



Colorado Springs Fire Dept.
Division of the Fire Marshal
Construction Services

APPLICATION FOR SCHOOL CONSTRUCTION PLAN REVIEW

PROJECT NAME: _____

ADDRESS: _____ **PLAN #:** _____

PROJECT DESCRIPTION: _____

SCHOOL DISTRICT: _____

CONTRACTOR: _____ **DATE:** _____

CONTRACTORS PHONE #: _____ **FAX #:** _____

APPROVED ___ **APPROVED W/CORRECTIONS** ___ **DISAPPROVED** ___

Plan Review and Fire Inspection Fee: _____

Plan Reviewer: Withee: 07-180202 ___

Make checks payable to: City of Colorado Springs

Receipt #: _____ Date: _____