

**STATE OF LOUISIANA**  
Department of Public Safety and Corrections  
Office of State Fire Marshal Code Enforcement and Building Safety  
8181 Independence Boulevard  
Baton Rouge, Louisiana 70806  
225-925-4920

HENRY H. FRY  
DEPUTY ASSISTANT SECRETARY

**AMENDED LETTER**

EDWARD GREMILLION, P E, C E  
DAMMON ENGINEERING, INC  
1095 FLORIDA AVE  
SLIDELL, LA 70458-0000

RE: P0322761  
LIVING WORD INTERNATIONAL  
MINISTRY  
1000 CARUSO BLVD  
SLIDELL, LA 70458-0000

NFPA 101, 2003

ASSEMBLY OVER 300 OCCUPANTS

Dear Applicant:

This is to advise that the previous review letter dated 02/22/2007 for this project is hereby amended as follows:

- 1. **This letter is to change the occupancy shown in the title block to correspond to the architectural review.**
- 2. **NOTE: Please enclose a copy of this letter with future submittals or other correspondence pertaining to this project.**

This review applies to the work indicated on the drawings or specifications.

This review shall in no way permit or authorize any omissions or deviations from the specific requirements of the adopted codes, rules and regulations in accordance with R.S. 40:1574.1(B).

The above amended review is valid if construction starts within 180 days from the above date of the original review letter.

**Occupancy of the project will not be permitted until we receive the completed certificate and a satisfactory inspection of the completed construction has been made by this office.**

**To arrange for inspection of the project, please contact the District Office at the phone number below, two (2) to three (3) weeks in advance. Approved plans must be available on job site at time of inspection. Certificate of completion must be provided to inspecting Deputy for final inspection.**

REVIEWED BY:  
DONNA LEBLANC  
MECHANICAL ENGINEER

CC:

Living Word International Ministries  
American Sprinkler Co Inc  
Property Insurance Association\*  
St Tammany Fire Protection District No 1\*  
City Of Slidell\*  
New Orleans District\* 5042194600

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**FIRE SUPPRESSION SYSTEM**

EDWARD GREMILLION, P E, C E  
DAMMON ENGINEERING, INC  
1095 FLORIDA AVE  
SLIDELL, LA 70458-0000

RE: P0322761  
LIVING WORD INTERNATIONAL  
MINISTRY  
1000 CARUSO BLVD  
SLIDELL, LA 70458-0000

NFPA 101, 2003

ASSEMBLY 300 OCCUPANTS OR LESS

Dear Applicant:

Please be advised that we have made a general review of the drawings, calculations, and equipment data for the proposed Fire Suppression System, based on the submittal package received for the above referenced project. This review is governed by the Official Manual of the Office of State Fire Marshal, which contains the adopted laws, codes, rules, and regulations of this office. This review, in no way, shall permit and/or authorize any omissions or deviations from the specific requirements of the Official Manual. Requirements cited in this review do not relieve the licensed fire suppression system designer and the Professional Of Record, when required by LA RS 37, from complying with all the requirements contained in the Official Manual. Subsequent to our general review of the submittal package, we have determined that the drawings, calculations, and equipment data appear to satisfactorily comply with the adopted laws, codes, rules and regulations of the State Fire Marshal, subject to the following requirements and review qualifications:

NOTE: THE COMMENTS LISTED BELOW IDENTIFY APPARENT DEFICIENCIES DETECTED IN OUR REVIEW OF THE DOCUMENTS SUBMITTED.

