



High Piled Combustible Storage Plan Submittal Form

August 2018

- Initial Review Re-Review Overtime Review 3rd Party Review

Drop Off Date _____
Project Name _____
Project Address _____
Contact Person _____
Contact Company _____
Contact Company Office Phone _____
Contact Cell Phone _____
Contact Email _____

Applicant shall confirm the presence of each below listed items (as applicable) by checking each box prior to plan submission. Plans may not be reviewed unless all of the following items are included:

- | | |
|--|--|
| <input type="checkbox"/> CSFD Plan Review No. on the drawings (for re-reviews only) | <input type="checkbox"/> Project address shown on plans |
| <input type="checkbox"/> Completed permit application | <input type="checkbox"/> Storage questionnaire(s) attached to plans |
| <input type="checkbox"/> Maximum pile volume for each storage array | <input type="checkbox"/> Aisle dimensions between each storage array |
| <input type="checkbox"/> Usable storage height for each storage area | <input type="checkbox"/> Location of required fire department access doors |
| <input type="checkbox"/> Dimension and location of transverse and longitudinal flue spaces | <input type="checkbox"/> Number of tiers within each rack |
| <input type="checkbox"/> Location of commodities which are banded or encapsulated | <input type="checkbox"/> Type of fire suppression and fire detection systems |
| <input type="checkbox"/> Sprinkler cut/specification sheets for all sprinkler types within all high piled storage areas | |
| <input type="checkbox"/> Commodity clearance between top of storage and the sprinkler deflector for each storage arrangement | |
| <input type="checkbox"/> Floor plan of the building showing locations and dimensions of high-piled storage areas | |
| <input type="checkbox"/> Location and classification of commodities in accordance with the 2015 IFC, Section 3203 | |
| <input type="checkbox"/> Location of valves controlling the water supply of ceiling and in-rack sprinklers | |
| <input type="checkbox"/> Type, location and specifications of smoke removal and curtain board systems | |
| <input type="checkbox"/> Additional information regarding required design features, commodities, storage arrangement and fire protection features within the high-piled storage area | |
| <input type="checkbox"/> A total of three plan sets, two of which will be stamped and returned third will be retained in the office records | |

Signature _____ Printed _____

Plan Status

- Approved
 Approved with Corrections (refer to plan review comments and red lines on the plans)
 Disapproved
 Fee at Pick-Up: \$
 No Fee at Pick-Up/No Charge

Comments _____

Please do not call the office regarding plan review comments until after plans have been picked up and reviewed.

Plan Review Status/Comments available online at: Coloradosprings.gov/PlanReviewStatus

**** All plans remaining in our office more than 30 days will be discarded as abandoned****

