

**CITY OF GAINESVILLE FIRE DEPARTMENT
FIRE MARSHAL'S OFFICE**

725 Pine St.
Gainesville, Georgia 30501
770-534-3612

PLAN REVIEW SUBMITTAL FORM
(Incomplete forms will not be accepted)

PLAN TYPE: (Must check one)

New Building _____ Site/civil _____ Addition or remodel _____ Interior finish _____
Sprinkler _____ Fire Alarm _____ Other _____

Type of Occupancy (*according to LSC*) _____

Project Name: _____

Project Address: _____ Suite: _____

Submitted By: _____

Contact Name & Number: _____

Contact Email: _____

Square Footage: _____ Renovation Sq. Footage: _____

Sprinkler Protection: YES NO N/A

Fire Alarm: YES NO N/A

Hazardous Material Storage: YES NO N/A (*If yes, additional form to be completed*)

High Piled Storage: YES NO N/A (*If yes, additional plans required*)

Signature _____ Date _____

PLEASE INCLUDE (3) COPIES FOR ALL ALARM & SPRINKLER PLAN REVIEWS