- I. **Although resolution to the comments in this review letter are not required to be submitted back to this office, the Professional of Record, (when required by LA R.S. 37:155) otherwise the Owner, shall not be relieved of the requirement to comply with all citations indicated in this letter, as well as all requirements of the Official Manual of the Office of State Fire Marshal, Code Enforcement and Building Safety.**

Be advised that if any item in this review letter initiates a change(es) to the sprinkler system, which affect the hydraulic design as submitted, the Professional of Record (when required by LA R.S. 37:155) otherwise the Owner, shall revise the fire suppression system drawings and hydraulic calculations. The revisions, including revised sprinkler plans, calculations, and/or cut sheets shall be submitted to this office, along with the original stamped State Fire Marshal fire suppression system plans, complete with the original submittal calculations and cut sheets. All revisions shall be accompanied by the appropriate fee, as described in the applicable system review checklist and fee schedule, available from our website <[www.dps.state.la.us/sfm](http://www.dps.state.la.us/sfm)>. Do not provide a new application -

Feb 22, 2007  
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re-review of submitted changes will be facilitated by an Amended Letter to the existing project number (P0 number) appearing in the heading of this letter, above.

Item(s) of particular concern, which may require re-submittal is/are Item(s) 2.

**NOTE : PLEASE READ THE REVIEW LETTER CAREFULLY BEFORE INITIATING SPRINKLER WORK, AS REDESIGN MAY BE REQUIRED**

2. 13:6.1.1.2 Sprinklers shall be installed throughout the premise.

This item is deficient in that compliance is not verifiable and / or has not been documented in the submittal, E.G., See items 21 and 22 of P0277358 dated June 25, 2004.

>>>>> Prior to occupancy, POR verify with owner and document to the inspector, that there is and will be no platform or baptistry ( as none is shown in the sprinkler drawing cross section or plan view ), or document that the system is resubmitted for SFM review and is found to be acceptable.  
<<<<<<

**INSPECTOR VERIFY**

NOTE : 13:11.2.3.1.8 (3) For buildings having unsprinklered combustible concealed spaces, as described in 8.14.1.2 and 8.14.6, the minimum area of sprinkler operation shall be 3000 ft<sup>2</sup> (279 m<sup>2</sup>).

3. 13:8-4.4.5 and 9-1.2 The calculated system shall not exceed the available volume and pressure of the water supply at the point of connection. Include all friction losses, e.g. private supply piping, fittings, devices such as valves, meters (including detector check valves), strainers, backflow preventers, etc. and calculate elevation changes that affect the sprinkler discharge.

This item is deficient in that compliance is not verifiable and / or has not been documented in the submittal. E.G., Account for pressure losses , with outside hose allowance, back to the flow hydrant;

Professional of Record ( POR ) verify that the calculations, drawing(s) and placard information are corrected to accurately represent system demands. If system modifications are required ( e.g. : to keep the system demand below the available supply ), or if there are deviations from the submitted plans, resubmit under this SFM review number , along with additional review fee to cover the review of the revisions.

4. 13:14.1.3 Working plans show :

(7) Occupancy class of each area or room

(10) Size of city main in street and whether dead end or circulating; if dead end, direction and distance to nearest circulating main; and city main test results and system elevation relative to test hydrant (see A.15.1.8 ).

( No city main identified )

(24) Make, type, model, and size of alarm or dry pipe valve

(28) Private fire service main sizes, lengths, locations, weights, materials, point of connection to city main; the sizes, types and locations of valves, valve indicators, regulators, meters, and valve pits; and the depth that the top of the pipe is laid below grade

(30) Where the equipment is to be installed as an addition to an existing system, enough of the existing system indicated on the plans to make all conditions clear

This item is deficient in that the submitted drawing is missing required information. Professional of Record ( POR ) verify that the drawing is corrected

5. 13:9.1.1.4.1 Unless permitted by 9.1.1.4.2 or 9.1.1.4.3, the components of hanger assemblies that directly attach to the pipe or to the building structure shall be listed

This item is deficient in that compliance is not documented in the submittal, E.G. This reviewer could find NO listing for Sammy Xpress fasteners on the UL website.

>>>>> Prior to occupancy, POR document compliance with 13:9.1.1.4.1 to the inspector. <<<<<<

Inspector verify.

