE MAIN PERMIT NUMBER
	ALL OCCUPANT/OWNER INFORMATION IS PROVIDED (i.e. NAMES, ADDRESSES, PHONE NUMBERS)
	ALL GRAPHICAL INFORMATION IS PROVIDED (i.e. SCALE, POINTS OF COMPASS, MATCHLINES, ETC.)
	BUILDING CODE/BUILDING PERMIT INFORMATION (i.e. OCCUPANCY CLASSIFICATION, CONSTRUCTION TYPE)
	COMPLETE PLAN SHOWING LAYOUT OF ALL FIRE PUMP EQUIPMENT (PLAN AND ELEVATION)
	DETAILED DATA (I.E. CUT SHEETS) ON EACH PUMP, DRIVER, AND CONTROLLER
	CERTIFIED SHOP TEST CURVE IS PROVIDED
	VENTILATION, HEAT, AND LIGHT PROVIDED IN PUMP ROOM
	FLOOR DRAIN PROVIDED IN PUMP ROOM
	ALL EQUIPMENT IS LISTED/APPROVED FOR FIRE PROTECTION SERVICE

FOR EACH FIRE PUMP INSTALLED, A \$415.00 FEE WILL BE ADDED TO THE PERMIT BASE RATE. REFER TO THE FIRE SPRINKLER OR STANPIPE PERMIT APPLICATION FOR APPROPRIATE BASE RATE INFORMATION.

FIRE PUMP PLAN SUBMITTAL TO BE INCLUDED WITH FIRE SPRINKLER OR STANDPIPE PLAN SUBMITTAL.

I HEREBY CERTIFY THAT THE SUBMITTED PLANS CONTAIN ALL RELEVANT INFORMATION REQUIRED BY THE CITY OF FORT WORTH CODES AND STANDARDS.

SIGNATURE: _____ RME# _____
 (MUST BE SIGNED BY SAME PERSON THAT SIGNED PLANS)

PRINT NAME: _____ TELEPHONE # _____