

Emergency Prevention Division



Travis County Emergency Services District 3 & 9

1011 Westlake Drive – West Lake Hills, TX 78746
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 Headquarters: (512) 327-9424 Fax: (512) 327-2780
 www.westlakefd.org www.oakhillfire.org



Plan Review Application

Date of Application: _____ ESD Area: ESD # 3 ESD # 9
 TNR Permit Number _____ COA Case Number _____

Application must be completed in full. Failure to provide any of the information may result in a delay of the plan review and the rejection of the application. This application is for permit issuance only. A permit will be issued upon the review and approval of plans for which this application is intended.

Project Information

Square Footage: _____ Estimated Cost of Construction: _____
 Project Name: _____
 Project Address: _____
 Street Address _____ Suite No. _____

Company Information

Company Name: _____
 Company Address: _____
 Street Address _____ Suite No. _____
 City _____ State _____ Zip Code _____

Contact Person: _____
 Phone Number: _____ Fax Number: _____
 E-Mail Address: _____

Request Plan Review

First Submittal: Second Submittal: Third Submittal: Fourth Submittal:

Subdivision Plan	<input type="checkbox"/>	Site Plan (Civil)	<input type="checkbox"/>
Fire Alarm Plan	<input type="checkbox"/>	New Building Plan	<input type="checkbox"/>
Fire Sprinkler Plan > 50 Heads	<input type="checkbox"/>	New Building Shell Only	<input type="checkbox"/>
Fire Sprinkler Plan < 50 Heads	<input type="checkbox"/>	New Building Finish Out / Alteration	<input type="checkbox"/>
Commercial Kitchen Hood System	<input type="checkbox"/>	Existing Building Re-Model	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>

- * A valid permit and an approved set of plans must be maintained at the job site at all times. Failure to obtain a permit prior to beginning work on a system and/or failure to provide the plans and permit for the field inspector may result in a failed inspection and civil penalties assessed.
- * Minimum of two (2) sets of construction and site plans for the proposed project and/or a minimum of three (3) sets of Fire Protection System plans must be submitted with this review application.
- * Please allow a minimum of two (2) weeks for the Travis County ESD 3 & 9 Emergency Prevention Department Plan Review Process.
- * Contact person will be notified upon the completion of the plan review. Include e-mail address to be notified via e-mail.
- * By signing below, I hereby file this application for a fire code permit and if the permit herein applied for is granted, acknowledge myself to be bound to the Travis County ESD 3 & 9, to see to it that all provisions of the permit are faithfully performed. Authorization is hereby given to the Travis County ESD 3 & 9 and/or their designee, to enter upon the above-described property for the purpose of inspections of proposed construction. I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents and believe that the submitted information is true, accurate, and complete.

I have read and understand the responsibilities stated therein:

Printed Name of Applicant _____ Signature of Applicant _____ Date _____

Emergency Prevention Division Use Only

Permit Number: _____ Working Days: _____ Approved Rejected
 Date of Submittal: _____ Date of Completion: _____ Reviewed By: _____
 Fee Due: _____ Amount Paid: _____ Check Number: _____ Date: _____
 Comments: _____