

FIRE PLAN CHECK APPLICATION Stockton Fire Department - Fire Prevention Division 345 North El Dorado Street • Stockton, CA 95202 (209) 937-8271 | Fax: (209) 937-8893 SFD-PlanSubmittal@stocktonca.gov



1. Plan checks can take between 2 - 4 weeks

- 2. E-mail the application & plans (Dropbox link can be used if file is large) to: SFD-PlanSubmittal@stocktonca.gov
- 3. E-mail subject: name of the project, project address, and the type of fire protection system plan check
- 4. Invoice balance must be paid in full prior to plan review (notify staff if mailing a check)
- 5. Once payment is confirmed, plans will be placed on the review list from the date of payment
- 6. For assistance call: (209) 937-8677 or (209) 937-8271

Project I	nformat	ion			
Application Date		Select One Below	SFD Permit #	County Permit BP -	Select One Below
Project Name		Project Address: Street, Space, Zip Code			
Contractor/ Designer		Contractor Address: Street, Space, City, State, Zip Code			
Primary Contact Person Primary Phone #		Primary E-mail			
I	Work Doi	ne in the City Requires a Ci	ty of Stocktor	n Business License and I	s Subject to Verification
City of Stockton Business License # Expires				State Contractor's Licens	se # Expires
<mark>STEP1:</mark> Check Type	STEP 2: Choose Type of Fire Protection P Use Drop-down Menu to Select Details.		ion Plan.	* Use the Supplemental Information Box Below to Provide More Project Details if Needed.	
				# Heada Bar Bisers /	
				<u># Heads Per-Riser</u>	
				# Stories /	
				<u># Devices Per-Story:</u>	
				# Systems /	
				<u># FlowPoints Per-System:</u>	
				# Laterals /	
				<u># Hydrants:</u>	
				# Heads Per Riser /	
				<u># Monitors:</u>	
				# Devices:	
				# Stories /	
				# Devices Per-Story:	
				# Stories /	
				# Devices Per-Story:	
Supp	lemental				

## Information Details