

# City of Allen Park

## Fire Department



6730 Roosevelt, Allen Park, Michigan 48101  
PHONE: 313-928-0024 FAX: 313-928-6377



*Chief Douglas LaFond*  
NFPA Certified Fire Inspector II & Plan Review  
E-Mail [dlafond@cityofallenpark.org](mailto:dlafond@cityofallenpark.org)  
Web: [www.cityofallenpark.org](http://www.cityofallenpark.org)

Date: \_\_\_\_\_

### Business Information

Business Name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: \_\_\_\_\_

### Owner or Lessee

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor: Business Name \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

### Type of Inspection

- Sprinkler Hydro     UL-300 Puff Test     Fire Alarm Field Test     Annual Fire Insp.     Other  
 Hydrant Flow Test.     Duct Detector Function Test.     Certificate of Occupancy.     Special Use Insp.  
 Medical Facility Licensure Insp.     Apartment Inspection.     Liquor License Change.     Fireworks Sales Site Insp.

### Plan Review Required:

Plans must be submitted with an application for Plan Review by the Fire Department, and the appropriate fee paid before a permit can be issued.

Plans and specifications are required for all installations and alterations to Fire Suppression, Detection, and Notification Systems. Site Plans are also required for all Fireworks Displays and Fireworks Sales.

### Type of Plan Review

- Sprinkler System     Limited Area Sprinkler     UL-300     Fire Alarm  
 Fireworks Display     Occ. Load Calc.     Full Fire Safety Plan Review     Other

Fee: \_\_\_\_\_

## Building Information

### Occupancy Type

- Amusement     Church     Industrial     Parking Garage     Retail  
 Service Station     Medical     School     General Office     Warehouse  
 Public     Restaurant     Utility     Other Specify     Mercantile
- Describe in detail type of work being done. If the use of an existing building is being changed enter proposed use.
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### Type of frame

- Masonry wall     Wood Frame     Structural Steel     Reinforced Concrete     Other

### Fire and Alarm Systems

- Fire Escape     Kitchen Suppression     Other     Fire Alarm     Sprinkler System

### Dimensions / Data

# Of Stories \_\_\_\_\_ Use Group \_\_\_\_\_ # of Occupants \_\_\_\_\_ Square Footage \_\_\_\_\_

**Applicant Information** – Applicant is responsible for payment of all fees and charges applicable to this application and must provide the following information.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Federal ID Number: \_\_\_\_\_

I, hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent, and we agree to conform to all applicable laws of the State of Michigan. All information submitted on this application is accurate to the best of my knowledge.

Signature of Applicant: \_\_\_\_\_

Total Fee \$ \_\_\_\_\_

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### Department Use

Fee Collected By: \_\_\_\_\_ Fire Marshal Notified That Fee was paid: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_