



Town of Brookhaven Long Island, New York

Department of Public Safety
John Meehan, Commissioner

Fire Sprinkler System Alteration Statement of Work

Type of system is: hydraulic calc, pipe schedule, wet, dry, preaction,
 deluge, antifreeze. (Check all applicable)

Fire Prevention
Alteration Permit # _____

Number of heads effected: New: _____ Relocated _____ Deleted _____

New Branch Lines
Or Mains Installed? _____

Sprinkler Head Make/Model
(submit cut sheets) _____

Area/Room effect:
(Number & Change)
(ie, Stockroom 2 relocated) _____

Brief Summary: _____

Any changes affecting the design area or the use a flexible style sprinkler connections WILL require the submittal of Plans and Hydraulic calculations.

Signature of Applicant: _____ EMAIL Address _____

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