

# City of Galesburg

## Fire Department

Operating Under Council – Manager Government Since 1957

### FIRE ALARM SYSTEM INSTALLATION APPLICATION

Facility Information where work will be completed (Please Print):

Form and all documents must be submitted a minimum of **2 weeks prior** to scheduled work.

Facility Name: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Facility Street Address: \_\_\_\_\_ Galesburg, IL 61401

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Local Contact Name (Only complete if different from above): \_\_\_\_\_

Street Address: \_\_\_\_\_ Galesburg, IL 61401

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Contractor Information:

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, St Zip: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

### Type of Action

- |  |                                    |
|--|------------------------------------|
| <input type="checkbox"/> Installation            | <input type="checkbox"/> Removal   |
| <input type="checkbox"/> Modification            | <input type="checkbox"/> Expansion |
| <input type="checkbox"/> Other – Describe: _____ |                                    |

### Type of System (Indicate all that apply)

- |  |  |
|--|--|
| <input type="checkbox"/> Heat Detection          | <input type="checkbox"/> Smoke Detection |
| <input type="checkbox"/> Manual Pull Stations    |  |
| <input type="checkbox"/> Other – Describe: _____ |  |

### Type Monitoring

- Direct line to PSB Communications Center
- Direct line to alarm company monitoring center – Company \_\_\_\_\_
- Local (in-house) alarm only

Date work is scheduled to begin: \_\_\_\_\_

Approximate completion date: \_\_\_\_\_

### For Office Use Only

Date Received: \_\_\_\_\_ Pd: \_\_\_\_\_ Reviewed by: \_\_\_\_\_

This Application is:

- Approved - Permit # \_\_\_\_\_  Denied

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This form must be submitted with a check to cover the permit fee (\$35) and plans (to scale) of the work site a minimum of two weeks prior to any scheduled work at the location. All work must conform to 2012 International Fire Code.

Before an permit is granted the Fire Prevention Bureau must receive documentation of acceptance testing and statement of compliance.

The following Fire Code Requirements apply:

### 907.1.1 Construction Documents

Construction documents for fire alarm systems shall be submitted for review and approval prior to system installation. Construction documents shall include, but not be limited to, all of the following:

1. A floor plan
2. Location of alarm-initiating and notification appliances
3. Alarm control and trouble signaling equipment
4. Annunciation
5. Power connection
6. Battery calculations
7. Conductor type and sizes
8. Voltage drop calculations
9. Manufacturers, model numbers and listing information for equipment, devices and materials.
10. Details of ceiling height and construction
11. The interface of fire safety control functions

### 901.2.1 Statement of Compliance

Before requesting final approval of the installation, where required by the code official, the installing contractor shall furnish a written statement to the code official that the subject fire protection system has been installed in accordance with approved plans and has been tested in accordance with the manufacturer's specifications and the appropriate installation standard. Any deviation shall be attached to the written statement.

### 907.2.10.4 Acceptance Testing

When the installation of the alarm devices is complete, each detector and interconnecting wiring for multiple-station alarm devices shall be tested in accordance with the household fire warning equipment provision.

**The Dispatch notification number for any fire alarm activation is 309.342.8118. Be sure to notify Dispatch prior to working on the alarm system and once work is completed!**

In order to be approved, your application **MUST** be submitted with:

Fee : \$35

Two sets of technical plans prepared by a licensed design professional of the work site

Questions? Please contact:

Fire Chief Hovind

P: 309.345.3756

E: [rhovind@ci.galesburg.il.us](mailto:rhovind@ci.galesburg.il.us)

Submit completed application with above required documents at least

2 weeks prior to work starting or email to [rhovind@ci.galesburg.il.us](mailto:rhovind@ci.galesburg.il.us) :

Galesburg Fire Department

ATTN: Chief Hovind

PO Box 1387

Galesburg, IL 61401