

REQUEST FOR REVIEW and PERMIT FORM
Office of the Fire Marshal

1. Form must be completed and attached to three sets of Plans/Specifications submittal.
2. This form and all requested information is required for a plan review to be initiated.
3. **Request will be returned without the exact property address and fee billing information.**
4. You will be billed for review fees and contacted by the Fire Marshals Office when review is complete for pick-up.
5. If plans/specifications information is insufficient and incomplete for review, the request will be rejected with a plans/specifications denied fee billed.
6. If the submitting and installing contractors do not have a business license with the Town of Ocean City, the review will be rejected.

REQUIRED INFORMATION

Date submitted: _____ Project

Name: _____

Exact Project

Address: _____

Person to be notified when review is completed.

Name: _____

Phone number: _____

Address: _____

Company with business license to be billed for review.

Name of licensed

company: _____

Address: _____

Phone number: _____

Official Use Only Below

Application # _____ FM

Assigned _____

Reviewed and ready for Invoicing _____ Permitted and
billed _____

Applicant notified of completed
review _____

Revised: 11/17/04

Form: P:\FORMS\Request for Plan Review