

City of Elma

Building/Community Development
P.O. Box 3005 - 202 W. Main Street
Elma, Washington 98541
(360) 482-4482, 482-2212 - Fax # (360) 482-4960

COMMERCIAL BUILDING PERMIT APPLICATION

Date Submitted: _____

Permit #: _____ Project Valuation \$ _____

Please complete entire form. If a section is not applicable to your project, please indicate as N/A, not applicable. An application cannot be approved if information is incomplete. Please submit two complete sets of plans/drawings/specifications for each permit application submitted. Applications must be signed and dated. Plan check fee (65% of building permit fee) is due at time of submittal.

Project Name: _____ Site Address: _____

Parcel Number: _____

Applicant Information (If not owner) Name/Address/Phone: _____

Owner Name: _____ E-Mail Address: _____

Owner Address: _____ City/Zip: _____ Phone: _____

Contractor Business Name: _____ Phone #: _____

Contractor Mailing Address: _____

Contractor Registration #: _____ Expiration Date: _____

Architect: _____ Engineer: _____

Building Information:

Building Use: _____ New Building Addition Remodel/Tenant Improvement

If owner-builder, will you be Occupying this structure? Yes No Renting? Yes No Selling? Yes No

Use of Improvement: Residential Commercial Industrial Garage Storage Other _____

Square Footage of proposed remodel/addition/construction: _____ sq ft

Type of Construction: IA IB IIA IIB IIIA IIIB VA VB

Occupancy Classification: _____ No of Units (Apts.): _____

Number of stories: _____ Bldg Height: _____ Floor area: _____ sf

Mezzanine Area: _____ sf Canopy area: _____ sf Roof Area: _____ sf

Sprinkler System: Yes No Area Protected _____ sf Valuation: \$ _____

Description of work: _____

Mechanical/Plumbing Information: New/change to Plumbing or Mechanical Yes No

Mechanical:

Air Conditioning Yes No
Heating/Cooling system: Electric Forced Air Heat Pump
 Cadet/Baseboard Gas/Oil Boiler
 Radiant
Size _____ BTU's # of Thermostats _____

Will you be installing LPG burning appliance? Yes No

Contractor Business Name: _____ Phone #: _____

Contractor Address: _____

Contractor Registration #: _____ Expiration Date: _____

Plumbing:

Sinks # _____ Dishwashers # _____ Clothes Washers # _____
Toilets # _____ Urinals # _____ Showers # _____ Bathtub/Shower Combo # _____
Water Heaters # _____ Floor Drains # _____ Drinking Fountains # _____
Hose Bibs# _____

Contractor Business Name: _____ Phone #: _____

Contractor Address: _____

Contractor Registration #: _____ Expiration Date: _____

Zoning Designation:

C-1 (Community Business) C-2 (Neighborhood Commercial)
 C-3 (General Commercial) I (Industrial District)

SEPA Exempt (State Environmental Policy Act): Yes No

Submittal Documents:

Construction Drawings Development Drawings Schematic Drawings
 Written Scope of Work Verbal Scope of Work Manufacturers Literature
 Site Plan Other

Submittal Documents: Construction drawings, special inspection and structural observation programs, and other data shall be submitted in two or more sets.

Required information construction drawings: Construction drawings shall be dimensioned and drawn upon suitable material. Construction drawings shall be of sufficient clarity to indicate the location, nature and extent of the proposed work and show detail that it will conform to the provisions of this code and relevant laws, ordinances, rules and regulations, as determined by the Building Official.

I hereby certify that the above information is correct to the best of my knowledge. Any changes will be reported to the City of Elma Building Official immediately.

