



**TOWN OF SMITHTOWN
DEPARTMENT OF PUBLIC SAFETY
FIRE PREVENTION DIVISION**

65 Maple Avenue, Smithtown, New York 11787 (631) 360-7553

**PLANS REVIEW SUBMITTAL CHECKLIST
FOR VILLAGE OF HEAD OF THE HARBOR**

LIQUIFIED PETROLEUM GAS

ANY OMISSIONS IN THE APPLICATION FORM(S) OR INCOMPLETE AND/OR MISSING REQUIRED DOCUMENTATION WILL BE CAUSE FOR REJECTION OF THE APPLICATION WITHOUT REVIEW BY THE FIRE PREVENTION DIVISION.

PLANS CANNOT BE ACCEPTED FOR REVIEW WITHOUT THE FOLLOWING:

- Completed PERMIT APPLICATION (Form DPS309HOH)
- Two (2) copies of form DPS309LPA (Plot Plan for LPG Installation) obtained from the Fire Prevention Division.
- Completed form DPS309LPB (LPG Supply Line Installation Certification) obtained from the Fire Prevention Division.
- Commercial installations are to include appropriate cut sheets.
Postage paid self-addressed mailing container appropriately sized to return plans.
- Fee(s) indicated payable to **VILLAGE OF HEAD OF THE HARBOR**.
- Proof of Workmen's Compensation Insurance.
- Copy of Suffolk County Plumbers License (with DPS309LPB).
- Provide manufacturer's Installation Instructions for fueled appliances.

This list indicates the documents that must be included with the submittal package in order for this office to accept the application and in no way constitutes a review or approval of the application and/plans.

Submittal Accepted by: _____
SDPS employee initials

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**PLANS REVIEW REQUIREMENTS
FOR THE VILLAGE OF HEAD OF THE HARBOR**

Complete application only after reviewing the requirements for the type of plans being submitted for review. Application submittal requirements and procedures are available from the Fire Prevention Division. Read through ALL instructions prior to submittal in order to minimize the potential for rejection based on an incomplete application package.

**ANY OMISSIONS IN THE APPLICATION FORM OR INCOMPLETE AND/OR MISSING REQUIRED DOCUMENTATION
WILL BE CAUSE FOR REJECTION OF THE APPLICATION WITHOUT REVIEW BY THE FIRE PREVENTION DIVISION.**

FIRE DETECTION/NOTIFICATION/ALARM — With this application form, submit the following:

- Three (3) sets of drawings signed and sealed by an engineer/architect.
- One (1) electronic copy of the plans.
- Two (2) sets of cut sheets.
- Battery calculations.
- Wire specs with Department of State toxicity numbers.
- Postage paid self-addressed mailer appropriately sized to return plans.
- Central Station documentation.+
- Fee(s) indicated payable to **VILLAGE OF HEAD OF THE HARBOR**.
- Proof of Workmen's Compensation Insurance.
- Copy of Valid NYS Fire Alarm Installer's License.

CARBON MONOXIDE DETECTION/NOTIFICATION/ALARM — Refer to the Town of Smithtown CARBON MONOXIDE SYSTEM PLANS SUBMITTAL/SYSTEM INSTALLATION PROCEDURE for documentation required with this application form.

WATER BASED FIRE PROTECTION SYSTEM (Sprinkler, Standpipe, hydrant, etc.) — With this application form, submit the following:

- Three (3) sets of drawings signed and sealed by an engineer or registered architect.
- One (1) electronic copy of the plans.
- Two (2) sets of cut sheets.
- Hydraulic Calculations (if applicable).
- Elevation and reflected ceiling plans.
- Postage paid self-addressed mailer appropriately sized to return plans.
- Fee(s) indicated payable to **VILLAGE OF HEAD OF THE HARBOR**.
- Proof of Workmen's Compensation Insurance.
- Copy of Suffolk County Plumbers License.

FIXED SUPPRESSION/HOOD & DUCT SYSTEMS — With this application form, submit the following:

- Three (3) sets of drawings signed and sealed by an engineer or registered architect.
- One (1) electronic copy of the plans.
- Two (2) sets of cut sheets.
- Postage paid self-addressed mailer appropriately sized to return plans.
- Fee(s) indicated payable to **VILLAGE OF HEAD OF THE HARBOR**.
- Proof of Workmen's Compensation Insurance.
- Copy of the installers Suffolk County Fire Extinguisher License.

LIQUIFIED PETROLEUM GAS — With this application form, submit the following:

- Two (2) copies of form 309LPA (Plot Plan for LPG Installation) obtained from the Fire Prevention Division.
- Completed form DPS309LPB (LPG Supply Line Installation Certification) obtained from the Fire Prevention Division.
- Commercial installations are to include appropriate cut sheets.
- Postage paid self-addressed mailer appropriately sized to return plans.
- Fee(s) indicated payable to **VILLAGE OF HEAD OF THE HARBOR**.
- Proof of Workmen's Compensation Insurance.
- Copy of Suffolk County Plumbers License (with DPS309LGB).
- Provide manufacturer's Installation Instructions for fueled appliances.

Plans, once approved, shall at all times be kept on the premises designated thereon including a copy of the approved drawings and all related/required documentation. Installations subject to final testing, inspection and approval. Arrangements for said testing/inspection shall be made by contacting the Town of Smithtown Department of Public Safety, Fire Prevention Division.