6. 13:8.15.3.1 Protect sprinkler piping from freezing. Provide a method of maintaining permanent heat to all areas containing wet sprinkler piping subject to temperatures below 40 degrees F. Inspector to verify method of freeze protection.

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NOTE: THE FOLLOWING COMMENTS IDENTIFY ISSUES FOR INFORMATIONAL AND CAUTIONARY PURPOSES OR ISSUES THAT COULD NOT BE VERIFIED IN THE SUBMITTED DOCUMENTS.

7. This review applies to the riser(s), piping lay-out and sprinkler head locations, for compliance with NFPA 13, as shown on the drawings for the above referenced project. NFPA 25, Standard for the Inspection, Testing and Maintenance of Water-Based Fire Protection Systems is a requirement of this office and shall be adhered to.
8. This review applies to new work indicated in the drawings and does not apply to existing non-conforming conditions.
9. This submittal does not indicate a meter or backflow preventer in the supply piping. If a meter or backflow preventer is installed or is required, this review is rescinded.
- POR document conditions to the inspector
10. This review is based on a project supplied with:
- a) A water supply of 65 psi static and 25 psi residual, flowing 965 g.p.m.
- Drawing indicates 1/31/07 test by ASCO  
Calculations indicate test @ 3:00 PM
11. This review shall in no way permit or authorize any omissions or deviations from the specific requirements of the adopted codes, rules and regulations in accordance with R.S. 40:1574.1(B). Requirements cited in this review do not relieve the owner, licensed fire suppression system contractor, Professional Of Record, etc. from complying with all the applicable code requirements.
12. This fire protection system review is limited to the original plan review scope as per State Fire Marshal letter P0277358.

13. This review applies to smooth, flat ceilings only.
14. This review applies to noncombustible construction only.
15. **NOTE: Please enclose a copy of this letter with future submittals or other correspondence pertaining to this project.**

Changes to construction in the field which are not consistent with the reviewed documents are not authorized unless reviewed by this office for compliance with Code. Modifications to reviewed plans must be submitted to this office by the Architect/Civil Engineer for review prior to final inspection. If an Architect or Civil Engineer is not required by RS 37:155, revisions shall be submitted by the Owner. Submittals shall include plans, completed application, a minimum \$55.00 review fee, and a copy of the most current plan review letter.

**Occupancy of the project is permitted only upon the receipt of the applicable Contractor's Material & Test Certificate as per NFPA 13, Fire Alarm System Certificate and Description as per NFPA 72, or other certification as required by the applicable codes and a satisfactory inspection of the completed construction had been made by this office.**

To arrange for inspection of the project, please contact the District Office at the phone number below two (2) to three (3) weeks in advance. The plans stamped reviewed by this office must be available on job site at time of inspection. Certificate of completion must be provided to the inspecting Deputy for final inspection.

This review is valid for 180 days from the date of this letter. Construction permits must be issued and/or construction must commence within this time period.

REVIEWED BY:  
DONNA LEBLANC  
MECHANICAL ENGINEER

CC:  
Living Word Internationa Ministries  
American Sprinkler Co Inc  
Property Insurance Association\*  
St Tammany Fire Protection District No 1\*  
City Of Slidell\*  
New Orleans District\* 5042194600

RECEIVED

FEB 1 8 2001

STATE FIRE MARSHAL  
 FIRE MARSHAL USE ONLY  
 REVIEWER / BADGE NO. DATE RECEIVED

PLAN REVIEW APPLICATION

PROVIDE INFORMATION ON THE NAME OF THIS SPECIFIC PROJECT, TENANT, LEASE SPACE, SCOPE OF WORK, ETC.

