

Fire Marshal Requirements:

What is required to be submitted for new facilities?

- 24 or less children – submit C.2.2 (PDF) and scaled drawing to OSFM.
- 24 or more children – submit C.2.2 (PDF), C.2.2.A (PDF), and code footprint to OSFM.
- Each room must be labeled with a name or number for the room, this must match what you are submitting to KDHE for Licensure. Fire Marshal approval will indicate how many occupants can be placed in the room; this will include staff.

Requirements for a Scaled Drawing:

The work shall be designed and constructed to the criteria established by Kansas regulation. Furthermore, the plans shall be reviewed for code compliance, or a building permit shall be obtained from a local building official and/or fire authority with building inspections taking place during construction and a certificate of occupancy issued prior to formal use. In some local jurisdictions, both will take place. You must show all the fire safety features of constructed buildings, resources. Fire protection and life safety features must be included in the original scale drawing and not retrofitted at a later stage. The scaled drawing provides a snapshot of the key code information shown within a small-scale building plan. The code footprint reduces redundancy and increases the coordination between all participants involved with new/existing construction.

Requirements for Code Footprint:

New construction in the state of Kansas, including building additions and changes, must be under the direct supervision of a Kansas licensed design professional, whether an architect or engineer. The work shall be designed and constructed to the criteria established by Kansas regulation. Furthermore, the plans shall be reviewed for code compliance, or a building permit shall be obtained from a local building official and/or fire authority with building inspections taking place during construction and a certificate of occupancy issued prior to formal use. In some local jurisdictions, both will take place. Kansas architects, engineers, building code officials, and fire officials shoulder the responsibility for providing a third-party objective evaluation of the fire safety features of newly constructed buildings. Resources may not be readily available to verify new construction is designed and built to meet the intent of the Kansas Fire Prevention Code. The major participants of the fire protection team are the building owners and operators, the local inspection authorities, the Office of the State Fire Marshal, and the Kansas licensed design professionals. These major participants must work together to facilitate the efficient use of resources. Fire protection and life safety features must be included in the original design concept and not retrofitted at a later stage. To make such a review of specific code criteria possible, a format called a “code footprint” has been developed over the years. The code footprint provides a snapshot of the key code information shown within a small-scale building plan. The code footprint reduces redundancy and increases the coordination between all participants involved with new/existing construction.

SUBMITTAL TIMEFRAMES:

The Kansas State Fire Marshal's Office has 30 days to review your code footprint for compliance with all the state adopted codes and regulations. This 30 days starts from the date that we receive a complete submittal. Incomplete submittals will not be reviewed by a Certified Plan Reviewers.

We review submittals in the order that they are received. You must plan accordingly and submit your information well in advance of any critical deadlines.

We will NOT do an emergency review or place your submittal ahead of others.

Everyone has deadlines and more importantly our staff needs time to be able to sit down and accurately review the information. Often a "hurried" review lends itself to errors.

Kansas State Fire Marshal – Fire Prevention Division

REQUIRED ON CODE FOOTPRINT

- (1) Graphic bar scale;
- (2) North directional indicator;
- (3) Complete building floor plan, with clear identification of new, remodeled, and existing (Shading);
- (4) Identification of all permanent partitions taller than six feet;
- (5) Label with plain text, keynotes, or legends for each room and space;
- (6) Occupant load of assembly rooms and total occupant load for each floor level;
- (7) Stair and shaft enclosures: openings and ratings;
- (8) Corridors: Openings and ratings;
- (9) Occupancy and area separations identified;
- (10) Horizontal exit arrangements, exit passageways, and smoke compartments identified;
- (11) Exterior exits and exit capacity identified;
- (12) Location of the central fire alarm control panel and any remote annunciator panels;
- (13) Location of each fire department supply connection;
- (14) Location of fire department access roads and fire hydrants;
- (15) Property line distance and exposures;
- (16) Special hazards or conditions identified; and
- (17) Location of any anticipated future additions (dotted lines)

