



BARTOW COUNTY Steve Taylor, Sole Commissioner

Local Fire Marshal's Office
Bryan Cox, Fire Marshal
5435 Highway 20 N.E.
Cartersville, GA 30121
Office: 770-387-5151
Email: coxb@bartowga.org

Building Inspections Dept.
Tony Tidwell, Building Official
135 W. Cherokee Ave, Ste 120
Cartersville, GA 30120
Office: 770-387-5005
Email: tidwellt@bartowga.org

FIRE MARSHAL / BUILDING INSPECTION REVIEW APPLICATION

- **3 Complete sets of plans(*) and 1 CD (PDF Format)** must be submitted along with this form. However, 1 project manual and specifications may need to be submitted. Plans will only be accepted when this completed form; the appropriate # of plans, a CD, and a check for the correct amount have been submitted. Plans are accepted Monday through Friday from 9:00 a.m. to 4:00 p.m. Plans need to be submitted to the Building Inspections Department and when notified, can be picked up from them as well. Please allow 2 to 6 weeks for plans to be reviewed. (* See Building Inspections Handout for Plan Design Requirements*)

I. Name of Facility _____
 Facility Address _____
 Parcel ID # _____ Incorporate / Non Incorporated
 Facility Owner _____
 Mailing Address _____
 City _____ State _____ Zip Code _____
 Telephone # _____ Fax # _____

General Contractor _____ St Lic. # _____
 Mailing Address _____
 City _____ State _____ Zip Code _____
 Telephone # _____ Fax # _____

Fire Alarm Contractor _____ St Lic # _____
 Mailing Address _____
 City _____ State _____ Zip Code _____
 Telephone # _____ Fax # _____

Engineer _____ St Lic # _____
 Mailing Address _____
 City _____ State _____ Zip Code _____
 Telephone # _____ Fax # _____

Architect _____ St Lic # _____
 Mailing Address _____
 City _____ State _____ Zip Code _____
 Telephone # _____ Fax # _____

II. Type of Occupancy: (Mark "x" at all that apply for mixed use) NFPA 101

EDUCATION _____ ROOMING HOUSE _____ STORAGE _____
MERCANTILE _____ APARTMENT BLDG _____ INDUSTRIAL _____
BUSINESS _____ HOTEL/DORMITORY _____ DAY CARE _____
HEALTH CARE _____ BOARDING HOUSE _____ TENT _____
AMBULATORY HEALTHCARE _____ DENTENTION/CORRECTIONS _____
RESIDENTIAL BOARD & CARE _____ SPECIAL STRUCTURE(SPECIFY) _____
PLACE OF ASSEMBLY _____

If Assembly specify approximate occupant load: _____

For restaurants with occupant load <50 use mercantile;

Class A > 1000 Class B 301-1000 Class C 50-300

Is this a change of occupancy? _____ Yes _____ No

III. Type of Work Being Proposed: (Mark "x" at all that apply)

NEW BUILDING _____ Sq. Ft. Per Floor _____ Total Sq. Ft. _____
ADDITION _____ Sq. Ft. Per Floor _____ Total Sq. Ft. _____
RENOVATION _____ Sq. Ft. Per Floor _____ Total Sq. Ft. _____
OTHER: (ex: open pit burn, fireworks display, fireworks sales tent display, NFPA 96
Hood Vent, above ground fuel tanks 600 gallon or less)

Description of work being performed: _____

IV. Building Construction Classification: (See Definitions in NFPA 220)

NFPA 220 Type:

TYPE I (Fire Resistive) I (443) _____ I (332) _____

TYPE II (non-combustible or limited combustible) II (222) _____ II (111) _____

II (000) _____

TYPE III (ordinary construction) III (211) _____ II (200) _____

TYPE IV (heavy timber) IV (2HH) _____

TYPE V (wood frame) V (111) _____ V (000) _____

*If unknown, write in IBC (International Building Code) construction classification _____

No. of stories _____

V. Fire Protection Information: (currently in place)

Sprinkler System: Full _____ Partial _____ Wet _____ Dry _____ Other _____ None _____

Standpipe System: Full _____ Partial _____

Fire Alarm System: Local _____ Municipality Connected _____ Box # _____

High Rise _____ Box # _____

Fire Protection Information: (proposed)

Sprinkler System: Full _____ Partial _____ Wet _____ Dry _____ Other _____ None _____

Standpipe System: Full _____ Partial _____

Fire Alarm System: Local _____ Municipality Connected _____ Box # _____

High Rise _____ Box # _____

VI. Other Information:

Estimated cost of construction including MEP's _____

Estimated value of existing building _____

Type of heating and / or air conditioning Electric _____ Gas _____ Oil _____

I hereby certify that I have the authority to make the foregoing application, that the application is correct and that the owner of this building and the undersigned agree to comply with applicable fire codes of the State of Georgia and the applicable building codes of the State of Georgia and the Bartow County Building Ordinances.

Signature: _____

Printed Name: _____

Date: _____