

## **Sedgwick County Fire District 1**

Administrative Office: 7750 N. Wild West Dr. - Park City, KS 67147 Phone: 316-660-3473 - www.sedgwickcounty.org - Fax: 316-660-3474



Sedgwick County... working for you

## **BUILDING PLAN REVIEW APPLICATION**

Tenant/Business Name:					
Job Site/Property Address:		City:			
Applicant Name:	E-Mail:	Phone:			
Description of work to be done:					

Project Valuation: (based upon your job cost, not including land costs)

Plan review multiplier: Plan Review fee due: (Min. Charge - \$50.00)

I LAIV KEVIEW I EE SCHEDCEE					
	Valuatior	1	Multiplier		
\$0.00	to	\$50,000.00	0.0015*		
\$50,001.00	to	\$100,000.00	0.0012		
\$100,001.00	to	\$150,000.00	0.00098		
\$150,001.00	to	\$200,000.00	0.000975		
\$200,001.00	to	\$300,000.00	0.00082		
\$300,001.00	to	\$400,000.00	0.000785		
\$400,001.00	to	\$500,000.00	0.00075		
\$500,001.00	to	\$600,000.00	0.00072		
\$600,001.00	to	\$700,000.00	0.0007		
\$700,001.00	to	\$800,000.00	0.00068		
\$800,001.00	to	\$900,000.00	0.00067		
\$900,001.00	to	\$1,000,000.00	0.00065		
\$1,000,001.00	to	\$2,000,000.00	0.00063		
\$2	,000,000.0	00 +	0.0006		

PLAN REVIEW FEE SCHEDULE

I hereby acknowledge that I have read this application and state that the above information is correct. I agree to comply with the Fire Code requirements adopted by Sedgwick County and the requirements contained in the National Fire Protection Association Standards. I understand that the Sedgwick County Fire Marshal's office must be contacted to schedule all inspections and that a final inspection shall be done before occupancy is given. I further understand that it is the responsibility of the contractor to make sure that all work is completed before an inspection is scheduled.

Architect / Contractor Signature:	Date:		
Date Plans Received:	Date Plans completed:	(a min. of 10 working days)	
		<b>•</b> ••••••	

Received by:	Date:	Check No.: