



CITY OF MADISON FIRE DEPARTMENT FIRE PROTECTION SYSTEM WORK PERMIT APPLICATION



INSTRUCTIONS: Please type or print clearly. To avoid delays in the plan review process, **ensure this form is filled out completely and accurately.**

PROJECT ADDRESS: _____

PROJECT NAME: _____

Has installation of the fire protection system started yet? Yes / No

OCCUPANCY TYPE

- Group R-1 (HOTEL/MOTEL) Group R-2 (APARTMENTS) Group I-1 (CBRF)
- Group I-3 (DETENTION FACILITY) ATRIUMS located in any type of occupancy (*See definition on back)
- HIGH-RISE (Buildings exceeding 60 feet in height) Group E (K-12 SCHOOL)
- MERCANTILE (Group M-Buildings exceeding 50,000 sq. ft. which combine retail and rack storage)
- OTHER OCCUPANCY TYPE (I.e. Group S-2 Parking Garage): _____
- STATE OWNED BUILDINGS [**See description on back]

PROJECT'S AREA (Square feet of affected area): _____ **AMOUNT OF FEE ENCLOSED: \$** _____
(See Fee Schedule Table on back of this form)

SCOPE/DESCRIPTION OF WORK: _____

Scope of work shall include type of devices, number of devices, and specific location within building. Attach additional page if necessary.

NEW SYSTEM ALTERATION DEMOLITION ONLY ACCESS CONTROL/DELAYED EGRESS FIRE COMMAND CENTER

SHELL BUILDING TENANT BUILD-OUT? YES / NO LESS THAN 21 SPRINKLERS? YES / NO
MULTIPLE IDENTICAL BUILDING? YES / NO 3 OR LESS FIRE ALARM DEVICES? YES / NO

Complete the following applicant/designer/owner information. Utilize the check box to indicate payer.

Applicant Information		Designer Information	
First Name _____	Last Name _____	First Name _____	Last Name _____
Company Name _____		Company Name _____	
Address _____		Address _____	
City _____	State _____	City _____	State _____
Zip+4 (9 digits) _____		Zip+4 (9 digits) _____	
Phone Number (w/area code) _____	Fax or Internet _____	Phone Number (w/area code) _____	Fax or Internet _____
<input type="checkbox"/> Payer <input type="checkbox"/> Designer		<input type="checkbox"/> Payer	
Owner Information		Other Please specify	
First Name _____	Last Name _____	First Name _____	Last Name _____
Company Name _____		Company Name _____	
Address _____		Address _____	
City _____	State _____	City _____	State _____
Zip+4 (9 digits) _____		Zip+4 (9 digits) _____	
Phone Number (w/area code) _____	Fax or Internet _____	Phone Number (w/area code) _____	Fax or Internet _____
<input type="checkbox"/> Payer		<input type="checkbox"/> Payer	
Make check or money order payable to: Madison City Treasurer		Reference: Madison General Ordinance 34.24 Comm Chapter 2, Wis. Adm. Code	

Applicant Signature: _____ **Application Date:** _____
MGO 34.24(1)(b) The applicant certifies the finished installation will comply with the applicable codes.

****ADMINISTRATION SECTION****

TRANSACTION DATE: _____	MPD PROJECT NUMBER: 72 _____	NOTES: _____
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Penalty for failure to obtain a permit before starting work shall be double the fees. This shall be in addition to any other penalties provided elsewhere in the Madison General Ordinance. In addition, a \$100 penalty shall be assessed for each day that work progresses until plans are submitted.

Plan Re-submittal.

- A re-submittal fee of \$200 or 50% of original fee, whichever is higher, shall be assessed for review of fire alarm system plans and fire suppression system plans that have been submitted following denial of plan approval, if the submission is within 8 months of the original denial.
- A re-submittal fee of \$200 shall be assessed for revisions to previously approved plans.

Shell Building Tenant Build-Out. When an application is submitted for construction of the interior of a building where the shell of the building has been previously granted a permit, the fee shall be based on the square footage of the tenant build-out and that fee shall be calculated at 50% of the total fee for that particular fee group. This option is available until October 5, 2008, for existing shell buildings. A copy of the MFD approval letter for the shell shall be included with the submittal.

