



Office of the Illinois
State Fire Marshal
"Partnering With the Fire Service to Protect Illinois"

TECHNICAL SERVICES DIVISION
 Phone: 312-814-8960 Fax: 312-814-3459 E-mail: SFM.Techservices@illinois.gov

SPRINKLER PLAN SUBMITTAL FORM

OSFM Plan # _____

PROPERTY INFORMATION

Building/Facility Name:			
Address:	City:	Zip:	County:
Owner:			
Owner Address:			
Owner Phone:	Fax:	Email:	
Local Fire Department:			

SYSTEM DESIGNER / ILLINOIS FIRE SPRINKLER CONTRACTOR

Company Contact Name:			
Company Name:		Illinois FSC #:	
Address:	City:	Zip:	
Phone:	Fax:	Email:	

Was the system designed by an Illinois registered P.E. or an Illinois licensed architect Yes No

Were the system layout drawings prepared by an Illinois registered P.E., an Illinois licensed architect or a person certified as NICET Level III or IV in Fire Protection System Technology - Automatic Sprinkler System Layout Yes No

BUILDING INFORMATION

How many stories? _____

Basement: Yes No If yes, Finished Unfinished Partially finished

Attic: Yes No If yes, what is attic used for? _____

Construction Type (use either NFPA 220 or International Building Code): _____

- New building under construction with new sprinkler system
- Existing building with new retrofitted sprinkler system
- Revising existing sprinkler system in an existing building

Occupancy Classification [as defined in NFPA 101-Life Safety Code (2000)]

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> Ambulatory health care* | <input type="checkbox"/> Assembly | <input type="checkbox"/> Business | <input type="checkbox"/> Day-care center*** |
| <input type="checkbox"/> Day-care home*** | <input type="checkbox"/> Detention and Correctional | <input type="checkbox"/> Dormitory | <input type="checkbox"/> Educational** |
| <input type="checkbox"/> Health care* | <input type="checkbox"/> Hotel/motel | <input type="checkbox"/> Industrial | <input type="checkbox"/> Lodging/rooming house |
| <input type="checkbox"/> Mercantile | <input type="checkbox"/> One- or Two-family dwelling | <input type="checkbox"/> Residential board and care-small facility or CILA | <input type="checkbox"/> Residential board and care-large facility* |
| <input type="checkbox"/> Storage | <input type="checkbox"/> Other classification | | |

*Plans for a facility licensed by Illinois Department of Public Health must be submitted to IDPH and not to OSFM

**Public school plans must be submitted to the applicable Regional Office of Education and not to OSFM

***Classification of day-care centers and homes are per Dept. of Children and Family Services, and not NFPA 101

SPRINKLER SYSTEM DESIGN AND INSTALLATION INFORMATION

NFPA Design Standard (check all that apply)

- NFPA 13 edition _____
- NFPA 13R edition _____
- NFPA 13D edition _____
- NFPA 14 edition _____
- NFPA 20 edition _____
- Other, identify standard and edition _____

Design Method Hydraulically calculated Pipe Schedule

Sprinkler Hazard Classification (N/A)

- | | | |
|---|--|--|
| <input type="checkbox"/> Light hazard | <input type="checkbox"/> Ordinary hazard-Group I | <input type="checkbox"/> Ordinary hazard-Group 2 |
| <input type="checkbox"/> Extra hazard-Group 1 | <input type="checkbox"/> Extra hazard-Group 2 | <input type="checkbox"/> Storage (see below) |

Additional Information Needed For All Systems:

- Water supply information: date and results of flow tests, type of supply, supply vs. demand graphs
- Fire pump information N/A Type/fuel driving the fire pump: _____
- Underground main information if installing new
- Riser diagrams
- Hydraulic nameplate on riser and on plans for each design area
- Hydraulic calculations
- Total coverage area (ft²) of each system
- Capacity (gallons) for each dry system or anti-freeze system
- Most demanding area is calculated. Gridded system identify peaking
- Manufacturer's specification sheets for all components
- Friction loss information for backflow prevention devices and water meters that are used on system
- Listing and manufacturer design information for specialty sprinklers, such as extended coverage
- Elevation or section views needed for installation related to geometry or structural configuration
- Schedule of all sprinklers used
- Schedule of all piping used
- Schedule of equivalent lengths for all fittings of all materials used
- Remote design area clearly identified on plans and any necessary information related to how that design was determined; such as increases in remote area, decreases in design density, etc.
- For room design, identify proper enclosure or fire-rating requirements and how achieved
- Fire department connection threads match those of the local fire department
- Fire department connection clear, unobstructed and in a location acceptable to local fire department

Describe below areas that will have sprinklers omitted per NFPA 13, 13R, or 13D. [Confirm with NFPA 101-Life Safety Code (2000) that the sprinklers are permitted to be omitted or that special construction requirements are necessary for the sprinklers to be omitted. More stringent requirement takes precedent.]

STORAGE ARRANGEMENTS

Storage Commodity Classification (N/A)

- | | | |
|--|--|--|
| <input type="checkbox"/> Class I | <input type="checkbox"/> Class II | <input type="checkbox"/> Class III |
| <input type="checkbox"/> Group A Plastic | <input type="checkbox"/> Group B Plastic | <input type="checkbox"/> Group C Plastic |
| <input type="checkbox"/> Rubber Tire | <input type="checkbox"/> Rolled Paper | <input type="checkbox"/> Baled Cotton |

Storage Arrangement (N/A)

- | | | |
|---|--|--|
| <input type="checkbox"/> Palletized or solid pile | <input type="checkbox"/> Bin boxes | <input type="checkbox"/> Shelf storage |
| <input type="checkbox"/> Rack storage ≤ 25 ft. | <input type="checkbox"/> Rack storage > 25 ft. | <input type="checkbox"/> Miscellaneous storage |

Detail the process used to obtain the final design density and area for the storage arrangement, including section, table, and figure numbers (or identify where information is located on plans):

STANDPIPE SYSTEMS

- Combined with sprinkler system
- Stand-alone standpipe system
- Hydraulic calculations provided

Type of system (check all that apply):

- | | | | |
|--|-------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> Class I | <input type="checkbox"/> Class II | <input type="checkbox"/> Class III | <input type="checkbox"/> Automatic wet |
| <input type="checkbox"/> Automatic dry | <input type="checkbox"/> Manual wet | <input type="checkbox"/> Manual dry | |

Submitted by: _____
(print name)

Date: _____

Signature: _____