

OSWEGO FIRE PREVENTION BUREAU – ADDITIONAL COMMENTS:

Fire Department Site Access:

- Additional Access Road
- Cross Access
- Fire Apparatus Access Road (Fire Lane) to building during construction

Fire Apparatus Access Road Required:

Location: _____

Fire Apparatus Access Roads (includes all streets/roads/lanes):

- 20 ft. unobstructed minimum width
- Alternate: _____
- Dead-ends in excess of 150' shall be provided with an approved turn-around
- Shall be posted "No Parking Fire Lane" _____

Vehicle Turning Radii:

- Inside Turn: 20'
- Curb to Curb Turn: 36' 6"
- Wall to Wall Turn: 45'

Streets:

- Names to be Submitted
- Street Names Approved
- Street Configuration for Naming Purposes

Fire Hydrants:

- Within 100' of Fire Department Connection
- Maximum 300' separation between hydrants
- Required at every intersection
- Minimum of two (2) within 300' of any building
- Dead-end streets and parking lots to have hydrants placed along access route
- Within 300' from most remote portion of building along an approved route
- Dead-end hydrants not allowed – "looping" on minimum of 8" main

Fire Department Connection (FDC):

- Within 100' of fire hydrant
- 5" Storz
- Additional Auxiliary FDC required

Building Characteristics:

- Canopy Height: 13' 6" minimum clearance
- Sprinkler Requirements (NFPA 13/13R anything greater than 2 unit residential)
- Addressable Fire Alarm Required (NFPA 72)
- Knox Box(es) Required
- Radio Repeater Required (emergency radio traffic signals w/i building shall be as clear/reliable anywhere w/i building as outside of building)
- Elevator Accommodations for Ambulance Stretcher (96" full horizontal position & 2 ambulatory adults)

Fire Protection/Fire Alarm/Other Systems:

- Addressable Fire Alarm – NFPA 72 UL Listed Central Station/Kencom Monitoring (*Plans to be reviewed & approved by Oswego Fire prior to installation*)
- FAAP Required if Travel Through Occupancy Required to Reach FACP
- Exterior Red Strobe to Identify Location of FACP/FAAP
- Multi-tenant Space Buildings (Fire Alarm)
 - Exterior white/clear strobes outside all egress points
 - Exterior white/clear strobes activated upon alarm condition w/i tenant space
 - Exterior red strobe to identify location of FACP/FAAP
 - Exterior red strobe to activate upon any alarm condition w/i protection system
 - All exterior strobes, regardless of tenant space, to activate on water flow
 - Point-to-Point monitoring of alarm signals to Central Station/Kencom
- Sprinkler System – NFPA 13/13R (*Plans to be reviewed & approved by Oswego Fire prior to installation*)
- Standpipes as Per NFPA 14 within any buildings where most remote portion of building is more than 200' from a hose connection/egress point
- Commercial Cooking Suppression System (CCS) monitored by Fire Alarm
- Fire Extinguisher placement (75' travel distance to extinguisher)

Fire Department Reviews/Inspections:

- Fire Alarm Plan Approval (w/Fees)
- Fire Alarm Test
- Sprinkler Plan Approval (w/Fees)
- Sprinkler Hydrostatic Test
- Knox Box Installation with keys
- Commercial Cooking Suppression System Test (w/Fees)
- Final/Safety Inspection Prior to Occupancy

Notes:

Oswego Fire Protection District

Chief Brad Smith



Fire Prevention Bureau



Fire Marshal Lt. Alec J Keenum

Station #1 ♦ 3511 Woolley Road ♦
Oswego, IL 60543

Phone: (630) 906-0FPD
Fax: (630) 383-0301

Plan Review/Inspection Fees

Address and name of building or tenant space:

Associated building department

Oswego Montgomery Kendall County Will County Yorkville

Permit #: _____

Name of Permit Holder: _____

Sprinkler System

Name of Illinois Licensed Sprinkler Contractor: _____

Fee received on ___/___/___ in the amount of \$_____. Submitted by _____

Sprinkler Plan Review = **\$150 + .50/head over 100 heads**. This includes 1 inspection/hydrostatic test.
50% of original fee for every additional review required.

Sprinkler Installation/Hydrostatic Test = 1 included
Additional tests required = 50% of original fee

Fire Alarm System

Name of Fire Alarm Contractor: _____

Fee received on ___/___/___ in the amount of \$_____. Submitted by _____

Fire Alarm Plan Review = **\$100**. This includes 2 additional reviews and 2 acceptance tests.
\$50 fee for every additional review required.

Fire Alarm Acceptance Test = 2 included
Additional tests required = **\$70 + \$35/hr** after the first hour

Knox Box

Date ordered: ___/___/___ Date received: ___/___/___

Kitchen Cooking Suppression System

Name of Suppression System Contractor: _____

Fee received on ___/___/___ in the amount of \$_____. Submitted by _____

KCSS Plan Review = **\$75**. This includes 1 acceptance test. \$50 fee for every additional review required.

KCSS Acceptance Test = 1 included
Additional tests required = **\$50**