

**LIGHT-HEIGEL  
& ASSOCIATES, INC.**

A full service provider of  
Pennsylvania Uniform Construction Code (UCC) services.

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**Uniform Construction Code**

**BUILDING, STRUCTURE  
AND FACILITY PERMIT**

***Eldred Township***

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LOCAL LIGHT-HEIGEL OFFICE CONTACT INFORMATION:

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# **BUILDING, STRUCTURE, AND FACILITY PERMIT:**

## **Application Requirements**

The following items (1-9) constitute a complete UCC application package for the construction of:

- New buildings, structures and facilities, except:
  - \* **Modular or industrialized construction - please complete the MODULAR CONSTRUCTION BUILDING PERMIT application package**
  - \* **Shell buildings - please complete the BUILDING SHELL PERMIT application package.**
- Additions to existing buildings.
- Alterations (renovations) **that will exceed the scope of ALTERATIONS-LEVEL 1** (as defined in the International Existing Building Code) and **that will be made to existing buildings that are legally occupied.**

### **1. A completed UCC APPLICATION FOR BUILDING PERMIT.**

- Please complete this fully. If an informational item does not apply, indicate this with "NA."
- It is imperative that applicants indicate the name of the **political subdivision** and the **county** where the proposed construction will occur. Without this, we cannot verify that Light-Heigel has jurisdiction for this work. **We will not process applications that lack this information.**

### **2. Payment in full of the amount(s) determined on the COMMERCIAL FEE SCHEDULE.**

Fees paid cover plan review and all inspections.

### **3. Two (2) complete sets of construction drawings and one (1) set of specifications.**

- Seals of licensed design professionals must appear on all sheets and be signed and dated by the designer. (An unlicensed person may prepare construction drawings for the **alteration or remodeling** of a building, if no compensation is paid for their preparation and the construction will not involve changes in the building's structure or means of egress.)
- Drawings must be at least 18" x 24" (but no more than 36" x 42") in size, drawn to scale of no less than 1/8"=1', with sufficient detail to fully indicate the nature and scope of the work to be performed.
- **On the first page of each set**, indicate any systems or installations for which plan submission is deferred (e.g., fire alarm system, pre-engineered truss system, sprinkler system).

Applicants/design professionals should note the following regarding deferred submittals:

- a. Plans for any deferred systems must be submitted as a plan revision at least 2 weeks before proposed installation.
- b. Per §403.43(k) of the UCC regulation, these plans must bear the signature of the design professional in responsible charge and a brief statement indicating that the design professional has reviewed the plans and found them to be in general conformance with the design of the building or structure.

- Provide a **building code summary** on the first or second sheet of the drawings, with all applicable building code sections filled out.
4. **Two (2) copies of a site plan showing the size and location of the new construction, with accurate boundary lines, distances from lot lines, and the established street grades and proposed finish grades.** (See also the **UCC PLAN REVIEW CHECKLIST** for additional requirements.)
  5. **If applicable, a copy of the SPECIAL INSPECTIONS AND OBSERVATIONS STATEMENT.**
    - This document must be completed and submitted in the application package whenever one or more of the special inspections or structural observations (detailed in sections 1704 and 1709 of the *International Building Code*) is required for the proposed work.
    - This statement must be signed by the design professional in responsible charge of the project.

There are occasions when building owners or their representatives may not know who will be performing the special inspections required in Chapter 17, at the time they make application for a UCC building permit. When this occurs, applicants may submit, in lieu of a completed **SPECIAL INSPECTIONS AND OBSERVATIONS STATEMENT** form, a letter stating:

- Why the **SPECIAL INSPECTIONS AND OBSERVATIONS STATEMENT** cannot be submitted with the application for a building permit;
- The applicant understands that two (2) completed copies of the **SPECIAL INSPECTIONS AND OBSERVATIONS STATEMENT** will have to be submitted to our inspector at the time of the first required inspection; and,
- The applicant is aware that the first required inspection (typically, the footer inspection) will not occur, and that work may not continue, unless the completed copies of the **SPECIAL INSPECTIONS AND OBSERVATIONS STATEMENT** are available at the job site.

A Stop Work Order will be issued, should work continue after our inspector has visited the construction site and learned that the required documents are not available.

6. **When construction will occur in a flood plain, one (1) copy of one of the certifications required in section 1612.5 of the *International Building Code*.**
7. **The following information indicating compliance with the *International Energy Conservation Code*.**

**Submit one (1) copy of the compliance certificate generated by the COMcheck EZ software.** Be sure to utilize version 4.0 Release 1 (or higher) and to select the IECC as the code to which you will demonstrate compliance.

**OR**

**Submit one (1) copy of the ENERGY CODE PRESCRIPTIVE COMPLIANCE REPORT** with the face page and all applicable main component prescriptive reports completely filled out.