Signature _____
Owner/Agent

Date: _____

Commercial Mechanical and Plumbing Unit List

Fixture Counts

Plumbing	
Atmospheric Type Vacuum Breakers – Thru 5	
Atmospheric Type Vacuum Breakers – Over 5	
Ea. Lawn Sprinkler System – Includes Back Flow	
Gas Piping System – Plumbing – Thru 5	
Grease, Oil/Water Interceptor	
Medical Gas Piping Serving 1 – 5 Outlets	
Medical Gas Piping Serving Over 5 Outlets, Ea.	
New/Modify of Water Piping/treatment Equip Ea.	
Non-Atmospheric Backflow Protective Dev <=2”	
Non-Atmospheric Backflow Protective Dev > 2”	
Plumbing Fixture – Back Flow Valve	
Plumbing Fixture - Bathtub	
Plumbing Fixture – Bidets	
Plumbing Fixture – Clothes Washer	
Plumbing Fixture – Dish Washer	
Plumbing Fixture – Drinking Fountain	
Plumbing Fixture – Floor Drain	
Plumbing Fixture –Floor Sink	
Plumbing Fixture – Hose Bib	
Plumbing Fixture – Kitchen Sink	
Plumbing Fixture – Laundry Tray	
Plumbing Fixture – Lavatories	
Plumbing Fixture – Other	
Plumbing Fixture – Roof Drains/Ldrs	
Plumbing Fixture – Shower	
Plumbing Fixture – Sumps	
Plumbing Fixture – Turnaround	
Plumbing Fixture – Urinal	
Plumbing Fixture – Water Closet	
Plumbing Fixture – Water Heater	
Plumbing Fixture – Water Heater/Vent	
Plumbing Fixture – Rain Leaders	
Rainwater System per Drain Inside Bldg	
Reclaimed Water	
Repair/Alter Drainage or Vent Piping/Fixture	
Underslab Plumbing (Only with no fixtures installed)	
Water Heater/Vent	

Mechanical	
Air Handler < 10000 CFM	
Air Handler > 10000 CFM	
Air to Air Heat Exchanger	
Appliance Vent	
Appliance/Equip Regulated but Not Shown	
Atmospheric Type Vacuum Breakers – Thru 5	
Atmospheric Type Vacuum Breakers – Over 5	
Boiler/Compressor <= 3HP or 100,000 BTU	
Boiler/Compressor over 3 HP or 100,000 BTU	
Boiler/Compressor > 15 HP or 500,000 BTU	
Boiler/Compressor > 30 HP or 1,000,000 BTU	
Boiler/Compressor > 50 HP or 1,750,000 BTU	
Domestic Type Incinerator	
Evaporative Cooler Non Portable	
Exhaust Hood – Class 1 Hood and Duct System	
Exhaust Hood – Class 2 Hood and Duct System	
Floor Furnace	
Forced Air/Grav Furn < 100,000 BTU	
Forced Air/Grav Furn > 100,000 BTU	
Gas Piping System – Each 1 over 4	
Gas Piping System – Thru 4	
Hazard Process Pipe System – Over 4, Ea.	
Hazard Process Pipe System – Thru 4	
HVAC (Heat Pump) Over 3 HP or 100K BTU/H	
HVAC (Heat Pump) Thru 3 HP or 100K BTU/H	
Mechanical Plan Check by Quarter Hours	
Medical Gas Piping Serving 1 – 5 Outlets	
Medical Gas Piping Serving Over 5 Outlets, Ea.	
Modification of Heating/Cooling Unit	
Non-Hazard Process Pipe – Thru 4	
Non-Hazard Process Pipe Over 4, ea	
Radon Test Kit – 1 st Floor Multi Family Dwelling	
Stove/Insert – Gas	
Suspended, Recessed, or Floor Mounted Heater.	
Ventilation Fan Connected to Single Duct	
Ventilation System Not Part of Heat/AC	
Wood Stove/Insert - Wood	

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COMMERCIAL BUILDING PERMIT SUBMITTAL CHECKLIST

Applicants Name _____ Date _____

Project Location _____

Occupancy Classification: _____ Type of Construction: _____ Allowable Floor Area: _____ # of Stories: _____

Occupant Load: _____ Height Modifications: _____ Area Modifications: _____

Please use this checklist to aid in preparing a complete building permit application package. Most permit processing delays are the result of incomplete or inadequate permit submittal information. This checklist has been developed in an effort to expedite the application review process. Please check off each line as you identify that your submittal contains the required information, place N/A on lines that do not apply to you specific project, then submit the checklist with your application.

Office Applicant

Documents Required: (for each proposed structure)

- | | | | |
|---|--------------------------|--------------------------|---|
| 1 | <input type="checkbox"/> | <input type="checkbox"/> | Completed commercial building permit application, including all parcel, applicant, and square footage information |
| 2 | <input type="checkbox"/> | <input type="checkbox"/> | Current copy of contractor's license |
| 3 | <input type="checkbox"/> | <input type="checkbox"/> | 3 Copies of an approved site plan
(Note: If proposed structure is within 20' of a property line, or within 40' of an existing building, additional fire resistive requirements may apply. See IBC Chapter 5 & 6 for limitations) |
| 4 | <input type="checkbox"/> | <input type="checkbox"/> | Completed Mechanical/Plumbing unit charge list or permit application |
| 5 | <input type="checkbox"/> | <input type="checkbox"/> | Completed Energy Code application and/or heat loss calculations and compliance information. |
| 6 | <input type="checkbox"/> | <input type="checkbox"/> | Completed SDAP application and plans if new impervious surfaces exceed 5000 square feet, or if otherwise req'd |
| 7 | <input type="checkbox"/> | <input type="checkbox"/> | Completed address request form (include copy of site plan with address request) |
| 8 | <input type="checkbox"/> | <input type="checkbox"/> | Completed copy of Geo-Technical report, if required; <i>(make sure that Geo-tech has reviewed plans prior to submittal)</i> |