REQUIRED ON CODE FOOTPRINT ANALYSIS

- (1) Project construction purpose: new, addition, change in use, renovation, or other;
- (2) Reason for submittal: new construction, new licensure, certificate of occupancy, or plan of correction for existing code deficiencies;
- (3) Building street address, city, state, zip code;
- (4) Owner name, address, city, state, zip code, phone and fax number;
- (5) Designer name, address, city, state, zip code, phone and fax number;
- (6) Designer's seal (RA or PE);
- (7) Date developed and any revision dates;
- (8) Code or codes used;
- (9) Name of the responding fire service;
- (10) Name of the local building inspection department, if available;
- (11) Each occupancy group and type;
- (12) Type of construction;
- (13) Structural code requirements, including the following:
 - (A) The total floor area of each occupancy, both actual and allowable;
 - (B) height and area limitations, both actual and allowable; and
 - (C) structural fire ratings**, both actual and allowable ;
- (14) Active fire safety features, including the following:
 - (A) The type of automatic suppression systems and locations;
 - (B) the fire alarm signaling system;
 - (C) emergency lighting and power features; and
 - (D) the smoke control system;
- (15) Water supply requirements of the facility for fire suppression; and
- (16) Alternative methods of design or construction, or both.

****Structural Fire Protection Ratings**

Interior bearing walls, Exterior bearing walls, Exterior nonbearing walls, Structural frame, Permanent partitions, Shaft enclosures, Floors, Roofs, Exterior openings, Proposed UL, FM, or other fire assembly numbers (if available)

WHEN DO I NEED TO GET AN ENGINEER OR AN ARCHITECT?

The law requires a Kansas licensed architect or engineer to design projects and systems meeting specific criteria in the State of Kansas.

The services of a Kansas licensed architect are required when:

- Designing new buildings (Excluding single family dwellings & farm buildings)
- Designing changes to existing buildings which affect structural components
- Designing changes to existing buildings which affect the fire resistive qualities of the structure

A Kansas licensed professional engineer is required when:

- Design or modification of fire detection
- Design or modification of automatic sprinkler system
- Design or modification of automatic smoke detectors system
- Design or modification of flammable gas detection systems
- Design or modification of liquefied petroleum gas systems

The involvement of an architect or engineer in the design stage reduces the chance that a safety related code violation will be identified during construction and also reduces the delay and expense of correcting any safety problems before an occupancy permit can be granted.

Before hiring a Kansas, licensed architect or engineer be sure you do some research and ask some important questions such as:

- 1.) Are they familiar with K.A.R 22-1-7 regarding code footprint submittals?
- 2.) Are they designing to the editions adopted by the Office of the State Fire Marshal?
- 3.) What are their timelines for acceptance?
- 4.) Who do they hire to do the construction work?
- 5.) What is their construction warranty?

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Sample of C.2.2 form that must be submitted with the scaled drawing or Code Footprint:

KIDS #	REQUEST FOR REVIEW C.2.2.
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OFFICE OF THE STATE FIRE MARSHAL

800 SW JACKSON, STE 104, TOPEKA, KS 66612

PHONE: (785) 296-3401 FAX: (785) 296-0151

If you are submitting your documents for review by OSFM, we review submitted forms in the order received. We will require 30 days to review submissions.

REQUEST FOR PROJECT REVIEW – PAGE 1 OF 2 (CHILD CARE FACILITIES WITH 24≤ CHILDREN COMPLETE PAGE 1)		
DATE:	COUNTY PROJECT LOCATED:	
<input type="checkbox"/> SCHOOL (K-12 and/or Colleges and Universities)	<input type="checkbox"/> HOSPITAL	
<input type="checkbox"/> CHILDCARE/PRESCHOOL Total Children #:	<input type="checkbox"/> AMBULATORY SURGICAL CENTER	
<input type="checkbox"/> Half Day <input type="checkbox"/> Full Day <input type="checkbox"/> Infants Ages:	<input type="checkbox"/> NURSING HOME	
<input type="checkbox"/> DROP IN PROGRAM LESS THAN 2000 OCC.	<input type="checkbox"/> ICF/MR	
<input type="checkbox"/> CORRECTIONAL/DETENTION	<input type="checkbox"/> HOSPICE	
<input type="checkbox"/> MULTI-FAMILY RESIDENTIAL OVER 12,000 S.F.	<input type="checkbox"/> ASSISTED LIVING	
<input type="checkbox"/> ASSEMBLY FOR 2000 OR MORE OCCUPANTS	<input type="checkbox"/> RESIDENTIAL BOARD & CARE/HOME PLUS: Clients#	
<input type="checkbox"/> OTHER (list):	<input type="checkbox"/> MEDICARE <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> MEDICAID <input type="checkbox"/> Yes <input type="checkbox"/> No	
FACILITY INFORMATION		
NAME		
STREET		
CITY		
STATE/ZIP		
PHONE NUMBER		
FAX NUMBER		
OWNER'S REPRESENTATIVE (SINGLE POINT CONTACT RESPONSIBLE FOR ALL FUTURE CORRESPONDENCE TO THIS PROJECT)		
	PRIMARY	SECONDARY
NAME		
STREET		
CITY		
STATE/ZIP		
PHONE NUMBER		
FAX NUMBER		
E-MAIL ADDRESS		
TYPE OF SUBMITTAL: CODE FOOTPRINTS – REQUIRED BY STATE LAW (K.A.R. 22-1-7)		
NEW BUILDING		TEMP. EGRESS/EXITING DURING CONSTRUCT.
ADDITION TO EXISTING BUILDING		LIC. AMENDMENT/NEW: KDHE KDOA SRS
RENOVATION/REMODELING		CHANGE IN USE
CHANGE OF OWNERSHIP		EXISTING BUILDING CHANGE OF OCCUPANCY
OPTIONAL DOCUMENTATION AS REQUIRED BY KANSAS STATE FIRE MARSHAL IN WRITING DURING REVIEW		
SPRINKLER DOCUMENTS		FIRE ALARM DOCUMENTS

