

KIDS #

REQUEST FOR REVIEW C.2.2.A

11/2004



K A N S A S

DAN MCLAUGHLIN
FIRE MARSHAL

OFFICE OF THE KANSAS STATE FIRE MARSHAL

MARK PARKINSON
GOVERNOR

REQUEST FOR PROJECT REVIEW – PAGE 2 OF 2 – K.A. R. 22-1-7 COMPLIANCE ATTESTATION

| | |
|-------------|----------------------|
| DATE | FACILITY NAME |
|-------------|----------------------|

1. Design architect or engineer to check the **Met** column to indicate compliance to KFPC & K.A.R. 22-1-7.
2. Design architect or engineer to check the **N/A** column to indicate Not Applicable for facility to be code compliant.

| | | | (c) The following narrative is required on code footprints: | | |
|-----|-----|---|---|-----|---|
| Met | N/A | (a) The following shall be provided on each code footprint: | Met | N/A | Numbered as K.A..R. (c) 1, 2, etc. |
| | | (1) a full size drawing (request 11 x 17 maximum) | | | (1) project construction purpose: new, addition, change in use, renovation, or other |
| | | (2) complete floor plan, including existing facilities and new construction, for each floor of the facility | | | (2) reason for submittal: new construction, new licensure, certificate of occupancy, or plan of correction for existing code deficiencies |
| | | (3) an 11 inch by 17 inch (print) reduction sealed by a Kansas-licensed design professional | | | (3) code or codes used (All code footprints must list the Kansas Fire Prevention Code and related statement.) |
| Met | N/A | (b) The following information is required on code footprint: | | | (4) location of any anticipated future additions |
| | | (1) graphic bar scale | | | (5) name, address, city, state, zip code, phone number, and fax number of the owner |
| | | (2) north directional indicator | | | (6) date developed and any revision dates |
| | | (3) complete building floor plan with a clear identification of new, remodeled and existing portions | | | (7) name, address, city, state, zip code, phone number, and fax number of the designer |
| | | (4) all permanent partitions taller than 6 feet | | | (8) designers seal (RA or PE) |
| | | (5) label with plain text, legends for each room/ space | | | (9) name of the responding fire service |
| | | (6) occupant load of assembly rooms and total occupant load for each floor level | | | (10) name of the local building inspection department |
| | | (7) identification of openings and ratings of stair and shaft enclosures | | | (11) each occupancy group and type & each room occupant load |
| | | (8) identification of ratings of corridors and openings | | | (12) the type of construction |
| | | (9) occupancy and area separations | | | (13) structural code requirements, including the following: |
| | | (10) horizontal exit arrangements, exit passageways, and smoke compartments | | | (A) total floor are of each occupancy, actual and allowable |
| | | (11) designate all required exterior exits and exit capacity | | | (B) height and area limitations, actual and allowable |
| | | (12) location of the central fire alarm control panel and any remote annunciator panels | | | (C) structural fire ratings, actual and allowable |
| | | (13) fire department connections | | | (14) identification of active fire safety features, including: |
| | | (14) fire department access roads and fire hydrants | | | (A) type of automatic suppression systems/ locations |
| | | (15) distances to property line and exposures | | | (B) fire alarm signaling system |
| | | (16) any special hazards or conditions | | | (C) emergency lighting and power features |
| | | (17) location of any anticipated future additions | | | (D) smoke control system / extent and purpose |
| | | RESERVED | | | (15) water supply requirements for fire suppression |
| | | RESERVED | | | (16) alternative design or methods of construction, or both |

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