**PROJECT**

*Name*

*Address City Contact Phone #*

**DIMENSIONS**

Length

Width

Height

Stories at or above grade

Stories below grade

**KNOX BOX**

Location(s)

**STANDPIPE**

FDC Location(s)

**RISERS**

FDC Location(s)

**SHUT-OFFS**

Electrical Main Location

Gas Main Location

Water Main Location

Sprinkler Main Location – if applicable

**ALARMS**

Panel Location(s)

Annunciator Location(s)

**DETECTOR TYPE(S)**

[ ]  Smoke

[ ]  Heat

[ ]  Combination smoke and heat in a single unit

[ ]  Sprinkler, water flow

Other:

*\*\* It shall be the responsibility of the General Contractor listed above to supply and ensure all of the above applicable information is accurate and complete in its entirety and be provided to West Licking Fire*