



Fire Marshal's Office
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ROUND ROCK FIRE DEPARTMENT

FIRE MARSHAL'S OFFICE

NFPA 13 OWNER'S INFORMATION CERTIFICATE

Instructions: Complete this form and add as attachment through the City of Round Rock Permit Portal.

| Owner's Information | |
|-----------------------|---------------------------|
| Building Name: _____ | |
| Address: _____ | Bldg.: _____ Suite: _____ |
| City: _____ | Zip: _____ |
| Building Owner: _____ | Phone: _____ |
| Email: _____ | Permit Number: _____ |

| General Building Information of Existing or Planned Construction: | |
|---|--------------------------|
| Area of Building: _____ | Number of Stories: _____ |
| Occupancy Type: _____ | Occupant Load: _____ |

Existing or planned construction is:

- Fire resistive or noncombustible
- Wood frame or ordinary (masonry walls with wood beams)
- Unknown

Is the system installation intended for one of the following special occupancies:

- | | |
|--------------------------------|--|
| Aircraft hangar: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Fixed guideway transit system: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Racetrack stable: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Airport terminal: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Aircraft engine test facility: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Power plant: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Water-cooling tower: | <input type="checkbox"/> Yes <input type="checkbox"/> No |

If the answer to any of the above is "yes," the appropriate NFPA standard should be referenced for sprinkler density/area criteria. _____

Indicate whether any of the following special materials are intended to be present:

- Flammable or combustible liquids: Yes No
- Aerosol products: Yes No
- Nitrate film: Yes No
- Pyroxylin plastic: Yes No
- Compressed or liquefied gas cylinders: Yes No
- Liquid or solid oxidizers: Yes No
- Organic peroxide formulations: Yes No
- Idle pallets: Yes No

If the answer to any of the above is "yes," describe type, location, arrangement, and intended maximum quantities.

Indicate whether the protection is intended for one of the following specialized occupancies or areas:

- Spray area or mixing room: Yes No
- Solvent extraction: Yes No
- Laboratory using chemicals: Yes No
- Oxygen-fuel gas system for welding or cutting: Yes No
- Acetylene cylinder charging: Yes No
- Production or use of compressed or liquefied gases: Yes No
- Commercial cooking operation: Yes No
- Class A hyperbaric chamber: Yes No
- Cleanroom: Yes No
- Incinerator or waste handling system: Yes No
- Linen handling system: Yes No
- Industrial furnace: Yes No
- Water-cooling tower: Yes No

If the answer to any of the above is "yes," describe type, location, arrangement, and intended maximum quantities.

Will there be any storage of products over 12 ft. (3.6 m) in height?

Yes No

If the answer above is “Yes” describe product, intended storage arrangement and height.

Will there be storage of plastic, rubber, or similar products over 5ft (1.5 m) high except as described above?

Yes No

If the answer above is “Yes” describe product, intended storage arrangement and height.

I certify that I have knowledge of the intended use of the property and that the above information is correct.

Signature of owner’s representative or agent: _____

Date: _____

Name of representative or agent completing certificate (print): _____

Relationship and firm of agent (print): _____