INTENDED USE OF BUILDING FOR
COMMERCIAL AND MULTI-FAMILY OCCUPANCY

Owner of Record ____________________________ Project name/ Tenant _______________________

Site Address _______________________________________________________________________

IBC Construction Type ____________________________ IBC Occupancy Type _______________________

Description of Use _______________________________________________________________________

Building Square/ ft. ____________________________ Area of Construction _______________________ 

Will there be any installation, modification or removal of the following? (Check all that apply).

☐ Automatic fire extinguisher systems. ☐ High piled/ rack storage.
☐ Compressed gas systems. ☐ Hazardous materials.
☐ Fire alarm and fire detection systems. ☐ Industrial ovens/ furnaces.
☐ Fire pumps. ☐ Spraying or dipping operations.
☐ Fire flow storage tanks. ☐ Standpipe systems.
☐ Fire hydrants. ☐ Temporary membrane structures, tents (> 200 sq./ft.) or canopies (> 400 sq./ft.).
☐ Flammable and combustible liquids.

Provide details on any of the above checked items:
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

Installation, changes, modifications or removal of any of the above may require additional submittals, information, or permits during the plan review or construction process.

Printed Name of Owner/ Agent ____________________________

Signature of Owner/ Agent ____________________________

Date ____________________________

Revised 3/18/2014