

Evergreen Fire Rescue

Fire Prevention Section

PLAN REVIEW APPLICATION FORM
1802 Bergen Parkway, Evergreen, CO 80439
303-674-3145

Application # _____

PROJECT INFORMATION				
Project/Site Name			Tenant Name or Building Designation	
Address		Suite/Area	Sq. Ft. of Construction	
Fire District:	Evergreen	Foothills	Genesee	City

CONTRACTOR /HOMEOWNER			DESIGN PROFESSIONAL		
Contact First Name		Last Name	Contact First Name		Last Name
Company Name			Company Name		
Address			Address		
City	State	Zip	City	State	Zip
Phone Number (Area Code)		E-Mail	Phone Number (Area Code)		E-Mail

An Application Fee of \$75.00 for Evergreen Fire District and \$100.00 For Foothills and Genesee Fire District. This amount will be taken off final cost of permit fee. This Fee is due at submittal of drawings or at time of request for any type of letter(s) except Will Serve Letter, no cost

Type of Submittal or Service Requested

Development/Referral	Hazardous Materials Management Plan
Water Distribution System or Hydrant Locations	Above Ground Storage Tank <input type="checkbox"/> Protected <input type="checkbox"/> Unprotected <input type="checkbox"/> Temporary
New Building	Underground Storage Tank <input type="checkbox"/> Installation <input type="checkbox"/> Removal
Tenant Improvement	Battery System
Demolition	Cistern Water Supply System
Vehicle Access <input type="checkbox"/> Temporary <input type="checkbox"/> Gate	Chemical Spill Alarm
L Letters (Insurance, Others)	Dust Collection System
Underground Fire Line	Explosives <input type="checkbox"/> Blasting <input type="checkbox"/> Storage
Automatic Sprinkler System <input type="checkbox"/> New <input type="checkbox"/> Alteration	Fireworks <input type="checkbox"/> Stand <input type="checkbox"/> Indoor Pyro Display <input type="checkbox"/> Outdoor Pyro Display
<input type="checkbox"/> 13 <input type="checkbox"/> 13R <input type="checkbox"/> 13D	LP Gas Tanks <input type="checkbox"/> Temporary <input type="checkbox"/> Propane Exchange
<input type="checkbox"/> Dry <input type="checkbox"/> Preaction <input type="checkbox"/> Backflow Preventer <input type="checkbox"/> Fire Pump	Refrigeration System
Standpipe <input type="checkbox"/> Permanent <input type="checkbox"/> Temporary	Spray Booth/Finishing
Hood and Duct System/Kitchen Suppression	Special Use Permit
Clean Agent System	Open Burning
Fire Alarm <input type="checkbox"/> New <input type="checkbox"/> Alteration	Tent(s) # _____ Date(s) of Use _____
Radio Amplification System (BDA)	Revisions to Existing Permit
Medical Gas System	Alternative Methods or Materials
Generator <input type="checkbox"/> Diesel <input type="checkbox"/> Natural Gas	High Pile Combustible Storage
Smoke Management	Smoke Control
OTHER _____	

General Comments:

Date Received:	By:	Permit #:
Date Paid:	NO CASH WILL BE ACCEPTED FOR THE PERMIT FEE	
Check #:	CC#:	
Review/Permit Picked Up By:		Representing:
Plan Reviewer:		
Fire Department Comments:		

DISTRIBUTION: WHITE – Evergreen Fire Rescue YELLOW –Applicant