

Proposed Equivalency to Code REQUEST FOR APPEAL

DATE OF APPLICATION
STATE FIRE MARSHAL ARCHITECTURAL REVIEW NUMBER
PO

**LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS
OFFICE OF STATE FIRE MARSHAL**
 8181 INDEPENDENCE BOULEVARD
 BATON ROUGE, LOUISIANA 70806
PHONE (225) 925-4920 FAX (225) 925-4414
 WEB SITE: www.dps.state.la.us/sfm

REVIEW FEE
See Schedule
Below

PROJECT TITLE (Name of Business)			
NAME OF BUILDING/ SHOPPING CENTER			
PHYSICAL LOCATION OF PROJECT	ADDRESS (Street/Suite)		
Inside City Limits <input type="checkbox"/>	CITY (In or Near)	ZIP CODE	PARISH
Outside City Limits <input type="checkbox"/>			

PROFESSIONAL OF RECORD (P.O.R.) (If none, then MUST be Owner)

NAME		PHONE ()	
MAILING ADDRESS (Street/P.O. Box)		FAX ()	
CITY	STATE	ZIP CODE	
P.O.R. LICENSE NO	EMAIL ADDRESS		

The NFPA 101 Life Safety Code and adopted national fire codes require fire protection features that will provide a minimal acceptable level of safety. The features required by these codes may be altered, substituted, or omitted, if alternative features are proposed that will provide a level of safety equivalent to that provided by compliance with specific requirements of these codes.

This office is required by LA R.S. 40:1737 to consult with the Office of Rehabilitation Services regarding interpretive issues or appeals pertaining to handicapped accessibility.

APPEAL REQUEST TYPE

CHECK ONLY ONE OF THE FOLLOWING

\$.25 for handicapped accessibility appeals (Multiple issues are allowed per letter)
 NOTE: THIS APPLICATION IS NOT VALID FOR ACCESSIBILITY APPEALS WHERE FEDERAL FUNDING IS INVOLVED.

\$.100 for life safety / fire code appeals (Multiple issues are allowed per letter). Add \$100 for appeals including smoke generation and/or timed egress flow analysis review.

\$.50 for subsequent appeals of the same issue or pertaining to the same facility.

\$.100 for other appeals and Product Evaluations.

Attach this form to your documentation submitted for consideration in support of your appeal. Include a copy of the Plan Review letter or Inspection form where you appeal references a violation cited by this office. For appeals in advance of submittal, provide complete documentation supporting your request.

DATE RECEIVED

FOR FIRE MARSHAL USE ONLY	PROJECT NUMBER	REVIEW ARCHITECT
----------------------------------	----------------	------------------