Multiple Identical Buildings. In order to qualify for the multiple identical building fee, plans for all buildings shall be submitted at the same time. The fees for the submittal of plans for the first building shall be determined in accordance with the above table on the basis of the total gross floor area of one building. The fee for each of the remaining identical buildings shall be the higher of either \$200 or 25% of the appropriate fee set forth in the table below.

Certain Devices Subject to a Single Flat Fee. The fee for review of plans for the installation of certain devices (found in the table below) shall be \$200. The fee for Alteration/Modification or Repair/Replacement shall be \$100. However, no additional fee shall be due if such devices are included as a component in a fire alarm or fire suppression systems plan which has been submitted with proper fees to the Chief pursuant to Sec. 34.24 MGO.

*Atrium means a floor opening or series of floor openings through 2 or more floor levels, but not including a mezzanine or balcony, that is covered at the top of the series of openings and is used for purposes other than an enclosed stairway; elevator hoistway; or utility shaft used for plumbing, electrical, air conditioning or communication facilities. Review includes entire building.

****State-Owned Buildings:**

- Plans must be submitted to the Department of Commerce. (608) 266-3151; www.commerce.state.wi.us
- All state-owned buildings are subject to inspection fees which are 50% of the fee specified in the following table.

PLAN REVIEW FEE SCHEDULE			
	NEW INSTALLATION	ALTERATION MODIFICATION	REPAIR REPLACEMENT
Fire Alarm/Suppression System Plans			
Less than 2,500 sq ft	\$200	-	-
2,501 - 5,000 sq ft	\$250	-	-
5,001 - 10,000 sq ft	\$300	-	-
10,001 - 20,000 sq ft	\$600	-	-
20,001 - 30,000 sq ft	\$900	-	-
30,001 - 40,000 sq ft	\$1,200	-	-
40,001 - 50,000 sq ft	\$1,500	-	-
50,001 - 75,000 sq ft	\$1,800	-	-
75,001 - 100,000	\$2,100	-	-
100,001 - 200,000	\$2,400	-	-
200,001 - 300,000	\$2,700	-	-
300,001 - 400,000	\$3,000	-	-
400,001 - 500,000	\$3,300	-	-
Over 500,000	\$3,600	-	-
Existing Automatic Fire Sprinkler system of up to 20 Sprinkler Heads^a	-	\$100 per system	-
Sprinkler head/nozzle replacement, more than three	-	-	\$100 per system
Other existing fire protection systems of up to 3 devices^b	-	\$100 per system	-
Dry Pipe pre-action, deluge valve, and similar devices	-	\$100 per system	\$100 per system
Fire Pump	\$200 per system	\$200 per system	\$200 per system
Fire Alarm Control Unit Replacement	-	\$100 per system	\$100 per system
Backflow Prevention Valve	-	\$200 per system	\$200 per system
Fire alarm initiating devices/notification appliances, more than 3	-	-	\$200 per system
Digital alarm communicator transmitters (DACT)	\$200 per system	\$100 per system	\$100 per system
Kitchen hood extinguishing systems	\$200 per system	\$100 per system	\$100 per system
Dry chemical extinguishing systems	\$200 per system	\$100 per system	\$100 per system
Deluge sprinkler systems (Which protect openings in fire related construction)	\$200 per system	\$100 per system	\$100 per system
Fire detection devices that actuate fire doors/shutters (Which are not part of any fire alarm system)	\$200 per system	\$100 per system	\$100 per system
Clean agent systems	\$200 per system	\$100 per system	\$100 per system
Standpipe systems (Not to include combined sprinkler/standpipe systems)	\$200 per system	\$100 per system	\$100 per system
Smoke and Heat Vents	\$200 per system	\$100 per system	\$100 per system
Other fire protection systems — Fire Command Centers, Access Controlled Doors & Delayed Egress Locks	\$200 per system	\$100 per system	\$100 per system

^a Existing Automatic Fire sprinkler systems 21 or more, use the square footage fees for a new installation.

^b Existing Fire alarm systems 4 or more, use the square footage fees for a new installation.

Note: When making your payment, we would prefer a check or money order payable to: Madison City Treasurer. If paying by cash, the amount must be exact. We cannot make change!