



Business name: _____

Address: _____

Bldg/suite #: _____ City: _____ Zip code: _____

Responsible party: _____ Phone: _____

Email: _____ FIR #: _____

Square footage: _____

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> Class 1 commodity | <input type="checkbox"/> Class 2 commodity | <input type="checkbox"/> Class 3 commodity | <input type="checkbox"/> Class 4 commodity |
| <input type="checkbox"/> Group A plastics | <input type="checkbox"/> Group B plastics | <input type="checkbox"/> Group C plastics | <input type="checkbox"/> Single row rack |
| <input type="checkbox"/> Double row rack | <input type="checkbox"/> Multi-row rack | <input type="checkbox"/> Drive-in rack | <input type="checkbox"/> Push back rack |
| <input type="checkbox"/> Rubber tires | <input type="checkbox"/> Roll paper | <input type="checkbox"/> Commodity affidavit | <input type="checkbox"/> Fire alarm |
| <input type="checkbox"/> HMIS | <input type="checkbox"/> F.M. 200 | | |

Total Designated Storage Area	Sq. Feet
1. 4 ft. Aisles	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. 8 ft. Aisles	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Usable storage height (top of the box)	_____ Feet
4. What is the ceiling height?	_____ Feet
5. Required density per NFPA 13	_____ Feet
6. Pile volume	_____ Feet
Sprinkler Information	Description
7. Does the building have a sprinkler system?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Provide the density of the sprinkler system. (0.00/0000 gpm/ft ² over maximum floor area) (This can be found on the sprinkler riser.) <input type="checkbox"/> OP. PSI	_____
9. What type of sprinkler system is in the building?	<input type="checkbox"/> ESFR <input type="checkbox"/> STANDARD
10. Provide the K-Factor and Head Temperature.	

	Indicate Yes or No	Description and Quantities
11. Required to provide mechanical smoke removal system?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12. Provide smoke and heat vents?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13. Required to provide small hose connectors (Class 2)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
14. Provide smoke detection system?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15. Provide curtain boards?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
16. Provide building access?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17. Pallet racks?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
18. Transverse flue spaces?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
19. Longitudinal flue spaces?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
20. Solid shelves?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
21. Provide column protection?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
22. Provide in-rack sprinklers?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
23. Lower storage height?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
24. Increase density at roof deck?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Indicate Yes or No	Description and Quantities
25. Flammable or combustible liquids?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
26. Aerosol products?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
27. Compressed or liquefied gas cylinders?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
28. Any other type of hazardous materials?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
29. Spray booths and/or mixing rooms?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
30. Clean room(s)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
31. Woodworking operations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
32. Welding and/or torch cutting operations?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
33. Rubber or plastic products?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Additional comments: _____

Print name: _____ Company title: _____

Signature: _____ Date: _____