The effective Date of this form is April 1, 2003

NOTICE: Please be advised that this form rescinds the February 25, 1998 Memorandum

Non-Required Fire Alarm Systems
REQUEST FOR EXEMPTION

DATE of Application:
STATE FIRE MARSHAL ARCHITECTURAL REVIEW NUMBER **PO**

LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS
OFFICE OF STATE FIRE MARSHAL
7919 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

PROJECT TITLE (Name of Business)			
NAME OF BUILDING/ SHOPPING CENTER			
PHYSICAL LOCATION OF PROJECT Inside City Limits ☐ Outside City Limits ☐	**ADDRESS (Street/Suite)**		
	CITY (In or Near)	**ZIP CODE**	**PARISH**

PROFESSIONAL OF RECORD (P.O.R.) (If none, then MUST be Owner)

NAME			**PHONE** ( )
MAILING ADDRESS (Street/P.O. Box)			**FAX** ( )
CITY	**STATE**	**ZIP CODE**	**P.O.R. LICENSE NO**

FIRE ALARM SYSTEM INFORMATION

OCCUPANCY CLASS (NFPA 101)	**AREA COVERED BY SYSTEM (SQ.FT.)**	
TYPE OF ALARM SYSTEM OR SERVICE ☐ LOCAL ☐ REMOTE STATION ☐ OTHER ☐ AUXILIARY ☐ PROPRIETARY ☐ EMERGENCY VOICE/ ALARM SERVICE ☐ CENTRAL STATION	**NUMBER OF FLOORS IN THE BUILDING**	**SQUARE FOOTAGE PER FLOOR**
DESCRIPTION OF FIRE ALARM SYSTEM		

SYSTEM CONTRACTOR / ENGINEER / DESIGNER (not the Professional Of Record)

NAME	**EMPLOYEE LICENSE NO.**	**NICET LEVEL**
FIRM NAME	**FIRM MAILING ADDRESS**	
CONTACT NAME		
FIRM LICENSE NUMBER	**PHONE NO** ( )	**FAX NO** ( )

THIS EXEMPTION REQUEST IS VALID FOR 30 DAYS FROM DATE OF RESPONSE.
CONSTRUCTION PERMITS MUST BE ISSUED AND/OR CONSTRUCTION COMMENCED WITHIN THIS TIME PERIOD.

REPLY	**FOR FIRE MARSHAL USE ONLY**	**DATE RECEIVED**	**PROJECT NUMBER**	**REVIEW ARCHITECT**
☐ **Accepted** ☐ **Denied**	**Comments**			

xnrfasys 4/1/2003