CONNECTICUA CONNECTICUA MARKEN SEDAR		DEPARTMENT OF ADMINISTRATIVE SERVICES PROPOSED CHANGE OF THE CONNECTICUT STATE FIRE PREVENTION CODE		
CODE INFORMATION	DATE SUBMITTED:			
PROPONENT INFORMATION				
Name:	Repres	Representing:		
Telephone:	Email:	Email:		
Address:				
Street Address	Town	State	Zip Code	

PROPOSAL INFORMATION

Description of change and reason for change (attach additional information as needed):

Proposed text change, addition or deletion (attach additional information as needed):

Supporting data and documents (attach additional information as needed)

- □ **This Proposal is original material.** (Note: Original material is considered to be the submitter's own idea based on or as a result of his/her own experience, thought or research and, to the best of his/her knowledge, is not copied from another source.)
- □ **This Comment is not original material, its source (if known) is as follows:** (such as material / code development proposal from a prior development cycle or proposal submitted to model code committee etc.)

□ I would like to make an in-person presentation of my proposal.

Release

I hereby grant the State of Connecticut full rights to the use of this material without benefit to me, including, but not limited to, publication and reproduction rights.

Proponent's Signature

Printed Name

PLEASE EMAIL (PREFERRED) TO <u>OSFM.ENGINEER@CT.GOV</u> OR MAIL OR FAX (SEE BELOW)

Department of Administrative Services Office of the State Fire Marshal 450 Columbus Boulevard, Suite 1304 Hartford, CT 06103 Tel: 860-713-5750 Fax: 860-920-3088 Affirmative Action/Equal Opportunity Employer