



**Project Information:** \_\_\_\_\_

**Project Name:** \_\_\_\_\_ **City/Jurisdiction:** \_\_\_\_\_

**General Project Submittal Minimum Standards:**

**Plans which do not contain the minimum information required will not be accepted for plan check.**

| Applicant | Office Use Only |   |
|-----------|-----------------|---|
|           |                 | Minimum Plan Review Standards   |
|           |                 | Completed Permit Application required at the time of plan submittal.  |
|           |                 | Clear and legible drawings.   |
|           |                 | Lines and letters must be dark enough to provide good contrast on paper.  |
|           |                 | Paper must be sturdy, such as blueprint or standard drafting paper. Tracing paper, graph paper, poster board, and cardboard are <u>not</u> acceptable.                          |
|           |                 | Text must be easily read without magnification.   |
|           |                 | Pencil drawings are <u>not</u> acceptable (including corrections or alterations).   |
|           |                 | Scale: All drawings must be drawn to scale.   |
|           |                 | Size Requirements: Drawings must be of one size. Size of plans must be adequate size to allow for plan review. Do not attach information with clips, tape, glue, or staples.    |
|           |                 | Washington State Law requires that any registered professional who prepares or supervises the preparation of drawings and construction documents stamp and sign such documents. |
|           |                 | Compass direction and clearly marked scale on all plans.  |
|           |                 | Provide a narrative of the scope of work.   |
|           |                 |   |

**Requirements:**

| Applicant | Office Use Only |   |
|-----------|-----------------|---|
|           |                 | Description of Requirements   |
|           |                 | Numbers of plan sets are dictated by the Permitting Authority. A minimum of three sets of plans and cut sheets are required for submittal. Additional sets may be submitted if the applicant requires more than one stamped, approved set of plans. |
|           |                 |   |
|           |                 | <b>Working Drawings – Floor Plans:</b>  |
|           |                 | Location of flammable and combustible liquids in the building or outside the building with complete site design.  |
|           |                 | Location and type of fire walls/doors that will be used.  |
|           |                 | Location and type of vehicle protection.  |
|           |                 | Depth of tank.  |
|           |                 |   |
|           |                 | <b>System Information:</b>  |
|           |                 | Legend showing all symbols, device descriptions, size, and location.  |
|           |                 | Cut sheets for all material being used and compatibility with material being used.  |
|           |                 | All piping, tubing, valves and fittings need to be shown on the plans with proper identification on the piping stating what is being conveyed.  |
|           |                 | Spill control area with type of sealant that will be used, sump, drainage system and monitoring system.   |
|           |                 | Ventilation system that includes a rate of flow of not less than 1 cubic feet per minute per square foot, continuous operation, manual shut off location and location of exhaust and inlet.   |
|           |                 | Separation of incompatible materials; please fill out an HMIS form that is located on the Puget Sound Fire web page under prevention.   |
|           |                 | Sprinkler system design.  |
|           |                 | Explosion control showing all venting.  |
|           |                 | Standby or emergency power system that will be used.  |
|           |                 | Show all controls and leak detection system.  |



**PUGET SOUND  
REGIONAL FIRE AUTHORITY**  
INTERNATIONALLY ACCREDITED FIRE AGENCY

**Flammable & Combustible Liquids**

|  |  |  |
|--|--|--|
|  |  | Emergency alarm system device type with location and supervision and monitoring. |
|  |  | If transferring liquid please indicate if it is an open or closed system.        |
|  |  | The sources of primary and secondary power.                                      |
|  |  | Type of electrical wiring being used.  |
|  |  |  |

**Please read the information below and sign before submitting your application:**

Your application shall be deemed complete only if this checklist is completed and submitted along with the submittal package. Submittals not accompanied by a checklist will not be accepted. Accuracy of the submittal package, including this checklist, is the responsibility of the applicant. Failure to submit an accurate submittal package will be considered an incomplete application by the Plan Reviewer. An incomplete submittal will result in a HOLD. A resubmittal (new submittal package) will be required and always results in a delay.

I have checked the application boxes and have included those requirements in my submittal.

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Signature**