Construction Plans: (3 sets required) Verify that all of the following are provided:

- | | | | |
|----|--------------------------|--------------------------|--|
| 8 | <input type="checkbox"/> | <input type="checkbox"/> | Recognized scale |
| 9 | <input type="checkbox"/> | <input type="checkbox"/> | Floor plan(s) (use of rooms) |
| 10 | <input type="checkbox"/> | <input type="checkbox"/> | Elevations of all sides |
| 11 | <input type="checkbox"/> | <input type="checkbox"/> | Foundation plan |
| 12 | <input type="checkbox"/> | <input type="checkbox"/> | Floor & roof framing plans |
| 13 | <input type="checkbox"/> | <input type="checkbox"/> | Building cross section |
| 14 | <input type="checkbox"/> | <input type="checkbox"/> | List of hazardous materials proposed to be used or stored |
| 15 | <input type="checkbox"/> | <input type="checkbox"/> | List of all required special inspections (Fill out Special Inspection Authorization sheet) |

Verify that the Construction plan sheets contain all of the following in detail:

- | | | | |
|----|--------------------------|--------------------------|--|
| 16 | <input type="checkbox"/> | <input type="checkbox"/> | Foundation details (footing, and pier sizes, reinforcements, depths, grades, and anchorage) |
| 17 | <input type="checkbox"/> | <input type="checkbox"/> | Concrete wall details (Sizes; reinforcement size, location and grade; openings, etc) |
| 18 | <input type="checkbox"/> | <input type="checkbox"/> | Structural masonry details (Sizes; reinforcement size, location and grade; openings, etc) |
| 19 | <input type="checkbox"/> | <input type="checkbox"/> | Structural steel details (Sizes; grades; welding details, bolting details, etc) |
| 20 | <input type="checkbox"/> | <input type="checkbox"/> | Floor beams (size, grade, species, spacing and direction) (provide calculations) |
| 21 | <input type="checkbox"/> | <input type="checkbox"/> | Floor joists (size, grade, species, spacing and direction) (provide calculations) |
| 22 | <input type="checkbox"/> | <input type="checkbox"/> | Wall framing detail (size, grade, species, and spacing) |
| 23 | <input type="checkbox"/> | <input type="checkbox"/> | Headers and beams (size, grade, and species for all openings) Provide calculations) |
| 24 | <input type="checkbox"/> | <input type="checkbox"/> | Roof framing detail (size, grade, species, spacing, direction and drainage provisions) |
| 25 | <input type="checkbox"/> | <input type="checkbox"/> | Mechanical systems detail (locations, sizes, support, dampers, smoke control and/or ventilation systems, etc) |
| 26 | <input type="checkbox"/> | <input type="checkbox"/> | Plumbing systems detail (sizes, penetration fixture locations & descriptions, piping & vent protection devices, etc) |

Additional information required on plans:

*The construction documents shall show in sufficient detail the location, construction, size and character of all portions of the means of egress in compliance with the provisions of the IBC. The documents shall designate the number of occupants to be accommodated on every floor, and in all rooms and spaces.

- 27 **Means of egress:** The following MUST be indicated on plans:
* Exit Access (IBC Section 1014).
* Exit & Exit Access Doorways (IBC 1015)
*Exit Access Travel Distance (IBC 1016)
- 28 Are all required fire resistive walls indicated on the plans and identified by an assembly identification number?
29 Are all required horizontal fire resistive assemblies indicated on the plans and identified by an assembly number?
30 Are protective devices or listed assemblies indicated for all penetrations of fire resistive construction assemblies?
31 Are protective devices or listed assemblies indicated for all door & window openings in fire resistive construction?
32 Are all windows and door sizes indicated? U value of windows _____ U value of doors _____
33 Are all glazing requirements clearly identified, including all tempered safety glazing, laminated glass, etc?
34 Are all insulation values indicated? Walls R- _____; Ceiling R- _____; Floor R- _____ Slab/Foundation R - _____
35 Are all stair and ramp details indicated? (Including handrails, rise and run, stair width, landings, ramp slope, etc)
36 Are guardrails indicated on landings or walking surfaces greater than 30" above grade?
37 Are all required accessible facilities indicated, clearly describing all accessible bathroom facilities and drinking fountains; accessible paths of exit travel; accessible parking and exterior paths of travel; etc.
38 Is a propane tank to be installed? _____ If yes, what size? _____ Is the location indicated on the site plan?
39 Are all gas (propane or natural) fueled appliances identified on the plan sheets?
40 Are any propane appliances proposed to be located in a basement, underfloor space or pit situation? _____
(If yes, revisions are required. Propane is prohibited in locations where heavier-than-air gas might collect)
41 Does the building contain a fire alarm system? _____
42 Do the plans include a fire extinguishing system (sprinkler)? _____
43 Do the plans include a commercial kitchen hood? _____ Type: _____

