



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. |
| | | |
| | | Working Drawings - Floor Plans: |
| | | Location of all equipment being used in the building. |
| | | Location of any fire barriers, fire walls and stairway enclosures. |
| | | Occupancy type. |
| | | |
| | | System Information: |
| | | Legend showing all symbols, device descriptions, size and type |
| | | Make, model and type of all valves |
| | | Make and model of all piping. |
| | | Make, model and type of all bracing. |
| | | Make, model and type of cabinet. |
| | | Hydraulic calculation for the system. |
| | | Make, model and type of valve supervision. |
| | | Make, model and type of hose connection. |
| | | All testing will be done to NFPA 14 standards. |
| | | Location and type of all pressure relieving devices. |
| | | Location and type of all drains. |



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| | | Type of coating on pipe for corrosion protection. |
| | | |

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