+ Central Station. If there is a change or update to a central station monitoring company, all that is needed is a statement on letterhead indicating the expected date of the change, reason for the change and the name, address and telephone number of the old and new central stations. In addition, the new central station must submit on their letterhead the name and telephone number of the fire department they will be calling. The new central station must indicate they are aware that once this information is confirmed and approved by the Fire Marshal, it cannot be changed without written authorization from the Fire Marshal. The new central station must also state that they are aware that should they violate this, they and the monitored premises will be subject to legal prosecution.

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FOR OFFICE USE ONLY

CASE NO. _____

**PERMIT APPLICATION
FOR THE VILLAGE OF HEAD OF THE HARBOR**

PART A: APPLICATION Check One: Initial Application Re-submittal Application Date: _____

APPLICANT (QUALIFIED COMPANY, INSTALLER AND/OR TECHNICIAN):

COMPANY:	REPRESENTATIVE RESPONSIBLE FOR PROJECT:		
ADDRESS:	CITY:	ST:	ZIP:
e-mail:	PHONE:		

LOCATION OF PROJECT:

PROJECT NAME:				
LOCATION/ADDRESS:	VILLAGE OF H.O.H. TAX MAP No:	SEC.	BLK.	LOT
CITY/ST/ZIP:				
PROPERTY OWNER:				
PHONE:				

TYPE OF PROJECT (Check ONE — A separate application required for each type of project):

DESCRIPTION	Plan Review Fee ¹
<input type="checkbox"/> Installation/alteration of <input type="radio"/> fire detection/notification/alarm system (Check one or both) <input type="radio"/> carbon monoxide detection/notification/alarm system	\$ _____
<input type="checkbox"/> Installation/alteration of water based fire protection system (sprinkler, stand-pipe, hydrant, etc.)	\$ _____
<input type="checkbox"/> Installation/alteration of fixed suppression/hood & duct systems.	\$ _____
<input type="checkbox"/> Installation/alteration of exhaust system for removal of smoke/laden grease or other vapors	\$ _____
<input type="checkbox"/> Installation/alteration/removal of liquified petroleum gas (submit with forms 309LPA & 309LPB) <input type="radio"/> Above ground <input type="radio"/> Below ground Aggregate capacity (gallons - H ₂ O): <input type="radio"/> Non-structural (ie. for pool heater) <input type="radio"/> Structural (ie. for heating/interior appliances) ²	\$ _____
<input type="checkbox"/> Fireworks Display (per display) ³ F Non-structural (ie. for outdoor display) F Structural (ie. for interior/theatrical display)	\$ _____

Check ALL applicable item(s): New system. System modification. Residential Commercial
 Part of new construction project for which a VILLAGE OF HEAD OF THE HARBOR Building permit has been issued.²
 Part of renovation project for which a VILLAGE OF HEAD OF THE HARBOR Building permit has been issued.²

¹ All fees to review plans for projects within the Village of Head of the Harbor shall be made payable to **VILLAGE OF HEAD OF THE HARBOR**.

² Provide manufacturer's Installation Instructions for fueled appliances.

³ Contact Village of Head of the Harbor Building Official regarding fee(s).

PART B: PERMIT [FOR OFFICE USE ONLY] A REVIEW OF THIS APPLICATION AND ALL ASSOCIATED PLANS AND DOCUMENTS HAS RESULTED IN THE FOLLOWING:

PERMIT IS APPROVED/GRANTED. Date: _____

Application has been **DENIED** due to: _____

FIRE MARSHAL	SHIELD	Fee: \$ _____	doc/ck# _____
			<input type="checkbox"/> DATA ENTRY COMPLETE



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FOR OFFICE USE ONLY

CC No.

Permit No.

PLOT PLAN FOR LPG INSTALLATION

This form is to be submitted with a Permit Application (DPS309) and an LPG Supply Line Installation Certification(DPS309LPB)

PERMIT APPLICANT (LPG INSTALLATION COMPANY):

DATE: _____

INSTALLATION LOCATION/ADDRESS	TAX MAP NO:	SEC	BLK	LOT
PROPERTY OWNER				

INSTALLATION:

TYPE OF LPG TANK:	HYDROSTATIC TEST DATE:	<input type="radio"/> ABOVE GROUND	<input type="radio"/> NEW INSTALLATION	NUMBER OF TANKS:	CAPACITY (GALLONS-H ² O):
		<input type="radio"/> BELOW GROUND	<input type="radio"/> EXISTING INSTALLATION		

PIPING CONSTRUCTION/SIZE:	SUPPORT (FOUNDATION) TYPE:
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REMOVALS:

TYPE OF LPG TANK:	<input type="radio"/> ABOVE GROUND	<input type="radio"/> EXISTING INSTALLATION	NUMBER OF TANKS:	CAPACITY (GALLONS-H ² O):
	<input type="radio"/> BELOW GROUND			

PIPING REMOVAL:

Site plan drawing: Show structure(s), tank location(s), distances to structure openings (windows, doors, appliance vents, etc.), property lines, roads, driveways, potential sources of ignition, electrical devices/outlets, all existing and installed appliances and piping:

**Plumbing requires pressure testing and inspection in the presence of a Fire Marshal prior to final approval.
Arrangements for said testing/inspection shall be made by contacting the Department of Public Safety, Fire Prevention Division.**

