

NEBRASKA STATE FIRE MARSHAL PLAN SUBMITTAL APPLICATION



Submit Plan To: Main Office
246 S. 14th Street
Lincoln, NE 68508-1804
(P) 402-471-2027
(F) 402-471-3118
monica.ellis@nebraska.gov

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|--------------------------|-------|---|
| DATE: | | (*) REQUIRED FIELD TO BE COMPLETED. INCOMPLETE FIELDS WILL RESULT IN A REJECTION LETTER (*) |
| *SUBMITTING PARTY | | *NAME OF PROJECT |
| *ADDRESS | | *ADDRESS |
| *CITY / STATE / ZIP CODE | | *CITY / COUNTY |
| CONTACT PERSON | PHONE | EMAIL ADDRESS (If code review via email is desired) |

ADDITIONAL INDIVIDUALS RECEIVING CODE REVIEW

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|--|---|
| *OWNER EMAIL ADDRESS (If different from submitting party) | *ARCHITECT EMAIL ADDRESS (If different from submitting party) |
| *CONTRACTOR EMAIL ADDRESS (If different from submitting party) | *OTHER EMAIL ADDRESS |

PROJECT INFORMATION

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|---|-----------------------------|--|
| OCCUPANCY TYPE | *STATE-OWNED: YES NO | *PLANS SUBMITTED TO LOCAL AUTHORITY FOR REVIEW? YES NO (Specify City or County) _____ |
| | *ESTIMATED START DATE: | |
| | *ESTIMATED COMPLETION DATE: | |
| *TYPE OF PLAN Preliminary Final Fire Alarm Fire Sprinkler Grain Storage/Handling Fire Main Kitchen Hood/Suppression Other _____ | | |

If a Preliminary Code Review has been previously reviewed and approved, please indicate the Code Review number here: M _____

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| *PROJECT DESCRIPTION New Building Addition Remodel Interior Tenant Finish Alteration Rehabilitation Other _____ |
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| NUMBER OF LEVELS (Including Sub Levels): | CONSTRUCTION TYPE: (ex. IIB or VB) NEW _____ EXISTING _____ |
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| FIRE PROTECTION FEATURES (If Provided) Total Sprinkler Partial Sprinkler Range Hood System Fire Alarm System Fire Extinguishers Other _____ |
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REVIEW FEE

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| *ESTIMATED PROJECT COST | PRELIMINARY REVIEW FEE? Preliminary Plan Reviews <u>DO NOT</u> require a review fee. Final plans shall be submitted prior to construction including separate plans, application, and fees. | ACCESSIBILITY CODE REVIEW FEE? If "NO" to Local Review (above) ADD 50% to the fire code review fee. THE total accessibility review fee shall not exceed \$250.00 |
|-------------------------|---|---|

1. Estimate must be included for plans to be reviewed. Estimate includes total value of all construction work as well as all finish work, painting, roofing, electrical, plumbing, HVAC, elevators, fire extinguishing systems and any other permanent equipment.
2. The fee for reviewing plans, blueprints, and shop drawings to determine compliance with rules and regulations adopted pursuant to section 81-502 shall be assessed to the following schedule:

| ESTIMATED PROJECT COST | FIRE CODE REVIEW FEE SCHEDULE |
|-------------------------------|--|
| \$ 1.00 - \$ 5,000.00 | \$ 5.00 minimum |
| \$ 5,001.00 - \$ 25,000.00 | \$ 5.00 for the first \$5,000.00 plus 2.00 for each additional \$5,000.00 or fraction thereof. |
| \$ 25,001.00 - \$ 50,000.00 | \$15.00 for the first \$25,000.00 plus \$2.00 for each additional \$5,000.00 or fraction thereof. |
| \$ 50,001.00 - \$ 100,000.00 | \$ 25.00 for the first \$50,000.00 plus \$1.00 for each additional \$5,000.00 or fraction thereof. |
| \$ 100,001.00 - \$ 200,000.00 | \$ 35.00 for the first \$100,000.00 plus \$1.00 for each additional \$10,000.00 or fraction thereof. |
| \$ 200,001.00 OR MORE | \$ 50.00 for the first \$200,000.00 plus \$1.00 for each additional \$10,000.00 or fraction thereof. ...The total review fee shall not exceed \$500.00. |

To auto calculate and pay the associated plan review fees online, please visit our website:
www.sfm.nebraska.gov

NOTES:
If construction commences prior to the submittal of plans, a LATE FEE of \$50.00 shall be ADDED.
All checks are to be made out to the "Nebraska State Fire Marshal"
Separate buildings and/or structures shall have separate plan submittal applications.
Fire Alarms, Sprinklers, Range Hoods, & Underground Mains shall be reviewed separately by the State Fire Marshal including separate applications, fee, and shop drawings.

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|-----------------------|------------------------------------|---------------------------|------------|---|
| *FIRE CODE REVIEW FEE | *ACCESSIBILITY FEE (if applicable) | *LATE FEE (if applicable) | *TOTAL FEE | *ONLINE PAYMENT ORDER ID # <small>*REQUIRED - If Paid Online</small> |
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Plans that do not bear the seal of a State Registered Engineer/Architect may be in violation of state law. Contact the Board of Engineers & Architects for specific requirements at (402) 471-2021

OFFICE USE ONLY

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|-------------|---------|----------------------------------|----------------|
| PLAN NUMBER | DATE IN | HOW PAID CHECK MONEY ORDER | RECEIPT NUMBER |
| | | | |