KITCHEN HOOD SUPPRESSION SYSTEM



(NEW OR MODIFICATION) PERMIT APPLICATION CITY OF MERCED 678 W. 18TH STREET MERCED, CA 95340 INSPECTION SERVICES DEPARTMENT

| PERMIT # | DATE: | APN # | |
|--|-------------|---|------------------------------------|
| JOB ADDRESS: | | | |
| OWNER: | | ADDRESS: | |
| PHONE: | FAX: | EMAIL: | |
| TENANT: | | PHONE: | |
| FAX: | EMAI | L: | |
| CITY: | STAT | E: | ZIP CODE: |
| CONTRACTOR NAME/A | ADDRESS: | | |
| CITY/STATE/ZIP: | | PHONE: | |
| FAX: | EM | IAIL: | |
| CSCL: | CLASS: | CITY BUS. LIC. #: | |
| DESIGNER'S NAME/AD | DRESS: | | |
| CITY/STATE/ZIP | | PHONE: | |
| FAX: | EMAIL: | | |
| PRINT NAME: | | | |
| SIGNATURE: | | OWNER () CON | TRACTOR()AGENT() |
| | | TO MAKE 'RED LINE' COMMEN KPEDITE THE PLAN REVIEW PR | NTS ON THE PLANS WHICH HAVE OCESS. |
| DEPOSIT: \$ | RECEIPT: | RECEIVED | O BY: |
| #OF PLAN SETS SUBMITT | TED: F (MIN | NIMUM 2 SETS) | |
| NOTES: | | | |
| ROUTED BY: | | | |
| | FOR | OFFICE USE ONLY | Date stamp here ONLY |
| TOTAL FEES | | | P |
| BUILDING PERMIT \$ ENGINEERING FEES \$ | <u> </u> | | |
| CUSTOMER NOTIFICATION | | | |

COMMERCIAL COOKING HOOD FIRE SUPPRESSION SYSTEM SUBMITTAL GUIDELINES

The following are the minimum requirements for submittal of range hood & fixed pipe fire extinguishing systems.

NOTE: CAD or electronic plans are preferred, but not required provided the minimum information listed below is provided on the proposed plans.

| Requ □ | irements for Drawings 1. A plan of the system showing ducts, appliances, nozzles and fusible links. Plans shall also show the piping of the system, and the location of the system within the premises. This plan must be to scale. |
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| | 2. The plans shall clearly indicate the type of system(s) and sizes of cylinders. |
| | 3. Plans shall clearly indicate and show the type and number of automatic fuel shut off devices. |
| | 4. Plans shall clearly indicate and show the number and type (in degrees F°) of the fusible links. |
| | 5. Plans shall show and clearly indicate the manufacturer's nozzle numbers and type of nozzles. |
| | 6. Plans shall clearly indicate the type of appliances protected with their surface dimensions (in inches). |
| | 7. Plans shall clearly indicate, and show the HOOD and Duct dimensions (in inches/feet) |
| | 8. Plans shall also clearly indicate the following; |
| | a. 16-inch space between fryers, and open flame appliances. |
| | b. Approved baffle type filters required. |
| | c. Whether the system is single or tandem. |
| | d. The system installed requires semi-annual and annual service (to include changing of the fusible links annually) by the "manufacturer-approved" contractor/installer. |
| | e. All other requirements by the Authority Having Jurisdiction. |
| | 9. The plans shall also have the complete name and address of the authorized CSLB Licensed C-16 contractor. |

| 10. The plans shall clearly indicate the complete name, address, and telephone number of the premises where the system is being installed. |
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| 11. Plans must meet the minimum requirements as contained and outlined in NFPA 96 Standard for Ventilation Control & Fire Protection of Commercial Cooking Operations (2004 Edition) and the California Mechanical Code (2007 Edition). |

DEVIATIONS, ADDITIONS, OR DELETIONS FROM ORIGINAL DRAWINGS Any deviations from submitted shop drawings (i.e. removal, relocation, or addition of devices) that have not been approved prior to any changes being made will result in failure of system, and occupancy of the building covered by the project. Additionally, a re-submittal of shop drawings will be required. Resubmitted drawings shall indicate any and all device removals, additions, and deletions.