



NORTHSTAR FIRE DEPARTMENT



Fire Sprinkler Plan Check – Residential (NFPA 13D/13R) APPLICATION

Date _____ County Issued Permit Number _____ APN _____

Project Address _____ County _____

Project Type New System Tenant Improvement (Number of existing heads _____)

of Sprinkler Heads _____ # of Risers _____ # of Floors _____ # of Fire Dept. Connections _____

Is this an enhanced system? No Yes If yes, provide AMMR with submittal.

Project Description _____

Has there been an NFD Pre-Development meeting for this project?

No Yes (Date(s) of meeting(s) _____)

Is this a plan review resubmittal? No Yes (Date of last submittal _____)

Sprinkler Contractor

Name _____ Business Name _____

CA License # _____ Phone Number _____

Email _____

General Contractor

Name _____ Business Name _____

CA License # _____ Phone Number _____

Email _____

Homeowner

Name _____ Phone Number _____

Email _____

Mailing Address _____

Main Contact

Name _____

Phone Number _____ Email _____

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

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Review the statements below. Check the boxes once the statements have been reviewed.

Plan review turnaround is 7-10 business days from the date plan review fees are paid.

NFD is no longer able to approve plans with conditions. If any of the requirements are missing, plans will not be approved and will be subject to resubmittals and resubmittal fees. All resubmittals trigger a new 7-10 business day turnaround.

Fire Sprinkler 13D guidelines have been reviewed. Found here: <https://www.northstarcsd.org/Resources>

Sprinkler Plan Check Requirements – Residential (NFPA 13D/13R):

A complete set of sprinkler plans stamped and signed by the sprinkler contractor with a C16 license.

Applicable building codes and standards must be noted on the cover sheet, including the NFD, amended fire codes.

All required *notes* have been placed verbatim on the construction plans. (Review Fire Sprinkler 13D guidelines to determine what notes may be required.)

Cut sheets for all products.

Hydraulic Calculations.

Signed Pre-Development Meeting Findings and Signed/Approved Alternate Materials and Methods Request (If applicable).

Plans must be submitted to bolk@northstarcsd.org.

I hereby acknowledge that I have read the Fire District's requirements above for plan review. Furthermore, I acknowledge that if any of the requirements are not complied with, the plans/project will fail review and will be subject to resubmittals and resubmittal fees. By signing below, I am verifying that I have met the requirements for this submittal.

Signature _____ Date _____

Review section below after plan review is complete.

Office Use Only:

Final Fire Inspections that will be required for your project:

Sprinkler Rough and Final Inspections

Sprinkler Underground, Rough, and Final Inspections

To schedule any of these inspections, contact the Northstar Fire Department at (530) 562-1212 ext.1.

Additional Plan Review Comments:

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Date completed _____ Approved _____ Not approved, resubmittal required _____

Cost Recovery Fees Due \$ _____ Paid on _____ Last four CC# _____ Check# _____