



Building Permit Clearance

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Fax: 970.549.5850 Email: fire@gjcity.org Website: www.gjcity.org/201/Codes-Permits.

Office Use only

Date: _____

Time: _____

Project Address: _____ City: _____ State: _____ Zip Code: _____

Project Name: _____

Project Scope of Work: _____

Contact Name: _____ Contact Number: _____

Contractor Information:

Company: _____ Business Number: _____

Business Email: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Contact Name: _____ Phone Number: _____

Project Information:

Square Footage (Entire Structure): _____ Square Footage (Scope of Work): _____

Number of stories (Entire Structure): _____

Building Construction Type per IBC: V-B II-B III-B V-A IV III-A II-A

Occupancy Type per IBC (Check all that apply to structure):

Assembly	<input type="checkbox"/> A-1	<input type="checkbox"/> A-2	<input type="checkbox"/> A-3	<input type="checkbox"/> A-4	<input type="checkbox"/> Institutional/Daycare	<input type="checkbox"/> I-1	<input type="checkbox"/> I-2	<input type="checkbox"/> I-3	<input type="checkbox"/> I-4
Business Office	<input type="checkbox"/> B				<input type="checkbox"/> Mercantile/Retail	<input type="checkbox"/> M			
Educational	<input type="checkbox"/> E				<input type="checkbox"/> Residential	<input type="checkbox"/> R-1	<input type="checkbox"/> R-2	<input type="checkbox"/> R-3	<input type="checkbox"/> R-4
Factory/Industrial	<input type="checkbox"/> F-1	<input type="checkbox"/> F-2			<input type="checkbox"/> Storage/Warehouse	<input type="checkbox"/> S-1	<input type="checkbox"/> S-2		
High Hazard	<input type="checkbox"/> H-1	<input type="checkbox"/> H-2	<input type="checkbox"/> H-3	<input type="checkbox"/> H-4/H-5	<input type="checkbox"/> Utility/Miscellaneous	<input type="checkbox"/> U			

Fire Sprinkler System: Fully Sprinklered Partially Sprinklered Not Sprinklered

Fire Alarm System: Fully Alarmed Partially Alarmed Not Alarmed

Type of Work: Tenant Finish- Interior Tenant Finish- Exterior Building- Addition Building- New

FIRE SAFETY DURING CONSTRUCTION - ON SITE FIRE PREVENTION PROGRAM DECLARATION

In conformance with the International Fire Code (IFC) Chapter 33, 2018 & 2024 ed., and NFPA Standard 241, 2022 ed.

The owner or owner's authorized agent shall be responsible for the development, implementation and maintenance of an approved, written Site Safety Plan establishing a fire prevention program at the project site applicable throughout all phases of the construction, repair, alteration or demolition work. The owner shall designate a person to be the Site Safety Director. The Site Safety Director shall be responsible for ensuring compliance with the Site Safety Plan. Site Safety Directors shall acquire training specific to their roles and responsibilities. Guidance document available at the GJFD website.

This section shall be completed by the owner or owner's authorized agent with an attached Site Safety Plan for the project. The Site Safety Plan is a required construction document submitted through the GJFD Plan Review portal for the project. The Site Safety Plan shall be submitted prior to issuance of a Building Permit Clearance.

Owner or Owner's Authorized Agent name, email and telephone/mobile phone number

Appointed Site Safety Director name, email and telephone/mobile phone number

I have read and understand the provisions of the IFC Chapter 33.

Initial _____

I confirm that the attached Site Safety Plan includes the required components listed in Chapter 33 of the IFC and any additional site-specific elements, as applicable.

Initial _____