

## Apply using the City Online Portal

## FIRE SPRINKLER AFFIDAVIT FOR ALTERTIONS OR TENANT IMPROVEMENTS

(0-10 sprinkler heads upload this form and a plan showing fire sprinkler locations)

Project Name:	Occupancy:
	Type of Construction:
Suite:	Valuation:
Contractor:	Phone:
	posed or Altered Heads:
Type: WET	Hazard: LIGHT Density: 10
I,, Oregon Construction Contractors Board Nocertify that the following is true and reasonably defines the scope of work for this project:	
a) All work is limited to drops and armov	ers in a light-hazard occupancy.
b) Positions of sprinkler heads relative to etc. complies with the current edition of	o architectural features such as soffits, beams, partitions, walls, of NFPA 13.
c) The proposed work does not require h	nydraulic calculations.
d) Only one sprinkler head will be installed be installed when each head is in a se	ed from one drop (Exception: Up to two heads from one drop may eparate fire area).
e) The area covered per sprinkler head i	s limited to the spacing requirements of NFPA13.
f) The installation shall comply with the r	equirements of the current adopted edition of NFPA 13.
g) Piping shall not be concealed until har	ngers and bracing are inspected.
h) Final approval shall be subject to ons	site tests and inspections.
In addition, I understand the following is required:  * A sketch attached to this document shall be	ent showing the area of work within the building's structure, and
Signature:	Date:

Address: 29799 SW Town Center Loop East

Wilsonville, OR 97070