



City of Moore Fire Marshal
 2400 S. Fritts Blvd.
 Moore, OK 73160
 (405) 793-3473 email: fm@cityofmoore.com

Fire Suppression Application

Project Name: _____ Date: _____

Project Address: _____ Number of Stories: _____

Total Square Footage: _____ Occupant Load: _____

Construction Type: IA IB IIA IIB IIIA IIIB IV-HT VA VB

Occupancy Type: A B E F H I M U R S

Fire Suppression Designer: _____ Phone # _____

License #: _____ Email: _____

Fire Alarm Installed Yes No

Fire Suppression Installed Yes No

8 Devices or Less: Yes No (No Plans Required) Scope of work required to be submitted with application

I, the undersigned, am submitting all items required for review of fire suppression to the City of Moore Fire Marshal's Office.

Submitter Name Representing _____
Fire Suppression Company Name Company License # _____

Plans can be picked up at the Fire Marshal's Office upon completion. **(Plans must remain on the job site until approval of final inspection by the Fire Marshal's Division.)**

Contact Person: _____ Phone #: _____