



TOWN OF MILFORD

FIRE DEPARTMENT

39 SCHOOL STREET
MILFORD, NEW HAMPSHIRE 03051



Bureau of Fire Prevention & Investigation
(603) 249-0680

Fire Sprinkler/Standpipe System Plan Review Application

All applicable sections of the form shall be completed prior to submission.
Sections that are not applicable to the project shall be marked N/A. Applications
that are deemed incomplete will be returned and project review will not begin.

Building Information

Tax Map and Lot #:		Building Address:	
Property Owner Name:			
Property Owner Address:			
Property Owner Phone:		Property Owner Email:	
Type of Building:		Occupancy Classification:	
# of Levels Above Grade:	# of Levels Below Grade:	Total Square Feet:	
Construction Type:	Commodity Classification:	Hazard Classification:	

Installer and Designer Information

Installation Company:		Address:	
Project Manager or Field Supervisor Name:		Phone:	
Project Manager or Field Supervisor Email:			

Designer Name:	Phone:
Designer Email:	

Systems Information

# of Wet Systems:	# of Dry Systems:	# of Preaction Systems:	# of Deluge Systems:
Total # of Sprinklers:	# of Valves:	# of Flow Alarms:	# of Tamper Switches:
# of Fire Pumps:	# of Water Tanks:	Total Capacity of Tanks (U.S. Gal.):	

Sprinkler Inventory

MFG	SIN	Count	Model/Description	Temp.	Finish	K	Size

Water Supply Flow Test Data

Flow Test Date:	Flow Test Location:	Data Source:
Hydrant Static Pressure:	Hydrant Residual Pressure:	Hydrant Flow (GPM)
Pump Static Pressure:	Pump Residual Pressure:	Pump Flow (GPM)

Submitter Information

Submitted By:	Submitter Title:	Date Submitted: