


Plan Review Application Paint Booth Suppression Permit



Pagosa Fire Protection District
Division of Fire Prevention
 165 N. Pagosa Blvd. Pagosa Springs CO 81147
 970-731-4191 Fax: 970-731-4194

Pagosa Fire Protection District Use Only

Date Submitted _____

Date Fee Received (if applicable) _____

Amount Received \$ _____

Plan Examiner _____

Permit Number _____

SUBMIT PLANS & APPLICATION TO: firemarshal@pagosafire.com

Date _____ Allow 21 days for review after a complete submittal

Manufacturer's Dealer Registration Number: _____ **(Must Be Current)**

System Contractor: _____

Mailing Address: _____

Primary Contact: _____

Cell Phone: _____ **Office:** _____ **Email:** _____

Plan Review to be Returned to:

Name: _____ **Company:** _____

Address: _____

Phone: _____ **Email:** _____

Type of Plan Submittal:

1st Submittal	2nd Submittal	3rd Submittal (See Fee Schedule)
Installation Type: New Install	Addition/Alteration	Retrofit

Required with Submittal:

- Cover letter indicating scope and description of project
- Electronic PDF
- Product specifications (PDF copy with specific products highlighted or indicated is acceptable)

Calculated Fee:

\$250.00 X number of spray booth suppression systems in the facility = Total \$ _____

Project Details:

Project/Site Name: _____

Physical Address: _____ **Bldg./Suite/Floor:** _____

Project Installer/Supervisor: _____ **On-Site Phone:** _____

System Designed by: _____ **Phone :** _____

Email: _____

Project General Contractor: _____ **Phone:** _____

Email : _____

Building/Business Owner: _____ **Phone:** _____

Email: _____