



El Paso County Emergency Services District #2

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Fabens, TX 79838

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Website: www.epcountyesd2.org

✉: inspections@epcountyesd2.org

EL PASO COUNTY E.S.D. #2 -- FIRE MARSHAL'S OFFICE

Plan Review Application

Plan Review ONLY (NO PERMIT)

The preliminary review of plans, which have not been submitted for approval for which no permit will be issued.

Expedite: _____

Reference Number: _____

(Fire Marshal's Office use)

Street Address: _____

(As assigned by El Paso County Roads and Bridges)

Total Cost of Project: \$ _____ (Round up to the highest dollar)

Hourly Rate: \$75.00 (PER/\$500,000.00) _____ HOURS

Project Name: _____ Physical Address: _____

City: _____ State: TX Zip code: _____

Type of Occupancy:

Assembly _____ Business _____ Educational _____ Factory _____ Institutional _____

Mercantile _____ Residential _____ Storage _____ Utility _____

Type of Construction: 1A _____ 1B _____ 2A _____ 2B _____ 3A _____ 3B _____ 4 _____ 5A _____ 5B _____

Contracting Company Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Person: _____ Phone: _____

email: _____ Date: _____

Authorized Applicant Signature

Notice:

Separate permits may be required for building, electrical, plumbing, heating, ventilation or air conditioning. This permit becomes null and void if work or construction authorized is not commenced and inspections called for and obtained within six (6) months at any time after work is commenced.

Affidavit:

I hereby certify that I have read and examined this application at it is true and correct to the best of my knowledge. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any Federal State or Local law regulating construction or the performance of construction. I also hereby certify that the information on the site plan is true and correct and that all know easements have been properly shown.

Fire Marshal's Office Use Only

Date submitted: _____

OF BLUEPRINTS RECEIVED _____

Permit #: _____

Expiration date: _____ 20____

Received by: _____

DFM: _____

Fire Chief / Fire Marshal: Roger Esparza | **Assistant Fire Chief / Fire Marshal:** Joe Saucedo

Fire Marshal's Assistants: Angie Hernandez | Rosie Edwards

Captain: Marco Herrera | **Lieutenant:** Juan Medina

Deputy Fire Marshals: Vicente Telas | Pablo Solis III

Revised: 2024.02.20