CITY OF



LA GRANDE

CITY OF LA GRANDE/UNION COUNTY BUILDING DEPARTMENT P.O. BOX 670/1000 ADAMS AVENUE LA GRANDE, OR 97850

PHONE: (541)963-1224 FAX: (541)663-8106

COMMERCIAL PLAN REVIEW SUBMITTAL CHECKLIST

BUILDING PERMIT NUMBER

PROJECT NUMBER

Section 107 Submittal documents. Construction documents, statement of special inspections, and other data shall be submitted in one set of digitallyk with each permit application, paper plans will only be accepted when plans are hand drawn. The construction documents shall be prepared by a registered design professional where required by statutes of the jurisdiction in which the project is to be constructed. Where special conditions exist, the Building Official is authorized to require additional construction documents to be prepared by a registered design professional.

Exceptions: The Building Official may waive submission of plans and/or calculations if the work is such that reviewing of plans is not necessary to obtain compliance with this code. The work being done is not highly technical in nature or there is no unreasonable potential risk to life and/or safety of the structure. The erection, enlargement, or alteration of any building, or appurtenance thereto, where the resulting building has a ground area of 4,000 square feet.

	JOB INFORMATION		DESIGN	PROFFESI	ONAL & A	PPLICANT I	NFO.	
Job Name:			Design Prof	fessional:				
Address:			Address:					
City:			City:		State:	Zip:		
Building Occupancy (specific use):			Phone:		Email:			
			Applicant/O	wner:				
			Address:					
			Phone:					
			Email:					
	CHECKLIST - Submit one digital (pdf) cop	оу о						
A cover sheet is required on all plans submitted			MECHANICAL PLANS- equipment location, size,					
Cover sheet	Cover sheet shall include, but is not limited to: see		type, duct layout, fan capacity, gas piping, ect.					
Additional Data Required on cover sheet.			STRUCTUAL CALCULATIONS					
	TITLE BLOCK		ELECTRICA	AL PLANS -	exits, fire a	alarms, and	life	
Owner Name, Address, and Phone numbers			safety equipment					
Building location and Address (if assigned)			PLUMBING PLANS - size water, sewer lines, show					
Project Name			materials					
Designers Name, Address, Phone numbers and email			TRUSS DRAWINGS AND LAYOUT - one set or digital					
Consultant Name, Address, phone numbers and email			(pdf). (preli	minay desi	gn accepta	able)	-	
Contractor(s),	Address, phone numbers and email			-	-			
If Leased Prop	erty, Lessee's Name, Address and Phone #			O	THER			
SHEET INDE	X - calling out all submitted sheets		FIRE ALAR	M DRAWING	3S			
VICINITY MA			FIRE SPRIN	IKLER DRA	WINGS			
Site information: Legal Description, Tax Lot Number, Site Area			HAZAROUS MATERIALS INVENTORY LIST					
Size, Zoning Designation, Fire District			SPECIAL INSPECTION AGREEMENT					
SITE PLAN SHEET (required) to include but not limited to:			MANUFACTURES CUT SHEETS					
Distances from Building to property lines and other			ADDITIONA	L DATA RE	QUIRED O	N COVER S	HEET	
structures			Is the Occupancy Group or Groups shown? 302.1					
Fire Hydrant Locations and distances to proposed building			Are current adopted codes listed?					
Fire Vehicle Access Road, Widths and Turnarounds			What is the total occupant load? Table 1004.1					
Accessible Parking Stalls and Accessible Route to Building			What is the required egress width? 1005.1					
All Easements			What is the plumbing occupant load? 2902.1, Table 2902.1					
ARCHITECTURAL SHEETS			Separated uses or Non-separated uses? 508.2.4, 508.3					
Foundation Plan. Required for complete review only.			Are you using yard increases? 506.1					
Floor Plans - include sq. ft. dimensions, room use, window and			Are you using fire sprinkler increases? 506.3					
door locations	;		Is the total s	equare footage listed? Table 503				
Building Cross	Building Cross Sections - foundation, floor framing, wall			PLAN	REVIEWE	R		
framing and roof details		Da	ate Started					
Building Elevations		Se	ent Letter					
Structural Calculations: Required for new construction		Da	ate Issued					
ADA Disabled Access				APF	PLICANT			
Energy Code D	Documentation	Si	gnature:					
		Pr	int Name:					
		Da	ate:					

Please Check form as follows: X = Submitted, M = if missing and required, N = not applicable