



TOWN OF HARRISBURG FIRE DEPARTMENT OFFICE OF THE FIRE MARSHAL

6450 Morehead Road, Harrisburg North Carolina 28075

Phone: 704-455-3574 Fax 704-455-6391



Plans Review Application

We are submitting the following for review (check all that apply):

_____ **Commercial Building or Commercial Up Fit Plans** – Two complete sets of plans must be submitted. All Submittals shall include a Site Plan, Table of Contents, “Appendix B”, Building, Electrical, Mechanical and Plumbing plans. Plans must be signed and sealed by the appropriate NC Licensed design professional as required by the NC Administrative, and Building Codes, and be accompanied by this application and appropriate fee as outlined below.

Commercial Building Plans or Commercial Up Fit Review Fee Schedule:

Less than 10,000 Sq. Ft.	\$ 50.00
10,000 Sq. Ft to 24,999 Sq. Ft.	\$100.00
25,000 Sq Ft. to 49,999 Sq. Ft.	\$250.00
50,000 Sq. Ft. to 100,000 Sq. Ft.	\$500.00
100,000 Sq. Ft. or Greater	\$.005 per Sq. Ft.

_____ **Fire Alarm Plans** – Are a separate submittal to Commercial Building Plans or Commercial Up Fit Plans. Two complete sets of detailed shop drawings, with device cut sheets and battery calculations and \$150.00 review fee

_____ **Sprinkler System Plans** – Two complete sets of detailed shop drawings with approved site plan including hydraulic calculations and \$150.00 review fee

_____ **Automatic Fire Suppression Systems Plans** (hoods, paint booths, etc.) – Two complete sets of detailed shop drawings with system specifications and \$150.00 review fee

_____ **Storage Tank Installation Plans** – Two complete sets of plans including tank specifications, sizes, and site plan showing locations from building and property lines and \$150.00 permit fee per tank



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I understand and have complied with the submittal procedures and I further understand that should my submittal package not include all the information requested my project **will not** be processed for plan review.

Name: _____ Signature: _____

Company: _____

Address: _____

Phone number: _____ Fax: _____

Date submitted: _____ Email address: _____

Project name: _____

Project address: _____

Intended Use or Occupancy Classification: _____

Return w/fee to: Harrisburg Fire Department Fire Marshal's Office
6450 Morehead Road
Harrisburg, NC 28075

OFFICE USE ONLY

Amount Received: \$ _____ Check No.: _____

From: _____

Received by: _____ Date: _____