



RANGE HOOD(S) APPLICATION

Merrimack Fire Rescue Office of the Fire Marshal

432 DW Highway PO Box 130
Merrimack NH 03054 Office: 603-424-3690 fax: 603-424-0603

In accordance with the Merrimack Department of Fire Rescue, NO work will begin prior to the issuance of proper permits and documentation and/or approvals by the Merrimack Department of Fire Rescue, Office of the Fire Marshal.

All fields shall be completed. If not applicable, please mark with N/A

Date: _____

SITE INFORMATION

Building / Site Name: _____

Site Address: Number: _____ Street Name: _____

Will the area of this work be tenant occupied Yes ☐ NO ☐ (If yes fill in information below)

OCCUPANT / TENANT INFORMATION

Name: _____ Business Name: _____

Address: _____ City _____ State _____ Zip: _____

Phone#: _____ Fax#: _____ E-Mail: _____

Contact Name: _____ Cell Phone: _____

INSTALLER PERFORMING WORK

Name: _____ Business Name: _____

Address: _____ City _____ State _____ Zip: _____

Phone#: _____ Fax#: _____ E-Mail: _____

Contractor's State License No. _____ Expiration Date: _____

Merrimack Fire Marshal Contractor Number _____ Expiration: _____

DOES THE SCOPE OF THIS PROJECT INVOLVE MORE THAN ONE HOOD? YES ☐ NO ☐ HOW MANY? _____

DOES THIS WORK INVOLVE MORE THAN ONE SUPPRESSION SYSTEM? YES ☐ NO ☐ HOW MANY? _____

FEE OF \$100.00 PER SUPPRESSION SYSTEM INCLUDED? (NOTE, REQUIRED FOR PERMIT) _____

IS THIS A REPLACEMENT OF AN EXISTING SYSTEM? YES ☐ NO ☐

PROJECT NARRATIVE:

(Including specific scope and location of work)

TYPE OF SYSTEM:

(check the one most applicable)

- ☐ Dry Chemical
☐ Wet Chemical
☐ Wet Chemical & Sprinklered
☐ Deep Fat Fryer (Pre-engineered/Self Contained)
☐ Sprinklered Rangehood

Manufacturer: _____ Model: _____

Quantity of Extinguishing Agent: _____ Name of Agent: _____

Multiple Hood Suppression Systems: Yes ☐ or No ☐ If yes, how many? _____

Number of Nozzles and Type: _____

Number of Fusible Links: _____ Link Temperature(s): _____

INDICATE THE HAZARD AND APPLIANCES TO BE PROTECTED:

Appliance(s) Protected Appliance Fuel Source

_____	Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other _____
_____	Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other _____
_____	Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other _____
_____	Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other _____
_____	Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other _____
_____	Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other _____
_____	Gas <input type="checkbox"/> Electric <input type="checkbox"/> Other _____

The issuance of a permit based upon plans specifications, data and other reports shall not prevent the Merrimack NH Department of Fire Rescue, Office of the Fire Marshal from thereafter requiring correction of deficiencies. Any deficiencies found during field inspection, testing, or Fire Company Surveys shall also be corrected.

The completed installation shall pass a visual inspection and complete operating test witnessed by a representative of the Merrimack Office of the Fire Marshal. Please call for your inspection at least 24 hours in advance to schedule inspections or tests.

The Fire Suppression System is required to be connected to Building Fire Alarm System

In accordance with the Merrimack NH Fire Code, no permit-required work will begin prior to the issuance of proper permits and / or approvals by the Merrimack Department of Fire Rescue, Office of the Fire Marshal.

Submittal of plans and payment of fees does not imply Permission or permit by the Merrimack Department of Fire Rescue, Office of the Fire Marshal for project design or commencement of work.

The system design shall comply with UL300 Fire Extinguishing Systems for Protection of Restaurant Cooking Areas, NFPA 17A Wet Chemical Extinguisher Systems and NFPA 96 Installations of Equipment for the Removal of Smoke and Grease Laden Vapors from Commercial Cooking Equipment and local or state codes and standards.

APPROVED PLANS AND A COPY OF THE PERMIT MUST BE KEPT ON SITE DURING CONSTRUCTION.

THE FOLLOWING ARE INCLUDED AND REQUIRED FOR SUBMITTAL:

A fee of \$100.00 per hood suppression system is required upon submission of this application
Two sets of Drawings (Fire Dept retains one copy and one copy will be stamped and returned)
Equipment Cut-Sheets (Copies of catalog pages showing new equipment)