

Building Permit No.

FIRE SPRINKLER AFFIDAVIT FOR ALTERTIONS OR TENANT IMPROVEMENTS (0-10 sprinkler heads without plans) *Over the Counter*

Project Name:	Occupancy:
	Type of Construction:
Suite:	Valuation:
Contractor:	Phone:
Number of Proposed or Altered Heads: Type: WET Hazard: LIGHT Density: 10	
a) All work is limited to drops and armovers in a light-hazard occupancy.	
 b) Positions of sprinkler heads relative to an etc. complies with the current edition of N 	rchitectural features such as soffits, beams, partitions, walls, NFPA 13.
c) The proposed work does not require hyd	raulic calculations.
d) Only one sprinkler head will be installed from one drop (Exception: Up to two heads from one drop may be installed when each head is in a separate fire area).	
e) The area covered per sprinkler head is li	mited to the spacing requirements of NFPA13.
f) The installation shall comply with the requirements of the current adopted edition of NFPA 13.	
g) Piping shall not be concealed until hangers and bracing are inspected.	
h) Final approval shall be subject to onsite	tests and inspections.
In addition, I understand the following is require * A sketch attached to this document * A copy of this document shall be av	showing the area of work within the building's structure, and
Signature:	Date:

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