

# **FIRE DEPARTMENT BUREAU OF FIRE PREVENTION**

9 METROTECH CENTER, BROOKLYN, N.Y. 11201-3857

## APPLICATION FOR PLAN EXAMINATION/DOCUMENT REVIEW

#### **General Instructions**

All design and installation documents as per Fire Code section FC 105.4 shall be submitted to FDNY for examination. The submission must include a duly completed TM-1 form. All forms must be typed in black or blue ink.

Fee for Plan Examination: use Supplement #1 to calculate fee and write it down in the box below.

All payments shall be made in money order or check, payable to NYC Fire Department. Do not send cash.

Submit completed application in person at Window # 8 on the 1st floor, or mail it to the address as indicated in Supplement # 1.

Note: Fire Alarm Plans must be submitted in person at Window # 8 and resubmissions through Window # 16 on the 1st floor.

Date:				Fee: \$ (as per Supplement # 1)			-		F P Index NoFPIMS No		(FD use only,	)
1 NEW SUBMISSION								f latest objecti	on issued b	e previously assigned by the respective unit		
2	2 Design and Installation Documents Submitted to (Check the appropriate box for type of submission):											
☐ TECHNOLOGY MANAGEMENT ☐ EMERGENCY PLANNING AND PREPAREDNES								GROUP				
As per Fire Code Fire Alar				Combined Fire Safety & Emergency					cy Actio	on Plan		
FC 105.4 Emerger				Fire Safety and Ev			on Plan					
					Fire Protection Plan							
3	Premises In	formatio	n (Reqi	uired	for all applica	tions):						
Build	ing No:		Stree	t Naı	nme:						BIN #:	
Borough: NY												
Occu	pied by:					Occupancy classification of the area of work:						
4	Applicant I	nformatio	on (Rea	juired	d for all applic	ations.	All fiel	ds must be	complete	d):		
Last Name:						First Name: License N			License Numbe	Number:		
Business Name:						Business Tel:				_		
Business Address:						City: _				State:	_ Zip:	
Choo	se one: □ P. E.	□ R. A.	□ Buil	ding	Owner □ Bui	ilding N	lanage:	r E-Mail:				
5	Owner Info	rmation (	Requir	ed fo	r all applicatio	ns. All	fields n	nust be con	ipleted):			
Last Name:					First N	First Name: Business			Business Tel:	ness Tel:		
Business Name:							Business Fax:				_	
Business Address:					City: _	City: State			State:	Zip:		
E-Mail:									Mobile Tel:			
6 Filing Representative (Required if different from applicant specified in Section 4):												
Last Name:						First Name:				Reg. No:		
Business Name:										Business Tel:		
Business Address:						City:				State:	_ Zip:	
E-Mail:										Business Fax:		
7	DOB/DBS F	iling Sta	tus (Re	equire	ed for all Tech	nology .	Manag	ement and	Fire Prot	tection Plan appl	lications):	
Filed with DOB/DBS   Copy of PW-1, Schedule A and/or DOB/DBS Application No: (print or attach barcode)												

8	8 Building Occupancy Group (Required for all applications. Indicate dominant occupancy of the building):								
9	9 Building Characteristics and Fire Protection Features (Required for all applications):								
Build		ng Construction Occ			Occupied	Occupied floor located more than 75 ft above the lowest level of FD vehicle access:			
Fully Sprinklered □			Identify flo		Partially Sprinkl Potected	lered			Non-Sprinklered □
10	Classification of	of Wor				ications):			
New □ Additions/Modifications □ Post Approval Amendment(F							roval Amendment(PAA) 🏻		
11	Job Description	ı (Requ	ired for all	applica	tions. Use separ	rate sheet i	if necessar	y):	
12	Filed to Compl	v with	Section o	f Code	e and/or Rules	(Requirea	l for all av	plications):	
		,				(= ]	· J · · · · · · · · · · · · · · · · · ·		
13	Applicant's Sta	temen	t and Sign	ature	(Required for al	l applicati	ions):		
Falsification of any statement is a misdemeanor under the NYC Administrative Code and is punishable by a fine or imprisonment, or both. It is unlawful to give to a city employee, or for a city employee to accept, any benefit, monetary or otherwise, either as a gratuity for properly performing the job or in exchange for special consideration. Violation is punishable by imprisonment, fine, or both.  I prepared or supervised the preparation of the plans and specifications herewith submitted and to the best of my knowledge and belief, the plans and work shown thereon comply with the provisions of the NYC Administrative Code.  I hereby acknowledge that the application fee submitted is non-refundable.									
(Signature) (FD use only) (Print Name)						Name)			
Fee F									
Chec	k No:		Date:					Cashier En	idorsement:
Plan	Plan assigned to:								
	<i>Approved</i> □	O	bjection(s)		l submission req				Disapproved/Denied:
Comment(s)/Stipulation(s):									
Exa	miner:		(Signature)						(Print Name)





