## SC Department of LLR/Div. of Fire & Life Safety Office of State Fire Marshal 141 Monticello Trail Columbia, SC 29203 (803) 896-9800 FAX (803) 896-9806

## FIRE SPRINKLER SYSTEM CERTIFICATE OF COMPLIANCE

This form and the Fire Sprinkler System Specification Sheet are to be completed by the individual who reviews and approves the sprinkler system shop drawings. The completed forms must be delivered to the owner, authority having jurisdiction, and the Office of State Fire Marshal before a certificate of occupancy may be issued per §23-45-147(E).

Project Name: Project Address:						
					<u> </u>	
Contractor:					<u> </u>	
Dwg. No./Rev./Date					<del></del>	
I hereby confirm that in related calculations for with the design critering signature of specifier a	r the above proj a indicated on t	ject. Based u the Fire Sprin	pon my revie kler System	ew, the docun Specification	nents are in cor	npliance
Name (please print):				<del></del>		

(Rev. 5/16/00) <coc\_5\_2000>