



BRIGHTON AREA FIRE AUTHORITY

615 W. Grand River Ave.
Brighton, MI 48116
o: 810-229-6640 f: 810-229-1619

Plan Review Transmittal Form

Date Submitted: _____

Project Information
Name: _____
Address: _____
City, State, Zip: _____
Scope of Work: _____

Contractor Information
Name: _____
Address: _____
City, State, Zip: _____
Contact: _____
Phone#: _____
Email: _____

Check appropriate box and number of copies submitted:

#Copies Submitted	Site 1 set required	Building 1 set required	Sprinkler 4 sets required w/calcs & spec sheets	Fire Alarm 4 sets required See MBC 907.1	Other Extinguishing Systems 4 sets required

These are transmitted as checked below:

- | | |
|---|---|
| <input type="checkbox"/> Original | <input type="checkbox"/> Revised |
| <input type="checkbox"/> For Review and Comment | <input type="checkbox"/> Calculations |
| <input type="checkbox"/> Resubmittal | <input type="checkbox"/> Product Specification Data |

Additional Remarks:

Submit plans to the Brighton Area Fire Authority at address above.