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Doug Jorgensen, Fire Marshal

Office of The State Fire Marshal

Sam Brownback, Governor

REQUEST FOR PROJECT REVIEW – PAGE 2 OF 2 – K.A. R. 22-1-7 COMPLIANCE ATTESTATION

DATE:	FACILITY NAME:
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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