South Adams County Fire Department



6050 Syracuse St.

Commerce City, CO 80022

Phone: (303) 288-0835 Fax: (303) 288-5977

Fire Prevention Bureau

One and Two Family Dwellings Residential Sprinkler Application Notice: All plan submittals will be a Minimum of a Thirty (30) business day review process

Minimum fee is required during submittal please see Inspection Fee Schedule for more information

Project Information								
Project Name:			Date of Submittal:					
Project Address:			Suite #:					
Project Sq. Ft.:		Number of Stories:						
Building Dept:	□Adams County	Building Department						
(check one)	City of Commerce City	Permit #:						
Type of System:		Code Edition:						
Home Type:	□Single Family □ Tow		Duplex					
# of Devices:		Backflow :						
Description of Project:								
	tting Party Information		Owner or Lessee Information					
Contact Name:		Contact Name	:					
Title:		Title:						
Company Name:		Company Na	ne:					
Address:		Address:	Address:					
City, State, Zip:		City, State, Zi	City, State, Zip:					
Phone:	Fax:	Phone:	Fax:					
Email:		Email:	· · ·					
Payment:								
We accept payment in the form of Check and Credit Card. Please indicate below how you would like to pay:								
			Credit Card *					

Fire District Use Only:									
Project # :		Plan Review/ Permit # :			Reviewed by:				
Description:									
Plan Review Fee:	Amount Paid:	Date Paid:	Level of Consulting:	Ho	ours of Review:	Received By:			
Minimum Fees:									
Remaining Fees:									