

Sprinkler System Alteration Permit Filing Requirements

Per NFPA 13

Permit Fees:

Riser addition - \$100
20-50 Sprinkler Heads added/removed/moved – \$150
51-150 Sprinkler Heads added/removed/moved - \$250
151 or more Sprinkler Heads added/removed/moved - \$400
Underground Fire line- \$250
Fire pump- \$250

(Sprinkler head replacement will not require a permit, must be like in kind. If there is a change in system design the above fees will apply.)

Pre-Permit

- Written narrative providing intent and system description
- Shop Drawings (meeting requirements of NFPA 13 Subsection 23.1.3)
 - 1- Digital copy (PDF)
- Equipment manufacturer specification sheets (PDF)
- Hydraulic Calculations (NFPA 13 Subsection 23.3) (PDF) (if adding sprinklers)
- Water supply capacity information (conducted no more than twelve (12) months prior to submission.) NFPA 13 Subsection 23.2 (if adding sprinklers)
- Required Insurances
 - Workers Compensation C105.2
 - Disability DB120.1

Town must be listed as certificate holder

We do not accept accord forms

Close Out

- AHJ witnessed inspections
 - Flushing of Piping
 - Underground pipe Hydrostatic test
 - System Hydrostatic test
 - System operational test
- Completion documentation
 - Letter of completion
 - Record of Inspection and Testing
- As built drawing onsite (hard copy) and Fire Safety Office (PDF).
- Property owner has received all literature and instructions provided by manufacturer describing proper operation and maintenance of any equipment and devised installed.

New Sprinkler System (Requires Knox Box and Knox FDC Caps/Plugs)

Permit includes Supervision & Monitoring Devices (Control Panel, 1 Smoke Head, 1 Pull Station, Exterior Horn/Strobe)

Town of Cheektowaga Building Permit Application



Office Use Only	
Application Number:	_____
Assigned Inspector:	_____
Permit Fee:	_____
Received By:	_____

Today's Date: _____

Plans filed: Yes No

Job Address: _____ **Suite Number:** _____

Property Owner's Name: _____

Property Owner's Phone Number: _____ Email: _____

Applicant's Name: _____

Applicant's Mailing Address: _____
Street City State Zip code

Applicant's Phone Number: _____ Email Address: _____

Building Contractor's Name: _____

Mailing Address: _____
Street City State Zip code

Cell Number: _____ Email: _____

Plumbing Contractor Name: _____

Description of Work:

- Residential Commercial Plumbing Fire Signs Other

Please describe your work: _____

Estimated Value of Construction: _____

The Town of Cheektowaga "Cost of construction table" will be used when costs provided are erroneous

Owner / Agent Certification:

I certify that I am the owner of record or have the permission of the owner of record to perform the work herein; and that all the information provided as part of this application is correct and true.

Print Name

Signature