

WEST COVINA FIRE DEPARTMENT

Fire Prevention Bureau 1444 W. Garvey Avenue South West Covina, CA 91790 (626) 939-8823

PLAN CHECK SUBMITTAL APPLICATION

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Name		Telephone	
Address	City/Zip	opoo <u></u>	
7144.000			
Contractor Business Na	me	Telephone	
Mailing Address	meCity/Zip Class Code	1010p110110 <u></u>	
State License No	Class Code	Expiration Date	
Contact Person		ntact Telephone	
		Titade releptione	
Check all that applies ✓			Quantity
	FLAMMABLE LIQUID STORA	AGE	
	Underground Tank Installation		
	Above-ground Tank Installation		
	Under-ground Tank Removal Above-ground Tank Removal		
	Vapor Recovery Modifications		
	HIGH PILE STORAGE PLA	NS	
	High Pile Storage (for storage rack plans)	110	
	FIRE ALARM SYSTEM		
	Fire Alarm Systems (new) with FACP		# of devices:
	Additional Devices (each)		# of devices:
	Modifications to Existing Systems		# of devices:
	FIRE SPRINKLER SYSTE	M	
	OH Sprinklers - Residential (unlimited heads)		
	OH Sprinklers - Commercial (New and/or Tentative	e Improvement)	# of heads:
	Underground Fire Service Supply		
	Private Fire Hydrants & Fire Line		
	(per detector check connection)		
	Fire Standpipe System/Hose Stations		
	Class I, II, III and Article 81 (per system/stat	ion	
	Automatic Fixed Extinguishing System Hood Suppression System (wet chemical)		
	FM 200 System_		
	Fire Pump		
	Diesel pumps – each		
	Electric pumps – each		
	Water Storage Tanks		
	Gravity tank – each		
	Pressure tank – each		
	5-year Certification Test on Sprinkler System		
	PRIVATE FIRE PROTECTION SYSTE	EM TESTING	
	Smoke Test		
	Hydrant Flow Test OTHER		
	Fire Site Access		
	As-Built		
	Expedited Plan Check		
	Exposition Figure 6 Trook		
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	permit issuance:		

SUBMITTAL DATE__

FIRE CASE NO.

OWNER/BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractor's License Law for the following reason (Section 7031.5 of the Business and Professions Code).

LICENSED CONTRACTOR'S DECLARATION: hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect. /Signature: Date:
Signature:
LICENSED CONTRACTOR'S DECLARATION: hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect. Signature: Date: WORKERS' COMPENSATION DECLARATION: hereby affirm under penalty of perjury one of the following declarations. I have and will maintain a certificate of consent to self-insure for workers' compensation, a
hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect. Signature: Date: WORKERS' COMPENSATION DECLARATION: hereby affirm under penalty of perjury one of the following declarations. I have and will maintain a certificate of consent to self-insure for workers' compensation, a
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hereby affirm under penalty of perjury one of the following declarations. □ I have and will maintain a certificate of consent to self-insure for workers' compensation, a
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permit is issued.
 I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.
I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and I agree that if I should become subject to the workers' compensation provision of the Section 3700 of the Labor Code, I shall forthwith comply with those provisions.
✓Signature: Date: