

Additional Documentation must accompany this request
See Memoranda 2000-15, 2006-03 and 2006-04 for instructions

SPECIAL LOCKING ARRANGEMENTS REQUEST FOR INSTALLATION

NOTE: New licensing requirements are effective August 15, 2003

DATE OF APPLICATION
STATE FIRE MARSHAL ARCHITECTURAL REVIEW NUMBER
PO

LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS
OFFICE OF STATE FIRE MARSHAL
8181 INDEPENDENCE BOULEVARD
BATON ROUGE, LOUISIANA 70806
PHONE (225) 925-4920 FAX (225) 925-4414
WEB SITE: www.dps.state.la.us/sfm

REVIEW FEE
\$20.00

SHREVEPORT
888-634-7682

NEW ORLEANS
888-634-7689

LAFAYETTE
800-554-0006

BATON ROUGE
800-256-5452

HEALTH CARE DIVISION

CONTACT THE INDICATED DISTRICT OFFICE FOR FINAL INSPECTION:

LOCKING SYSTEM TYPE(S)

CHECK ALL THAT APPLY

- ACCESS-CONTROLLED EGRESS DOOR(S) SPECIAL LOCKING ARRANGEMENTS IN HEALTHCARE OCCUPANCIES
- DELAYED-EGRESS LOCK(S) ELECTRIC STRIKE(S)
- MAGNETIC LOCK RELEASING DEVICE(S)

PROJECT INFORMATION:

PROJECT TITLE (Name of Business) Peoples Health Network 3 LAKEWAY			
NAME OF BUILDING/SHOPPING CENTER LAKEWAY 3			
PHYSICAL LOCATION OF PROJECT	ADDRESS (Street/Suite) 3838 N. Causeway Blvd.		
Inside City Limits <input checked="" type="checkbox"/>	CITY (In or Near) Metairie	ZIP CODE 70009	PARISH Jefferson
Outside City Limits <input type="checkbox"/>			
OCCUPANCY CLASSIFICATION PER NFPA 101:			

OWNER INFORMATION: (or Professional of Record if applicable)

NAME Rick Tittle	PHONE (504) 461-4141
MAILING ADDRESS (Street/P.O. Box) 200 W. Esplanada Ave. Suite 600	FAX ()
CITY Kenner	STATE LA ZIP CODE 70065

LOCKING SYSTEM CONTRACTOR

FIRM NAME Sterling Communications Technologies, Inc.	FIRM LICENSE # LF1399
EMPLOYEE NAME David Bushnell	EMPLOYEE LICENSE # LE9239
PHONE NO (303) 384-3404	FAX NO (303) 384-3405

BUILDING INFORMATION:

DOES THE BUILDING HAVE A FIRE ALARM SYSTEM? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO DOES THE BUILDING HAVE A SPRINKLER SYSTEM? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO IS THE SPRINKLER SYSTEM SUPERVISED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO ARE THE AFFECTED DOORS AT LEAST 7'-0" IN HEIGHT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	SYSTEM DESCRIPTION: Install access control for entry to Peoples Health Network new office space.
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THIS EXEMPTION REQUEST IS VALID FOR 30 DAYS FROM DATE OF RESPONSE.
INSTALLATION MUST COMMENCE WITHIN THIS TIME PERIOD

Y	FOR FIRE MARSHAL USE ONLY	PROJECT NUMBER	REVIEW ARCHITECT	DATE RECEIVED
	<input type="checkbox"/> ACCEPTED <input type="checkbox"/> DENIED RESUBMIT	Comments		