

# REQUEST FOR REVIEW C.2.2.



## OFFICE OF THE STATE FIRE MARSHAL

800 SW JACKSON, STE 104, TOPEKA, KS 66612  
PHONE: (785) 296-3401 EMAIL: [prevention@ks.gov](mailto:prevention@ks.gov)

- Complete all required entries and those applicable to your occupancy type
- Email required documents as PDF attachments to [prevention@ks.gov](mailto:prevention@ks.gov)
- OSFM will review the documents as soon as possible within 30 days

**Description of the project:**

Date

### Facility Information:

Name

Address

City

Zip Code

County

Phone

Email

Select Occupancy

Other

Childcare: Total Number of Children

Ages

Residential Board & Care/Home Plus: Number of Clients

Medicare or Medicaid Received

### Facility Representative: (Point of contact for all future correspondence for this facility)

Primary

Secondary

Name

Address

City

State/Zip

Phone

Email

**Type of Submittal:** (\*code footprint may be required)

**Architect's Required Deferred Submittal:** (Check all that apply)