
1. Completely fill out and submit the Smoke – CO Application form accompanied with (3) three sets of plans; 2-11 x 17, and 2 large (standard) set wet stamped, and pre-marked for appropriate fire detection (smoke detectors, co detectors, and fire sprinkler system if required). The RGFA must be marked on the plans. If the project is a new building, then a site plan is also required. Once the plans have been reviewed, the Contractor will be notified to pick up the plans. At this time the fee is due. The plans may dropped off or picked up between the hours of 9 – 12 and 2 – 5 pm Monday through Friday.

2. The Fire Detection permit Fee will be calculated using the RGFA x $0.01 at a minimum of $50.00.


4. All residential homes over 10,000 sq. ft. shall be zoned per floor or addressable point ID systems.


6. During the rough wiring phase, call the Weston Fire Department at: 781-786-6101 to arrange for a rough inspection.

7. When installation is complete, call The Weston Fire Department and arrange for a final inspection. Someone familiar with the system must be present to perform the test at the time of inspection. Know the code and how to reset system.

8. Residential Sprinkler System (when required) shall be in stalled following the NFPA standards, MGL 148 Fire Prevention Laws. The permit fee shall be calculated using the RGFA x $0.01 at a minimum of $50.00.

9. If you have any questions about this procedure, please contact the Weston Fire Department.
RESIDENTIAL AND COMMERCIAL PLAN REVIEW APPLICATION

Brief Description of work________________________________________________________

Property Information

Location: ________________________________________
Owner: ________________________________________
Address: ________________________________________
_____________________________________________________
Telephone: ___________________________ Cell: ___________________________

Type of System AC / Low Voltage

NFPA 72: *National Fire Alarm Code* 11.8.2.2(2) states “In no case shall more than 18 initiating devices be interconnected (of which 12 can be smoke alarms) where the interconnecting means is not supervised.”

Contractor Information

Builder: ________________________________
Address: ________________________________________
_____________________________________________________
Telephone: ___________________________ Cell: ___________________________

Alarm Installer: ________________________________
Telephone: ___________________________ Cell: ___________________________

Office Use Only

Plan Review Approval #: ____________________ To Building Inspector: ______________
Plans Submitted: ____________________ Fee Paid: ____________________
July 2020