

**Peterborough Fire & Rescue**  
**16 Summer Street, Peterborough, New Hampshire 03458**

Business: (603) 924-8090  
Fax: (603) 924-8091

Emergency: 911  
Website: [www.firerescue.us](http://www.firerescue.us)

Joseph P. Lenox III, Fire Chief

Bradley Winters, Deputy Chief

Paul Thibault, Deputy Chief

Michael Roper, Deputy Chief of EMS

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**BUILDING PLAN REVIEW SUBMISSION REQUEST**

Resubmission

Owner & Address: \_\_\_\_\_ Occupant & Address: \_\_\_\_\_  
\_\_\_\_\_

Project Name: \_\_\_\_\_

Building's Physical Address: \_\_\_\_\_

Designer Name and Address: \_\_\_\_\_

Contact Name and Phone: \_\_\_\_\_

**Plan submissions must include all of the following, please fill out a separate form for each submittal.  
Some information may not be applicable for some projects, note items with a N/A  
Please denote information on either the plans or on this form.**

**(3) Sets of plans are required per submission; the final letter will represent this office's acceptable review of the plans.**

- Identify occupancy classification as defined in IBC and NFPA 101: Life Safety Code: \_\_\_\_\_
- Identify type of construction: I through V, A = Protected by fire rating, B = Unprotected: \_\_\_\_\_
- Calculated maximum height and area allowed by the code for the use and construction: State of New Hampshire Table XXX  
Maximum Height: \_\_\_\_\_ Maximum Area: \_\_\_\_\_
- Firewalls that may separate sections of building as defined in IBC 705 and NFPA 221 noted on plans with accompanying detail.
- Calculated building's height, area, and street frontage.  
Area = Footprint of the building  
Street Frontage = 30 feet clear space accessible by a fire lane as defined by IBC and NFPA  
Area: \_\_\_\_\_ SF  
Frontage: \_\_\_\_\_ Feet  
Perimeter: \_\_\_\_\_ Feet



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**OFFICE USE ONLY**

**Date received:** \_\_\_\_\_ **Personnel Assigned:** \_\_\_\_\_ **Due Date:** \_\_\_\_\_

**PFR Plan #:** \_\_\_\_\_ **Approval Date:** \_\_\_\_\_ **Hydrant District:** \_\_\_\_\_

Review construction requirements of the particulate occupancy in NFPA 101. Notes:  
\_\_\_\_\_  
\_\_\_\_\_

All necessary elements, and project complies with all local ordinances? Yes / No

Date first correspondence/contact with submitter: \_\_\_\_\_

75% Completion Date: \_\_\_\_\_

Inspection Date / By whom: \_\_\_\_\_

Is the Final report included in the file? Yes / No

100% Completion Date: \_\_\_\_\_

Other correspondence, Date and Subject:  
\_\_\_\_\_  
\_\_\_\_\_

Phone Log: Date and what was discussed  
\_\_\_\_\_  
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\_\_\_\_\_

Date approval letter was sent under Chief's signature: \_\_\_\_\_

\_\_\_\_\_  
Plan Reviewer \_\_\_\_\_  
Date