



# City of Marco Island

---

## DEPARTMENT OF FIRE PREVENTION

1280 San Marco Rd.  
Marco Island FL 34145  
239-394-5405

## FIRE SUPPRESSION SYSTEM

# PLAN CHECKLIST

*(For Plan Design Review)*

Original Document – 05-21-2013

# City of Marco Island “Fire Suppression System” Checklist for Plan and Submittal Review”

The following is intended to assist installing contractor in designing and submitting for review - a “code compliant” – pre-engineered fire suppression system. This document in no way details all of the requirements that may be necessary for a complete code compliant system.

- YES NO      1.      Is the name of the contractor submitting plans included **ON** plans?
- YES NO      2.      Has the project name and address been included **ON** the plans?
- YES NO      3.      Do plans designate the Authority Having Jurisdiction? (NFPA 17A 2009 Edition 6.1.1 (1))
- YES NO      4.      Do plans indicate the NFPA Standard (including edition) that the installation will comply with?
- YES NO      5.      Is the type of system (i.e. Rangeguard, Ansul, etc) identified on the plans?
- YES NO      6.      Is this a new system?
- YES NO      7.      Is this an upgrade or alteration to an existing system? If so, please provide a **detailed** explanation of all changes to system (i.e. upgrade to UL 300, nozzle change due to equipment change, repipe, etc.)
- YES NO      8.      Do plans indicate the type of fuel source (i.e. electric, gas, both, wood)? **NOTE: Appliances using solid cooking fuels cannot utilize the same hood and/or duct with other types of appliances.**
- YES NO      9.      Do plans show the dimensions (length and width) of the plenum?
- Single V-Bank      10.      Is the plenum single bank or V-bank?
- YES NO      11.      Do plans show the dimensions of the duct?
- YES NO      12.      Is the duct a standard duct?
- YES NO      13.      Is the duct a transition duct?
- YES NO      14.      Do plans show the appliance size(s)?  
Both of hazard area and overall size?
- YES NO      15.      If appliances include deep fat fryers, do they have dripboard(s)?
- YES NO NA      16.      Have dimensions of dripboards (**both front and rear**) been included?
- Single Split NA      17.      Is the deep fat fryer a single vat or split vat fryer?

- YES   NO   **18.** Are there any backshelves?
- YES   NO   NA   **19.** If so, is the location(s) of the backshelves noted on plans?
- YES   NO   **20.** Do plans show the pipe size(s) and schedule being utilized?
- YES   NO   **21.** Do plans show the type (i.e. black iron, etc) of pipe being utilized?
- YES   NO   **22.** Have specification sheets been provided for **all** components of the system? **NOTE: Do not provide copies of pages for components not utilized in system.**
- YES   NO   **23.** If more than one bottle is being utilized, are the bottles manifolded?
- YES   NO   **24.** Is the total number of nozzles and flow points (either per bottle or system) indicated on the plans?
- YES   NO   **25.** Is testing criteria included in submittal package?
- YES   NO   **26.** Does system provide an audible or visual indicator to show system is in ready condition or is in need of recharging? (NFPA 17A (2009 edition) Section 4-8)
- YES   NO   **27.** Is an audible or visual indicator provided to show that system has operated, that personnel response is needed and that system is in need of recharging? (NFPA 17A (2009 edition) Section 5.2.1.8)
- YES   NO   **28.** Is the remote manual activator (pull station) installed no more than 48" or less than 42" above finished floor? (NFPA 17A (2009 edition) Section 5.2.1.10)

**NOTE: Systems requiring piping calculation to ensure compliance with manufacturers specifications shall require such piping calculations at time of inspection.**

I hereby attest that, to the best of my knowledge, the aforementioned checklist information is accurate and adequate for the fire suppression system being submitted.

\_\_\_\_\_  
Applicant Name (print)

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Applicant Company

\_\_\_\_\_  
State Registration Number

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Facsimile Number

\_\_\_\_\_  
Date

## **HOOD CONDITION CHECKLIST**

**The following conditions would constitute a non-code compliant hood and may result in failure of a fire suppression acceptance test. If any of these violations are present, it is recommended that the fire suppression contractor contact the fire district for a courtesy inspection.**

- **Is there excessive build up of grease on hood, duct work or protected appliances?**
- **Is the hood, duct work or protected appliances damaged?**
- **Are there any improperly installed or damaged electrical and gas service lines that are dedicated to the hood or appliances?**
- **Are any filters or duct service access panels missing?**
- **Are the hood mounts and supports safety secured?**
- **Is there any combustible materials (structural or otherwise) located within the hood service area?**
- **Are there any hood conditions that may prevent the proper operation of the fire suppression system present?**