

# PENN TOWNSHIP

260 Lewis Road

West Grove, PA 19390-0039

Phone: 610-869-9620 Fax: 610-869-9194

## APPLICATION FOR FIRE SUPPRESSION SYSTEM

Owner/Applicant: \_\_\_\_\_

Name Address Phone No. \_\_\_\_\_

Location Address: \_\_\_\_\_

Tax Parcel No: \_\_\_\_\_

New Building Square Footage: \_\_\_\_\_ Existing Building Square Footage: \_\_\_\_\_

New Work: \_\_\_\_\_ Repair/Replacement: \_\_\_\_\_ Commercial \_\_\_\_\_

Residential \_\_\_\_\_ Code Utilized \_\_\_\_\_

Description of Work:

\_\_\_\_\_

Square Footage of Area to be Protected: \_\_\_\_\_

Cost of Work: \_\_\_\_\_

Please include three (3) sets of plans and calculations (shop drawings okay) for proposed work:

1) Square footage of the area to be covered \_\_\_\_\_

2) Water Supply and Size \_\_\_\_\_

3) Static & Residual Pressure Readings \_\_\_\_\_

4) Fire Department Connection Location \_\_\_\_\_

5) Generators \_\_\_\_\_

6) Fire Pump \_\_\_\_\_

7) Reservoirs \_\_\_\_\_

Please indicate the height (in stories) of the proposed coverage area:

One \_\_\_\_\_ Two \_\_\_\_\_ Three \_\_\_\_\_ Includes Basement \_\_\_\_\_ No Basement \_\_\_\_\_

\*If any equipment shall be located outside of the building, please include a plot plan indicating the location of the equipment relative to the building and the lot lines

\*Please provide specifications for any equipment to be employed, including cut sheets.

The undersigned agrees to conform to all applicable laws of the Penn Township.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Permit No: \_\_\_\_\_ Fee: \_\_\_\_\_

Thomas H. Lowry, C.B.O., Building/Zoning Officer  
Phone: 610-692-9232 - Fax: 610-692-2724