



STATE OF LOUISIANA
DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS

OFFICE OF STATE FIRE MARSHAL
CERTIFICATE OF COMPLETION

DATE
7/10/06

STATE FIRE MARSHAL PROJECT P0 302763 SYSTEM TYPE Arch
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 <u>Quiznos 9880</u>		
PROJECT ADDRESS <u>2801 Magazine St.</u>		
CITY <u>New Orleans</u>	STATE <u>LA</u>	ZIP CODE <u>70115</u>

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

Emmett G. Dammow

SIGNATURE

[Signature]

ARCHITECT/CIVIL ENGINEER LICENSE
NUMBER

8796

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.

Automatic Sprinkler System Modifications REQUEST FOR EXEMPTION

PLEASE PRINT CLEARLY OR TYPE INFORMATION

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

DATE OF APPLICATION 6/27/06
STATE FIRE MARSHAL ARCHITECTURAL REVIEW NUMBER PO 302763

PROJECT TITLE (Name of Business) QUIZ NOS 9880	PROJECT FLOOR 1
NAME OF BUILDING/SHOPPING CENTER N.A.	TOTAL NO FLOORS IN BUILDING 1
PHYSICAL LOCATION OF PROJECT Inside City Limits <input checked="" type="checkbox"/> Outside City Limits <input type="checkbox"/>	EXEMPTION RESUBMITTAL? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
ADDRESS (Street/Bulld) 2201 MAGAZINE ST	PREVIOUS REVIEW NUMBER
CITY (In or Near) N.O.	ZIP CODE 70115
	PARISH ORLEANS

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

NAME EMMETT DAMON ENGINEERING	PHONE (985) 49-5832
MAILING ADDRESS (Street/P.O. Box) 1095 FLORIDA AVE	FAX () N.A.
CITY SULLY	STATE LA
	ZIP CODE 70458
P.O.R. LICENSE NO. LA # 8796	EMAIL ADDRESS N.A.

SPRINKLER SYSTEM INFORMATION - MERC G

OCCUPANCY CLASS (NFPA 101 Chapter) RESTAUR	HAZARD CLASS (PER NFPA 13) ORD. II	PUMP INFORMATION PRESSURE (psi) NA FLOW (gpm) NA	PLACARD INFORMATION .2 GPM/FT OVER 1600 SF WITH DEMAND OF 47 SF AT 320 GPM AT REMOTE
SYSTEM TYPE <input checked="" type="checkbox"/> WET <input type="checkbox"/> DRY	DESIGN TYPE <input checked="" type="checkbox"/> HYDRAULIC <input type="checkbox"/> PIPE SCHEDULE	MAIN REDUC. VLV. SET NA psi PRESS. REDUC. VLV. SET NA psi	
WATER SOURCE <input checked="" type="checkbox"/> MUNICIPAL <input type="checkbox"/> PRIVATE	WATER SUPPLY DATA (psi) 54	RESIDUAL (psi) 46	TEST DATE 6/1/06
TOTAL NUMBER OF EXEMPTION SPRINKLERS 18	AREA COVERED BY THIS EXEMPTION (sq. ft.) 1810	COST OF WORK DO NOT DO \$ 2900.-	
DESCRIPTION OF WORK RECUT 1" DROPS & 1" ARM OVERS, SHORTER TO FIT NEW CEILING FLUSH V38 -> WPT			
SPRINKLER MFR VICTAULIC	MODEL 770A	TYPE CHROME	TEMPERATURE 155°
EFFECT ON SYSTEM NO CHANGE			

SPRINKLER SYSTEM CONTRACTOR / ENGINEER / DESIGNER (not the POR)

NAME JOHN ROCKHOLD	EMPLOYEE STATE LICENSE NO. SC 5124
FIRM NAME H-A-A SPRINKLER	FIRM MAILING ADDRESS 9437 MARK LN
CONTACT NAME JOHN ROCKHOLD	RIVER RIDGE, LA 70123
FIRM LICENSE NUMBER SF 5052	PHONE NO. (504) 737-5190
	FAX NO. (504) 737-5190
	EMAIL ADDRESS N.A.

FOR FIRE MARSHAL USE ONLY	DATE RECEIVED 6-28-06	PROJECT NUMBER 311349	REVIEW ARCHITECT J. MOORE
	<input checked="" type="checkbox"/> Accepted <input type="checkbox"/> Denied Comments		

CC Approval Sprinkler Contractor SPM District Fire Prevention Bureau SPM Health Care High Rise File Rerouting File

HEALTH CARE
 NEW ORLEANS 888-634-7682
 LAFAYETTE 800-554-0006
 BATON ROUGE 800-256-5452
 CONTACT THE INDICATED DISTRICT OFFICE FOR FINAL INSPECTION:

SFM-308 (03) - 6/1/00

6/30/06
PAID TO