



Murrieta Fire & Rescue Fire Prevention Bureau Submittal Form

PROJECT NUMBER:		APPLICATION DATE:	
PROJECT/JOB INFORMATION			
Project Title/Job Name:			
Project Address:		Building #:	Suite #:
SUBMITTAL TYPE (PLEASE SELECT ONLY ONE)			
Fire Sprinkler System:	# of Heads _____	<input type="checkbox"/> Spklr TI	<input type="checkbox"/> Residential <input type="checkbox"/> New System
Fire Alarm Systems:	# of Devices _____	<input type="checkbox"/> Alarm TI	<input type="checkbox"/> Residential <input type="checkbox"/> New System
Other:	<input type="checkbox"/> High Pile	<input type="checkbox"/> HHW	<input type="checkbox"/> Hood <input type="checkbox"/> OTC <input type="checkbox"/> Underground Water
	<input type="checkbox"/> Other (please specify) _____		
APPLICANT INFORMATION			
Applicant Business Name:			
Business Address:		City/State:	Zip:
State Contractor License No.:		Contractor License Exp. Date:	
City Business License No.:		City Business License Exp. Date:	
Email:		Business Phone:	
Contact Name:		Contact Cell Phone:	
PLAN REVIEW NOTES:		TO THE CONSULTANT	
PLANS PICKED UP BY:			

Requirements and Notes to the Applicant:

- 1 FEES: Fire Plan Check Review and Inspection Fees are due at the time of submittal.
- 2 INSPECTIONS: As required by the California Fire Code, the appropriate installing contractor shall schedule the necessary inspections and be present on site for inspections.
- 3 INSPECTION REQUESTS: Call **951-461-6160** to request an inspection. Inspections are subject to availability. It is the responsibility of the applicant to have the project number available when scheduling an inspection.
- 4 APPROVED PLANS: Upon approval, plans shall be kept on the job site at all times that work is in progress. Work shall not begin or commence without approved plans.