



Office of the Illinois  
**State Fire Marshal**  
*"Partnering With the Fire Service to Protect Illinois"*

TECHNICAL SERVICES DIVISION  
 Phone: 312-814-8960 Fax: 312-814-3459 E-mail: [SFM.Techservices@illinois.gov](mailto:SFM.Techservices@illinois.gov)  
 555 W. Monroe Street, Suite 1300-N, Chicago, IL 60661

**FIRE ALARM PLAN SUBMITTAL FORM**

**PROPERTY INFORMATION**

OSFM Plan # \_\_\_\_\_

Building/Facility Name:			
Address:	City:	Zip:	County:
Owner:			
Owner Address:			
Owner Phone:	Fax:	Email:	
Local Fire Department:			

**SYSTEM DESIGNER/ILLINOIS FIRE ALARM CONTRACTOR**

Company Contact Name:			
Company Name:		Illinois License #:	
Address:	City:	Zip:	
Phone:	Fax:	Email:	

**BUILDING INFORMATION**

How many stories? \_\_\_\_\_

Basement:  Yes  No If yes,  Finished  Unfinished  Partially finished

Attic:  Yes  No If yes, what is attic used for? \_\_\_\_\_

Construction Type (use either NFPA 220 or International Building Code): \_\_\_\_\_

- New building under construction with new fire alarm system
- Existing building with new retrofitted fire alarm system
- Revising existing fire alarm system in an existing building

**OCCUPANCY CLASSIFICATION [as defined in NFPA 101-Life Safety Code (2015)]**

- |  |  |  |   |
|--|--|--|---|
| <input type="checkbox"/> Ambulatory health care* | <input type="checkbox"/> Assembly                    | <input type="checkbox"/> Business                  | <input type="checkbox"/> Day-care center***           |
| <input type="checkbox"/> Day-care home***        | <input type="checkbox"/> Detention and Correctional  | <input type="checkbox"/> Dormitory                 | <input type="checkbox"/> Educational**                |
| <input type="checkbox"/> Health care*            | <input type="checkbox"/> Hotel/motel                 | <input type="checkbox"/> Industrial                | <input type="checkbox"/> Lodging/rooming house        |
| <input type="checkbox"/> Mercantile              | <input type="checkbox"/> One- or Two-family dwelling | <input type="checkbox"/> Resid. board & care-small | <input type="checkbox"/> Resid. board and care-large* |
| <input type="checkbox"/> Storage                 | <input type="checkbox"/> Other classification        |  |   |

\*Plans for a facility licensed by Illinois Department of Public Health must be submitted to IDPH and not to OSFM

\*\*Public school plans must be submitted to the applicable Regional Office of Education and not to OSFM

\*\*\*Classification of day-care centers and homes are per Dept. of Children and Family Services, and not NFPA 101

**FIRE ALARM SYSTEM DESIGN AND INSTALLATION INFORMATION**

**NFPA Design Standard** (check all that apply)

- NFPA 72 edition \_\_\_\_\_
- Other, identify standard and edition \_\_\_\_\_

**Additional Information Needed For All Systems:**

- Riser diagrams
- Voltage drop calculations
- Battery calculations
- Manufacturer's specification sheets for all components that clearly identify model type and associated information needed to review battery calculations and voltage drops
- Elevation or section views needed for installation related to geometry or structural configuration
- Schedule of fire alarm symbols
- Schedule of all wiring gauge and lengths used confirming what is permitted by manufacturer.

Describe below areas that will have components omitted per NFPA 72. Confirm with NFPA 101-Life Safety Code (2015) or other State rule/statute that the components are permitted to be omitted or that special construction requirements are necessary for the components to be omitted. More stringent requirement takes precedent.

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**ANY OTHER COMMENTS OR NECESSARY INFORMATION:**

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Submitted by: \_\_\_\_\_  
(print name)

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

Signature: \_\_\_\_\_