



**CHARLOTTE FIRE DEPARTMENT  
FIRE PREVENTION BUREAU  
Fire Marshal's Office**

**SHOP DRAWING REVIEW APPLICATION**  
*(All information must be completed to process your request)*

Name of Project: \_\_\_\_\_

Project Address: \_\_\_\_\_

Project Number (if applicable)\*: \_\_\_\_\_

*\*NOTE: The "project number" is the number assigned by the County's building standards division to new construction projects. This number can be obtained from the architect of record.*

**Applicant Information**

Company Name: \_\_\_\_\_

Company Address: \_\_\_\_\_

Name of Contact: \_\_\_\_\_

Telephone Number and email: \_\_\_\_\_

**Review Type**

\_\_\_\_\_ Fire Alarm Shop Drawings (Fee Amount: \$195.00)

\_\_\_\_\_ Fire Sprinkler Shop Drawings (Fee Amount: \$310.00)

**Total Fee:** \$ \_\_\_\_\_

***This form MUST be completed, scanned, and submitted with each review. Upon receipt of package, we will contact you with payment arrangements. Submit to:***  
***[CFDPlanSubmittal@charlottenc.gov](mailto:CFDPlanSubmittal@charlottenc.gov)***

**CFD Office Use Only**

Reviewer Name: \_\_\_\_\_

Date Applicant Contacted: \_\_\_\_\_