

DAMMON ENGINEERING, INC.
dammonengineering.com

ARCHITECTS DESIGN STUDIES ENGINEERS

RECEIVED

1095 Florida Ave.
Slidell, LA 70458

P.O. Box 2830
Slidell, LA 70459

985-649-5832
FAX 985-641-5950

EXPERT WITNESS
FEB 11 2008

STATE FIRE MARSHAL
ARCHITECTURAL SECTION

February 11, 2008

LA. S.F.M. PLAN REVIEW

Mr. Don Zeringue, Chief Architect
Louisiana Office of State Fire Marshal
8181 Independence Blvd.
Baton Rouge, LA 70806

PO# _____ REVIEWER **Dantz**

READING FILE DATE MO _____ YR _____

ORIG. TO. APPL. _____ OWNER _____

SENDER _____

CC'S _____

COPY WHAT PGS. _____

BR. _____ N.O. _____ ALEX. _____ LAF. _____

SERVE. _____ HC FILE _____ HO DEPT _____

DET FILE _____ HR FILE _____ NON-REQ. SYST. _____

OTHER _____

RE: PO 322544
Grande Pointe 2 Apts.
3601 Kaliste Saloom Rd.
Lafayette, LA 70508

Dear Mr. Zeringue,

As the Professional of Record for the above referenced project, I am requesting to be allowed to begin installation of the sprinkler system prior to completion of the plan review process. My reason for this request is that construction is moving very quickly and we need to begin installation immediately.

This project is an apartment building.

I fully understand that the granting of this request by your office implies no approval of the work which we are requesting be allowed to commence. I further understand that the installation is being commenced entirely at the risk of the contractor and that any deficiencies will be corrected prior to use of the facility or equipment.

There will be no occupancy of the facility (or use of the equipment, appliances, computers, etc.) until such time as the review is complete and an inspection has been performed by the Office of State Fire Marshal.

Sincerely,

Chuck Dammon
Dammon Engineering, Inc.

Dammon Engineering
2/12/08

PROJECT HAS NOT BEEN REVIEWED BY THIS OFFICE.
INSTALLATION MAY COMMENCE AT YOUR OWN RISK.
OCCUPANCY SHALL NOT BE ALLOWED UNTIL SUCH
TIME AS REVIEW AND INSPECTION ARE COMPLETE.

1818

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ARCHITECTS

CONSULTING DESIGN

STUDIES

ENGINEERS

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ORIG. TO: SENDER _____

APPL. _____ OWNER _____

CC'S _____

COPY WHAT PGS. 1

B.R. _____ N.O. _____ ALEX. _____ LAF.

SHREVE _____ HC FILE _____ HC DEPT. _____

DET FILE _____ HR FILE _____ NON-REQ. SYST. _____

OTHER _____

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2/12/08

337-988-0840