## Fire Department • City of New York Bureau of Fire Prevention

9 MetroTech, Third Floor Brooklyn, NY 11201-3857

# Supplement # 1 INSTRUCTIONS FOR COMPLETING TM-1 APPLICATION

#### General Instructions

- All design and installation documents for items required by NYC Fire Code section FC 105.4 shall be submitted to FDNY for examination must be accompanied by a duly completed TM-1 form.
- For documents required to be filed with the New York City Department of Buildings (DOB) or Department of Small Business Services (DBS), a separate form shall be submitted (and a separate fee charged) for each DOB or DBS filing (file/application number).
- All fees must be submitted with the application. Fees are non-refundable. See "Application Fee" below for more information.
- All forms must be typed in black or blue ink.
- If additional space is required, please use  $8 \frac{1}{2} \times 11$  sheet and attach to the form.
- Submit completed application:
  - in person at Window #8 (Hrs. Mon Fri 8AM 3PM), 9 MetroTech Center, Brooklyn, NY 11201
  - <u>or</u> by mail (except Fire Alarm applications)- to one of the following addresses:

## All Technology Management Plans

Fire Department of City of New York Bureau of Fire Prevention Technology Management 9 MetroTech Center, Third Floor Room 3W-2

Brooklyn, NY 11201-3857

## **All Emergency Preparedness Plans**

Fire Department of City of New York Bureau of Fire Prevention Emergency Planning & Preparedness Group 9 MetroTech Center, Third Floor

Room 3W-6

Brooklyn, NY 11201-3857

#### **Detailed Instructions**

	Section	Instructions
1	New or Resubmission	Check (X) the appropriate box to indicate if the application is new or resubmission. All resubmissions must have the assigned FPIMS # printed on TM-1 and include the latest objection/s issued by the respective unit/s as applicable.
2	Design and Installation Documents Submitted to	Check (X) the appropriate box to indicate the type and the unit the application will be submitted to.
3	Premises Information	Indicate building number, street name, borough, zip code, and BIN #. BIN is Building Information Number issued by the Department of Buildings and must be submitted for all applications. Must include all floors of work, name of the tenant/s if applicable and occupancy classification of the area of work.
4	Applicant Information	Provide the name, business name, address, telephone, and e-mail of the applicant. License number is the Engineer's or the Architect's license number issued by New York State for PE or RA. Licensed Master Fire Suppression Contractor (LMFSC) license number is issued by New York City Department of Buildings. Choose if the applicant is P.E., R.A., building owner/manager, or LMFSC.

5	Owner Information	Provide the name, business name, address, telephone, fax and e-mail of the premises owner.
6	Filing Representative	Provide name, business address, telephone, fax, e-mail and Registration Number (Reg. #) of the filing representative. Registration Number is the number issued by NYC Fire Department as filing processor (Expeditor).
7	DOB/DBS Filing Status	Provide DOB Plumbing (PL) application number for all new Range Hood applications.  Provide DOB/DBS application number and copy of the PW-1 application.  Copy of approved PW-1A (Schedule A) or copy of Certificate of Occupancy (CO) shall be submitted for all fire alarm plan applications.
8	Dominant Occupancy of the Building	Provide the dominant occupancy of the building.
9	Building Description	Indicate the height of the building, number of stories and type of construction. Check(X) if occupied floor located more than 75ft above the lowest level of Fire Department vehicle access.  Indicate if building is fully sprinklered, partially sprinklered, or non-sprinklered. If partially sprinklered protection is provided, indicate the floors that are protected by sprinklers.
10	Classification of Work	Check (X) the appropriate box to indicate whether the plan submission is new, additions/ modifications, or post approval amendment (PAA). This section must be completed for all Fire Alarm applications.
11	Job Description	Give a detailed description of job. Use additional sheets if necessary.  Describe the type of system proposing to install as per Building Code/Fire  Code for all fire alarm applications.
12	Filed to Comply with Section of Code and/or Rules	Indicate the section of the code or rule. If additional factors to be considered, please specify. Use additional sheets if necessary.
13	Applicant's Statement and Signature	Applicant must print his/her name and sign the application.

# **Application Fee**

Choose plan type as indicated below and submit appropriate fee with each application:

Design and installation documents:

- 1. Plan examination as per Fire Code FC 105.4 \$420
- 2. Fire Alarm Plan \$420
- 3. Emergency Alarm Plan FC 908 \$420
- 4. Document Review \$420
- 5. Range Hood Plan \$210
- 6. Fire Suppression Plan (mechanical portion) \$420
- 7. Fire Safety and Evacuation Plan \$210
- 8. Combined Fire safety & Emergency Action Plan:
   Original Application \$630
   Amended application will be billed per hour (total not to exceed \$630)
- 9. Fire Protection Plan \$420