1. Project Information

PART 1, REQUIRED FOR ALL SUBMITTALS ATTACH APPLICABLE CHECKLIST & FEE SCHEDULE PLEASE PRINT (BLACK OR BLUE INK ONLY)

Project Name: Living Word International Ministry  
 Street Address: 1000 Caruso Blvd.  
 Suite or Space No.: \_\_\_\_\_  
 City: Slidell State: LA Zip: 70461  
 Parish: St. Tammany Within city limits?  Yes  No

PROVIDE INFORMATION ON THE OVERALL STRUCTURE OR BUILDING THAT THIS PROJECT IS WITHIN, IF DIFFERENT THAN ABOVE.

2. Structure Information (Overall Building)

Building Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: LA Zip: \_\_\_\_\_  
 Parish: \_\_\_\_\_

3. Purpose of Application

PART 3, REQUIRED FOR ALL SUBMITTALS

System Type:  ARCHITECTURAL REVIEW  
 FIRE ALARM SYSTEM REVIEW  
 CHECK ONLY ONE:  Local  Auxiliary  \*Central Station  Proprietary Station  Remote Station  
 \*IF SYSTEM TYPE IS CENTRAL STATION, YOU MUST ATTACH COPY OF CENTRAL STATION UL LISTING TO THIS APPLICATION  
 KITCHEN HOOD WET CHEMICAL SUPPRESSION SYSTEM REVIEW  
 FIRE SUPPRESSION SYSTEM REVIEW SPRINKLER DRY CHEMICAL CLEAN AGENT HALON PAINT SPRAY BOOTH  
 HOOD WATER SUPPRESSION FOAM WATER  
 STORAGE TANK FOR FLAMMABLE OR COMBUSTIBLE LIQUIDS: NUMBER OF TANKS ABOVE GROUND \_\_\_\_\_ BELOW GR \_\_\_\_\_  
 Review Type:  INITIAL CHECK HERE ONLY IF YOUR PROJECT DOES NOT MATCH ONE OF THE REVIEW TYPES, BELOW. IF PROJECT IS A SYSTEM REVIEW, THEN PROVIDE PREVIOUS ARCHITECTURAL REVIEW NUMBER. P0: 277358  
 PRELIMINARY  
 RE-SUBMITTAL PROVIDE PREVIOUS PROJECT REVIEW NUMBER OR PRELIMINARY REVIEW NUMBER. P0: \_\_\_\_\_  
 RENOVATION/ADDITION IF CHANGE OF OCCUPANCY, THEN CHECK NEXT LINE. PREVIOUS ARCHITECTURAL REVIEW NUMBER, IF APPLICABLE P0: \_\_\_\_\_  
 CHANGE OF OCCUPANCY WITH OR WITHOUT RENOVATIONS, CHECK HERE. PROVIDE PREVIOUS ARCHITECTURAL REVIEW NUMBER, IF APPLICABLE P0: \_\_\_\_\_  
 FOUNDATION ONLY  
 SHELL ONLY  
 MOBILE/MODULAR

PROVIDE COST AND SQUARE FOOTAGE AREAS OF THIS PROJECT OR SYSTEM - FOR SYSTEMS, ENTER ONLY SYSTEM COST

4. Project Details

PART 4, REQUIRED FOR ALL SUBMITTALS

New Sq Ft: \_\_\_\_\_ Existing Sq Ft: \_\_\_\_\_ Renovated Sq Ft: \_\_\_\_\_  
 Estimated Cost of this Project: \$ \_\_\_\_\_  
 Calculated Fee Attached: \$ \_\_\_\_\_  
 FOLLOWING OCCUPANCIES REFER TO OVERALL STRUCTURE OR BUILDING: 8012 MONEY ORDERS, CASHIER'S CHECKS, CERTIFIED CHECKS, AND COMPANY CHECKS ARE ONLY ACCEPTED (NO PERSONAL CHECKS ACCEPTED, EFFECTIVE 9-1-00) ATTACH CHECKLIST  
 SELECT ONE OR MORE OF THE FOLLOWING OCCUPANCIES AND PRINT BELOW:  
 ASSEMBLY EDUCATIONAL DAY CARE HEALTH CARE DETENTION HOTEL DORMITORY APARTMENT LODGING/ ROOMING  
 BOARD AND CARE MERCANTILE BUSINESS INDUSTRIAL STORAGE UNUSUAL  
 Main Occupancy: \_\_\_\_\_ Sq Ft ⇨ \_\_\_\_\_  
 Secondary: \_\_\_\_\_ Sq Ft ⇨ \_\_\_\_\_  
 Thirdly: \_\_\_\_\_ Sq Ft ⇨ \_\_\_\_\_

