

# MASSACHUSETTS COMPREHENSIVE FIRE SAFETY CODE FORM FOR PROPOSALS

## INSTRUCTIONS — PLEASE READ CAREFULLY

Type or print **legibly in black ink**. Use a separate copy for each proposal. Proposals may be submitted at any time however, to meet statutory deadlines for public hearings proposals must be received by the Department of Fire Services by **5 p.m., on the Friday before the regulatory public hearings scheduled the third Thursday of May and October annually, or by the closing period for any advertised public input period**. Electronic media submittals are strongly encouraged.

## Office Use Only

LOG #

Date Rec'd:

Date: \_\_\_\_\_ Name \_\_\_\_\_ Tel. No. \_\_\_\_\_

Company \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Please Indicate Organization Represented (if any) \_\_\_\_\_

1. Chapter/Section \_\_\_\_\_

2. If this subject has been addressed in the NFPA 1 revision process (preferred), indicate the applicable NFPA 1 document number(s):

Pub. Input #: \_\_\_\_\_ 1<sup>st</sup> Rev. # \_\_\_\_\_ Pub. Cmmt. # \_\_\_\_\_ 2<sup>nd</sup> Rev.# \_\_\_\_\_

3. Proposal (include proposed new wording, or identification of wording to be deleted):

4. Statement of Problem and Substantiation for Proposal: (Note: State the problem that will be resolved by your recommendation; give the specific reason for your comment including copies of tests, research papers, fire experience, etc.)

5. ☐ 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 Proposal is not original material; its source (if known) is as follows: \_\_\_\_\_

Note 1: Type or print legibly in black ink.

Note 2: If supplementary material (photographs, diagrams, reports, etc.) is included, you may be required to submit sufficient copies, as determined by DFS staffing for all members of the applicable code committee.

*I hereby grant the Massachusetts Board of Fire Prevention Regulations (BFPR) the nonexclusive, royalty-free rights, including nonexclusive, royalty-free rights in copyright, in this proposal, and I understand that I acquire no rights in any publication of the BFPR in which this proposal in this or another similar or analogous form is used.*

\_\_\_\_\_  
Signature (Required)

Mail to: Mary Ann Smith, Code Administrator  
Fire Safety Division  
Department of Fire Services  
P. O. Box 1025, Stow, MA 01775

Or ON-LINE (preferred) via email to: MaryAnn.E.Smith@mass.gov