



# Phoenix Fire Department Fire Prevention – Plan Review

Date: \_\_\_\_\_ Initials: \_\_\_\_\_

Permit: \_\_\_\_\_

## Plan Review Application—

**Applicant to fill in area within BOLD LINES**

Check One

- 1<sup>st</sup> Review     2<sup>nd</sup> Review     3<sup>rd</sup> Review     Revision     Other

**Kiva #:** \_\_\_\_\_ **SDEV/SPAD#:** \_\_\_\_\_ **Reviewer:** \_\_\_\_\_

**Project Name:** \_\_\_\_\_ **Project Number:** \_\_\_\_\_

### DEVELOPMENT INFORMATION

ADDRESS: \_\_\_\_\_ BLDG #: \_\_\_\_\_ SUITE/SPACE #: \_\_\_\_\_ FLOOR #: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

### DESCRIPTION OF WORK:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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\_\_\_\_\_

**SQ. FT. :** \_\_\_\_\_ **# OF STORIES:** \_\_\_\_\_ **VALUATION:** \_\_\_\_\_

**APPLICANT:** (Contact Person) \_\_\_\_\_  
 Owner/Devel.     Arch.     Engr.     Contractor

**FIRM NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**TELEPHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_ **Other:** \_\_\_\_\_

### OWNER INFORMATION: (Business/Owner Name)

**CONTACT PERSON:** \_\_\_\_\_ **TELEPHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

### CONTRACTOR INFORMATION: (Business/Owner Name)

**CONTACT PERSON:** \_\_\_\_\_ **TELEPHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**BUSINESS LICENSE #:** \_\_\_\_\_ **STATE TAX #:** \_\_\_\_\_ **STATE LICENSE #:** \_\_\_\_\_

Appr \_\_\_\_\_ Appr- Notes \_\_\_\_\_ Corr \_\_\_\_\_ Hold \_\_\_\_\_

Date Compl \_\_\_\_\_ PR Fees \_\_\_\_\_ Insp Fee \_\_\_\_\_ Bin # \_\_\_\_\_