PROVIDE INFORMATION ON THE OWNER FOR THE OVERALL STRUCTURE OR BUILDING FOR THIS PROJECT

### 5. Owner Information

PART 5, REQUIRED FOR ALL SUBMITTALS

Owner:  
Name of Firm:  
Mailing Address:

LAST NAME FIRST NAME INITIAL

City:  
email:  
Telephone No:

State: Zip:

Fax No:

PROVIDE INFORMATION ON THE TENANT FOR THIS SPECIFIC PROJECT, IF DIFFERENT THAN OWNER

### 6. Tenant Information

Tenant:  
Name of Firm:  
Mailing Address:

LAST NAME FIRST NAME INITIAL

City:  
email:  
Telephone No:

State: Zip:

Fax No:

PROVIDE INFORMATION ON THE PREPARER OF THE FIRE ALARM, SPRINKLER, OR FIRE SUPPRESSION SHOP DRAWINGS

### 7. Preparer of Shop Drawings Information

- Sub-Contractor  
 Engineer

Preparer:  
License No:  
Name of Firm:  
Firm License No:  
Mailing Address:

LAST NAME FIRST NAME INITIAL

TAYLOR, MARK S

SC5072 Nicel Level:  1  2  3  4

AMERICAN SPRINKLER CO. INC.

SF5029

P.O. BOX 647

City:  
email:

METAIRIE State: LA Zip: 70004-0647

mstaylor@i-55.com

Telephone No:

(504)837-0572 Fax No: (504)837-3253

PROVIDE INFORMATION ON THE PROFESSIONAL OF RECORD ON THIS PROJECT

### 8. Professional of Record Information

- Architect  
 Civil Engineer  
 EE / ME Engineer

Professional:  
LA License No:  
Name of Firm:  
Address:  
City:  
email:  
Telephone No:

LAST NAME FIRST NAME INITIAL

ONLY PROVIDE CHANGES BELOW, THAT DIFFER FROM INFORMATION AT STATE BOARD WEBSITE

State: Zip:

Fax No:

CHECK ONLY ONE: IS THIS PROJECT STATE OWNED, MUNICIPAL (FEDERAL, PARISH, CITY) OWNED, OR OTHER (PRIVATE OWNED)?

### 9. Government and Municipal Projects

- State Owned Project  
 Municipal Project  
 Other

PART 9, REQUIRED FOR ALL SUBMITTALS

IF A REVIEW FOR THE NATIONAL ENERGY CODE IS PART OF THIS PROJECT, THEN CHECK APPLICABLE BOX AT RIGHT:

### 10. Energy Code Review

- YES, ENERGY CODE PACKAGE ATTACHED  
 NO ENERGY CODE PACKAGE ATTACHED

CHECK ALL ITEMS THAT APPLY TO THIS PROJECT OR EXISTING BUILDING:

- New Construction  Special Locking  High Rise Building  
 Voice Evacuation  Tenant Buildout  High Rise Tenant Buildout  
 Fire Alarm System  Sprinkler System  Kitchen Hood

NUMBER OF FLOORS \_\_\_\_\_  
PROJECT ON WHICH FLOOR(S) \_\_\_\_\_

IF BOARD AND CARE USE, THEN CHECK ONE  
IF DAY CARE USE, THEN CHECK ONE

- PROMPT EVACUATION CAPABILITY 3 TO 12 CLIENTS  SLOW EVACUATION CAPABILITY 13 OR MORE CLIENTS  IMPRACTICAL EVACUATION CAPABILITY