Sample of C.2.2A form that must be submitted with the scaled drawing or Code Footprint:

KIDS #	REQUEST FOR REVIEW C.2.2.A
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02/11

OFFICE OF THE STATE FIRE MARSHAL
 800 SW JACKSON, STE 104, TOPEKA, KS 66612
 PHONE: (785) 296-3401 FAX: (785) 296-0151

If you are submitting your documents for review by OSFM, we review submitted forms in the order received. We will require 30 days to review submissions.

REQUEST FOR PROJECT REVIEW – PAGE 2 OF 2 – K.A. R. 22-1-7 COMPLIANCE ATTESTATION			
DATE:		FACILITY NAME:	
1. Design architect or engineer to check the Met column to indicate compliance to KFPC & K.A.R. 22-1-7.			
Met	The following shall be provided on each code footprint:	Met	The following narrative is required on code footprints:
<input type="checkbox"/>	A full size drawing (request 11 x 17 maximum)	<input type="checkbox"/>	Project construction purpose: new, addition, change in use, renovation, or other
<input type="checkbox"/>	Complete floor plan, including existing facilities and new construction, for each floor of the facility	<input type="checkbox"/>	Reason for submittal: new construction, new licensure, certificate of occupancy, or plan of correction for existing code deficiencies
<input type="checkbox"/>	An 11 inch by 17 inch (print) reduction sealed by a Kansas-licensed design professional	<input type="checkbox"/>	Code or codes used (All code footprints must list the Kansas Fire Prevention Code and related statement.)
Met	The following information is required on code footprint:	<input type="checkbox"/>	Location of any anticipated future additions
<input type="checkbox"/>	Graphic bar scale	<input type="checkbox"/>	Name, address, city, state, zip code, phone number, and fax number of the owner
<input type="checkbox"/>	North directional indicator	<input type="checkbox"/>	Date developed and any revision dates
<input type="checkbox"/>	Complete building floor plan with a clear identification of new, remodeled and existing portions	<input type="checkbox"/>	Name, address, city, state, zip code, phone number, and fax number of the designer
<input type="checkbox"/>	All permanent partitions taller than 6 feet	<input type="checkbox"/>	Designers seal (RA or PE)
<input type="checkbox"/>	Label with plain text, legends for each room/ space	<input type="checkbox"/>	Name of the responding fire service
<input type="checkbox"/>	Occupant load of assembly rooms and total occupant load for each floor level	<input type="checkbox"/>	Name of the local building inspection department
<input type="checkbox"/>	Identification of openings and ratings of stair and shaft enclosures	<input type="checkbox"/>	Each occupancy group and type & each room occupant load
<input type="checkbox"/>	Identification of ratings of corridors and openings	<input type="checkbox"/>	Type of construction
<input type="checkbox"/>	Occupancy and area separations	<input type="checkbox"/>	Structural code requirements, including the following:
<input type="checkbox"/>	Horizontal exit arrangements, exit passageways, and smoke compartments	<input type="checkbox"/>	Total floor are of each occupancy, actual and allowable
<input type="checkbox"/>	Designate all required exterior exits and exit capacity	<input type="checkbox"/>	Height and area limitations, actual and allowable
<input type="checkbox"/>	Location of the central fire alarm control panel and any remote annunciator panels	<input type="checkbox"/>	Structural fire ratings, actual and allowable
<input type="checkbox"/>	Fire department connections	<input type="checkbox"/>	Identification of active fire safety features, including:
<input type="checkbox"/>	Fire department access roads and fire hydrants	<input type="checkbox"/>	Type of automatic suppression systems/ locations
<input type="checkbox"/>	Distances to property line and exposures	<input type="checkbox"/>	Fire alarm signaling system
<input type="checkbox"/>	Any special hazards or conditions	<input type="checkbox"/>	Emergency lighting and power features
<input type="checkbox"/>	Location of any anticipated future additions	<input type="checkbox"/>	Smoke control system / extent and purpose
<input type="checkbox"/>	RESERVED	<input type="checkbox"/>	Water supply requirements for fire suppression
<input type="checkbox"/>	RESERVED	<input type="checkbox"/>	Alternative design or methods of construction, or both

