



CITY OF RIVERSIDE FIRE DEPARTMENT FIRE PREVENTION DIVISION

PLAN LOG IN SHEET

If **ALL** information is not provided, your plans may be **REJECTED** or **DELAYED** for plan review. PLAN CHECK FEE PORTION IS REQUIRED TO BE PAID AT THE TIME OF 1ST SUBMITTAL. Please ask for any assistance.

Date: _____ Project Name: _____

Project Address: _____

Installing contractor name: _____ Phone: _____

Installing contractor address: _____ City: _____ Zip: _____

Contact Person: Name: _____ Phone: _____

Installing contractor's email: _____

Installing contractor state license #: _____ City Business License #: _____ Expiration date: _____

(Note: Licenses shall be current to obtain permit.)

***** Please complete the following that applies to your submittal *****

Fire Sprinkler System: *Commercial In-rack Res./Custom Home Res./Tract #:* _____ Number of sprinklers: _____

Fixed Extinguishing System: *Wet/Dry Carbon Dioxide Clean Agent* **Number of systems:** _____

Fire Alarm System: Number of devices: _____

ETL # _____ FM # _____ UL-UUFX # _____

NOTE: New fire alarm installations require fire alarm C10 contractors to be ETL, UL-UUFX or FM listed. New installations and existing ETL, UL-UUFX or FM shall be certificated for the life of the system. If you are not ETL, UL-UUFX or FM certified a permit will not be issued. (Riverside Municipal Code, 16.32.340)

Fire Protection Underground **Aboveground Tank** – # of tank(s): _____

High Piled Storage (Other) ___ New ___ Existing **Underground Tank** – # of tank(s): _____

Hazardous Material Analysis (Other) **Other:** _____

*** Number of plan pages submitted for one set: _____

***Please Circle Submittal Type:**

New Tenant Improvement Resubmittal - Permit #: _____ As-built/Revision – Permit#: _____

For Office Use Only

Permit Number: _____ Bin Number: _____ Assigned inspector: _____

Person contacted for permit pick up: _____ Date: _____

Permit Print name: _____ Signature: _____ Date: _____