Roseville Fire Department Fire Prevention Bureau

Plan Submittal Application
401 Oak Street, #402 Roseville, CA 95678 Phone (916) 774-5800 Fax (916) 774-5810

Date:		BD Num	ber:					
Project Name:								
Proje	ect Address							
□ New Construction□ Commercial			í í	☐ Tenant Improvem☐ Residential	nent			
A P P	Name:		Day P	hone				
L	Address		Fax:					
A N T	City		Zip	Pa	ger			
	Company Name:							
(Contractor:		Phone		Fax			
1	Address:		City:		Zip			
F F L N C 4 T T T T T T T T T T T T T T T T T T	Arch/Engineer:		Phone:		Fax			
	Address:		City:		Zip			
	Owner/Lessee:			Phone				
	Address:		_ City:		Zip			
Construction/Building Code Classification								
Building Construction Type: Occupancy Type:		Code Edition		UFC:				
Civil I	mprovement Civil Improvement	Number of Hydrants		Other Compressed Gas Systen Haz Mat Medic	al			
New (Reinspections (2nd and Subsequent) Postage Fee(s)/Mailing/Handling Special Fire Plan Review Request Hood System Spray Booth Fire Pump After Hour Inspection				
Tenant Improvement/Fire Sprinkler System				Fire Department Access (Knox) Number of Devices				
	1-50 Sprinkler Heads 51 or more Sprinkler Heads	Total Number Heads	- 0	Halon & Other Special Ex Standpipe Plan Check				
Lot S _I	plits/Subdivisions 1-4 Lots 5-24 Lots 25 or more Lots		□ □ Alarm	Fire Flow Test Smoke Management 1 Systems				
	omittal	Total Number of Lots		Fire Alarm System	mbor of Initiating Devices			
Result ☐ Is	<mark>omittal</mark> t □ 2nd □ More			Flow and Tamper Alarm	mber of Initiating Devices Plan Check			

ALL APPLICABLE FEES MUST BE PAID AT TIME OF PLAN SUBMITTAL. BD NUMBER AND PROJECT STREET ADDRESS REQUIRED FOR ALL SUBMITTALS AND INQUIRIES.

	l he	arehy affirm ur	nder penalty of i	perium that I am lice	ansed under	provisions of Chapter 9 (commencing with Section		
7000) o						se is in full force and effect.		
	Lice	License Class:		License Number:_		License Expiration Date:		
	City Business License Number:		Contractor's Signature:					
			V	Vorkers' Comp	ensation [Declaration		
	I hereby affirm under penalty of perjury one of the following declarations:							
		I have and will maintain a certificate of consent to self-insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.						
		I have and will maintain workers' compensation insurance as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:						
	Caı	rrier:		Po	olicy Number	:		
comply		become	subject to work	e subject to the workers' compensation laws of California, and agree that if I should ers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith				
comply								
		with those pr						
		•		Applicant's S	Signature: ₋			
		Date:	Failure to sectoriminal penal	ure worker's compe ties and civil fines u , damages as provi	ensation cove up to one hur			
		Date:	Failure to sectoriminal penal compensation	ure worker's compe ties and civil fines u , damages as provi	ensation cove up to one hur	erage is unlawful, and shall subject an employer to adred thousand (\$100,000), in addition to the cost o		
		Date:	Failure to sectoriminal penal compensation	ure worker's compe ties and civil fines u , damages as provi	ensation cove up to one hur	erage is unlawful, and shall subject an employer to adred thousand (\$100,000), in addition to the cost o		
		Date:	Failure to sectoriminal penal compensation	ure worker's compe ties and civil fines u , damages as provi	ensation cove up to one hur	erage is unlawful, and shall subject an employer to adred thousand (\$100,000), in addition to the cost o		
		Date:	Failure to sectoriminal penal compensation	ure worker's compe ties and civil fines u , damages as provi	ensation cove up to one hur	erage is unlawful, and shall subject an employer to adred thousand (\$100,000), in addition to the cost o		
		Date:	Failure to sectoriminal penal compensation	ure worker's compe ties and civil fines u , damages as provi	ensation cove up to one hur	erage is unlawful, and shall subject an employer to adred thousand (\$100,000), in addition to the cost o		
		Date:	Failure to sectoriminal penal compensation	ure worker's compe ties and civil fines u , damages as provi	ensation cove up to one hur	erage is unlawful, and shall subject an employer to adred thousand (\$100,000), in addition to the cost o		
		Date:	Failure to sectoriminal penal compensation	ure worker's compe ties and civil fines u , damages as provi	ensation cove up to one hur	erage is unlawful, and shall subject an employer to adred thousand (\$100,000), in addition to the cost o		
		Date:	Failure to sectoriminal penal compensation	ure worker's compe ties and civil fines u , damages as provi	ensation cove up to one hur	erage is unlawful, and shall subject an employer to adred thousand (\$100,000), in addition to the cost o		