SAMPLE OF APPROVAL LETTER

State Fire Marshal
800 SW Jackson
Suite 104
Topeka, KS 66612-1216

PLAN REVIEW APPROVED - NFPA

Thursday April 28, 2022

We have completed a review of the design submittal received on Thursday April 28, 2022

The design submittal appears to be in compliance with the fire and life safety provisions of the Kansas Fire Prevention Code thus allowing the construction and/or installation work to commence. Submittal acceptance subject to comments listed below.

Plan reviews by the Kansas State Fire Marshal are cursory in nature, and compliance to the appropriate standards is expected. Comments provided by other reviewing parties or authorities having jurisdiction shall be acknowledged. Any omission of requirements on submitted plans or any omission during plan review shall in no way authorize any violation of applicable requirements under the Kansas Fire Prevention Code. Acceptance of design submittal shall not be construed to be an acceptance of items that do not conform to Kansas Fire Prevention Code.

Construction and/or work zones shall be separated from occupied areas by one-hour rated construction (or smoke resistive if sprinkler system is maintained on both sides of separation), per OSFM guidelines. Any Temporary egress must be approved by OSFM. Additionally, the OSFM has the authority to verify at any time that construction and/or installation work complies with the accepted plans and state-adopted regulations.

Each project will require an inspection at 50% completion. A request for inspection must be made to the licensing agency at least 30-days before the 50% milestone. Fire Protection Systems shall adhere to the engineered drawings, manufacturer requirements/listings, and the appropriate Codes and Standards. The responsible contractor shall leave a copy at the facility of the final test report verifying that the installed fire protection system is in proper and compliant working condition. The completed fire protection system installation is subject to verification by OSFM. If changes are required in construction, separation to occupied spaces, or temporary egress, these changes must be approved, in writing, by OSFM. All work on the project shall stop until an approval is obtained. If the project, at any point, cannot maintain the required separation or causes any impairment to any fire protection system, the OSFM must be notified and the facility must perform a fire watch until the conditions are corrected. Failure to comply with these requirements could result in significant penalties including citation of immediate jeopardy or the issuance of an order to cease and desist.

Fire alarm, automatic suppression systems, and other extinguishing system plans must be submitted separately for review and approval, before final inspection. Final inspection and referral to licensing agency are required prior to final occupancy.

This is a plan approval only. This is not an approval to occupy.

SAMPLE DENIAL LETTER:

A plan approval document will be provided, and it may include items at the bottom that you still need to provide to State Fire Marshal.

**State Fire Marshal
800 SW Jackson
Suite 104
Topeka, KS 66612-1216
PLAN REVIEW DENIED**

Fri Nov 4, 2022

KIDS Occupancy File Number:

We have completed a review of the design submittal received on
The design submittal fails to comply with the fire and life safety Fire Prevention Code. Please refer to the violations listed below.
Please correct the violations listed below and resubmit your design to our office within 90 days from the date of this letter. If there is no correspondence within the allotted 90 days, your original design submittal will be recycled.

KANSAS REGULATION AND FINDINGS

06-PLN-11 DESIGNER SEAL

KAR 22-1.7

The designer's seal (RA or PE) is illustrated.

Findings Include:

– ALL PAGES OF THE CODE FOOTPRINT ARE MISSING THE DESIGNERS SEAL/STAMP

06-PLN-12 ROOM IDENTIFICATION

KAR 22-1.7

Each room and space is identified by name or number.

Findings Include:

– THERE ARE NO ROOM NUMBERS OR ROOM IDENTIFIERS LISTED ON THE CODE FOOTPRINT

06-PLN-39 FACP

KAR 22-1.7 2006 IBC & IFC Section 907

The location of the fire alarm control panel and any remote annunciator panel is illustrated.

Findings Include:

– LOCATION OF FIRE ALARM CONTROL PANEL NOT IDENTIFIED