IF HOTEL, DORM, LODGING OR ROOMING, THEN CHECK ONE

- ACCOMMODATIONS FOR MORE THAN 16 PEOPLE  ACCOMMODATIONS FOR 16 OR LESS PEOPLE

PLEASE COMPLETE OTHER SIDE ⇨



STATE OF LOUISIANA  
DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS

OFFICE OF STATE FIRE MARSHAL

CERTIFICATE OF COMPLETION

|      |
|------|
| DATE |
|------|

STATE FIRE MARSHAL PROJECT P0 \_\_\_\_\_ SYSTEM TYPE \_\_\_\_\_  
STATE FIRE MARSHAL PROJECT P0 \_\_\_\_\_ SYSTEM TYPE \_\_\_\_\_  
STATE FIRE MARSHAL PROJECT P0 \_\_\_\_\_ SYSTEM TYPE \_\_\_\_\_  
STATE FIRE MARSHAL PROJECT P0 \_\_\_\_\_ SYSTEM TYPE \_\_\_\_\_

Please list all projects pertaining to this building, scheduled for review at this time. System type refers to Architectural, Fire Alarm, Kitchen Hood/Wet Chemical Suppression, Fire Suppression, or Storage Tank.

To arrange for inspection of the project, please contact the district office two (2) to three (3) weeks in advance. To verify inspection district and phone number please refer to the cc list on the last page of the State Fire Marshal review letter. The plans stamped reviewed by this office must be available on job site at time of inspection. This Certificate Of Completion must be provided to the inspecting deputy at final inspection.

This is to certify that,

|                                |       |          |
|--------------------------------|-------|----------|
| PROJECT TITLE FROM APPLICATION |       |          |
| PROJECT ADDRESS                |       |          |
| CITY                           | STATE | ZIP CODE |

was periodically observed by me, by my consultants, and/or by others in my employ during construction and, to the best of my knowledge, information and belief, has been completed in accordance with the safety provisions which were shown in the plans and specifications previously reviewed by the Fire Marshal.

UNDER PENALTY OF LAW FOR FALSE STATEMENTS, I,

NAME OF ARCHITECT OR ENGINEER IF  
REQUIRED, OTHERWISE OWNER

PRINTED NAME

SIGNATURE

ARCHITECT/CIVIL ENGINEER LICENSE  
NUMBER

CERTIFY ALL STATEMENTS CONTAINED HEREIN ARE, TO THE BEST OF MY  
KNOWLEDGE, INFORMATION AND BELIEF, TRUE AND CORRECT

LAC 55:V:307 OBSERVATION OF CONSTRUCTION

A. For a structure which by law may only be constructed with plans prepared and certified by a licensed architect or civil engineer, it shall be the duty of the owner of such a structure to provide for periodic observation of the construction of the structure to determine if the work is proceeding in accordance with the plans and specifications as approved by the fire marshal. The observations shall be performed by a registered architect or a registered civil engineer.

B. Upon completion of such work, where the law requires the owner to engage an architect or registered civil engineer, the owner shall furnish to the fire marshal a certificate signed by a registered architect or registered civil engineer stating that the periodic observations have been made and that to the best of the architect's or engineer's knowledge, information and belief, the work was completed in accordance with those fire safety standards and regulations stipulated in the plans and specifications previously approved by the fire marshal. When the owner has not engaged an architect or registered civil engineer, and the same is not required by law, the owner must submit the certificate of completion when appropriate, but always under his signature.

C. Occupancy of a structure, watercraft or movable prior to furnishing a certificate to the fire marshal as required under this regulation is expressly forbidden by the fire marshal, unless and until a satisfactory inspection has been made by the fire marshal or his certified representative.

D. In order to comply with the requirements of §307.B, the owner must submit to the fire marshal the following certificate completed by the architect, civil engineer, or, if neither is required by law, the owner.