Structural Information: See IBC 2308.12, Seismic Zone D2. (If engineered, skip to line #60)

*Construction documents shall describe the exterior wall envelope in detail to determine compliance with the IBC. Documents shall provide wall envelope to include flashing, intersections with dissimilar materials, corners, end details, control joints, intersections at roof or parapets, means of drainage, water-resistive membrane and details around openings.

- 44 Does structure exceed IBC Section 2308? _____ If yes, full structural engineering is required.
45 Is the structure 4000 square feet or larger? _____ If yes, full structural engineering is required*
46 Is there any non-conventional framing (steel, log, foam panel, etc)? _____ If yes, full struc. eng. is required*
47 Do any light frame bearing walls exceed 10' in height? _____ If yes, lateral engineering is required.*
48 Are there any structural members supporting concentrated point loads? (ie: large gravity loads bearing at a specific point on a beam) _____ If yes, are they identified and are structural calculations provided? _____
49 Are any covered porches or roof extensions greater than 6' proposed? _____ If yes, lateral engineering is required.*
50 Are all braced wall lines and braced wall panel types and locations clearly indicated on the plan sheets?
51 Are interior braced wall lines indicated for building portions greater than 25 ft in length? (2308.12)
52 Does the proposed structure satisfy the minimum IBC prescriptive braced wall requirements?
If not, or if any of the following "irregular structures" exist, then lateral engineering is required.*
IRREGULAR STRUCTURES:
53 Are any braced wall panels offset from the vertical plane directly above a foundation?
(Some exceptions apply, see IBC 2308.12.6)
54 Are any floors or roofs **not** laterally supported on all edges by braced wall lines? (2308.12.2)
55 Does any roof or floor extend more than 6 feet beyond a braced wall line? [2308.6(2) & 2308.12.6(4)]
56 Do any required braced wall panels (BWPs) extend more than 1 ft over an opening in the wall below?
[BWPs may extend over an opening 8 ft or less in width if the header is 4 x 12 or larger), (2308.12.6 (3)]
57 Are any floor openings more than 12' wide or more than 50% of the least floor dimensions? [2308.12.6 (6)]
58 Are any portions of floor vertically offset such that the floors can not be tied together? [2308.12.6 (4)]
59 Do any braced wall lines not meet in a perpendicular direction? [2308.12.6 (5)]

*Structural engineering documents if engineering is required, the following must be included:

- 60 Coversheet identifying the project location, scope, and the design professionals address and phone number
61 Design criteria indicated: 2009 IBC; ground snow load 25 psf; wind 100 mph, exposure B; seismic zone D2
62 Stamped structural calculations, 2 sets
63 Stamped structural general notes, 2 sets
64 WA State registered engineers or architects original seal, signature, signature date, & registration expiration date.
65 All engineers' or architects' construction requirements must be clearly and accurately transferred to the plans

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WARNING AND DISCLAIMER

The permit which has been issued is issued upon the implied conditions that

- (1) at the time of its issuance, the applicant has complied with all existing requirements;
and
- (2) during actual construction, all existing standards and requirements covering and controlling such construction are complied with.

If at any time during construction, the project is found to be in non-compliance in any manner whatsoever, construction will be stopped until such steps are taken as will bring the project into compliance.

No action or failure upon the part of the city or its employees or agents shall excuse any non-compliance, nor give rise to any liability on the part of the city or its employees or agents.

Situations most frequently giving rise to non-compliance are failure to locate a building so as to comply with appropriate set-in standards or to have inspections made at appropriate times.

Issuance of permit is specifically made subject to the conditions contained in paragraphs 1 and 2 and acceptance thereof.

Please read, sign, and date receipt and acceptance of these conditions.

Signature

Date