**EXCEPTION:** If the building or structure is exempt per ASHRAE 90.1 2.3B, **include a letter signed by the design professional in responsible charge that the building or structure will use neither electricity nor fossil fuels and is thus exempt from energy conservation code requirements.**

Note: If the proposed construction involves a building or structure classified in use group R-2 and it is not more than three stories in height above grade, compliance should be demonstrated with the **residential** requirements of the *International Energy Conservation Code*. In this case, or if the building permit application is for a R-3 occupancy, supply three (3) copies of the compliance report generated by the REScheck software.

To obtain copies of the US DOE COMcheck EZ (use version 4.0 Release 1 or higher) or REScheck (use version 3.6 Release 1 or higher) software needed for determination of energy code compliance, visit the US DOE "Building Energy Codes Program" website ([www.energycodes.gov](http://www.energycodes.gov)).

8. **If alternative construction methods or materials are proposed for use, a statement signed by the design professional, certifying that the proposed methods or materials meet the requirements of 34 PA Code §403.44.**
9. **A fully completed copy of the UCC PLAN REVIEW CHECKLIST.**

Failure to include this or to fill out the list completely will delay review of your application and may be cause for return of the entire application package without review. If an item on the list does not apply, indicate this by placing "NA" on the check-off line.

Uniform Construction Code (UCC)  
**APPLICATION FOR BUILDING PERMIT**

|                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                              |                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                            |                                                                                                                                                          |                                                                                            |
|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <b>Application Type</b>                                                                                        | <input type="checkbox"/> Accessibility <b>Only</b> Review<br><input type="checkbox"/> Alteration or Renovation<br><input type="checkbox"/> New Structure/Facility<br><input type="checkbox"/> Plan Revision or Partial Occupancy Request                                                                                                                                                 |                                                                                                                              |                                                                                                                              | <input type="checkbox"/> Addition<br><input type="checkbox"/> New Building<br><input type="checkbox"/> Phased Approval<br><input type="checkbox"/> Unapproved Existing Building                                                                                                                                                                                                                                          |                                                                                                                            |                                                                                                                                                          |                                                                                            |
| <b>Use/Occupancy Classification:</b><br>Check box to <u>left</u> of applicable group.<br>Check all that apply. | <input type="checkbox"/> A-1<br><input type="checkbox"/> F-1<br><input type="checkbox"/> I-1<br><input type="checkbox"/> R-3 Adult Care                                                                                                                                                                                                                                                  | <input type="checkbox"/> A-2<br><input type="checkbox"/> F-2<br><input type="checkbox"/> I-2<br><input type="checkbox"/> R-3 | <input type="checkbox"/> A-3<br><input type="checkbox"/> H-1<br><input type="checkbox"/> I-3<br><input type="checkbox"/> R-3 | <input type="checkbox"/> A-4<br><input type="checkbox"/> H-2<br><input type="checkbox"/> I-4<br><input type="checkbox"/> R-4                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> A-5<br><input type="checkbox"/> H-3<br><input type="checkbox"/> M<br><input type="checkbox"/> S-1 | <input type="checkbox"/> B<br><input type="checkbox"/> H-4<br><input type="checkbox"/> R-1<br><input type="checkbox"/> S-2<br><input type="checkbox"/> U | <input type="checkbox"/> E<br><input type="checkbox"/> H-5<br><input type="checkbox"/> R-2 |
| <b>Site Information</b><br>(Political Subdivision & County names are required.)                                | Project Name _____<br>Street <b>Name</b> and # _____<br>City _____ State _____ Zip Code _____<br>Political Subdivision _____ County _____                                                                                                                                                                                                                                                |                                                                                                                              |                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                            |                                                                                                                                                          |                                                                                            |
| <b>Special Requirements &amp; Documentation</b>                                                                | Check each block below indicating that all of the following will be submitted with this application:<br><input type="checkbox"/> Two (2) site plans<br><input type="checkbox"/> One (1) completed copy of the <b>UCC PLAN REVIEW CHECKLIST</b><br><input type="checkbox"/> One (1) set of specifications ( <b>only if Addition, Alteration, New Building or New Structure/Facility</b> ) |                                                                                                                              |                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                            |                                                                                                                                                          |                                                                                            |
|                                                                                                                | Does this construction involve modular units built in a factory?                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                     |                                                                                                                              | If " <b>Yes</b> ," submit 1 copy of a letter from a licensed design professional certifying that construction within the modular units (or the fully assembled modular building) and hidden from view will fully comply with all requirements of the UCC.                                                                                                                                                                |                                                                                                                            |                                                                                                                                                          |                                                                                            |
|                                                                                                                | Is this construction regulated by the Health Care Facilities Act?                                                                                                                                                                                                                                                                                                                        | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                     |                                                                                                                              | If " <b>Yes</b> ," submit 1 copy of approval letter from the Pennsylvania Department of Health.                                                                                                                                                                                                                                                                                                                          |                                                                                                                            |                                                                                                                                                          |                                                                                            |
|                                                                                                                | Is this construction exempt from energy code requirements?                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                     |                                                                                                                              | If " <b>Yes</b> ," submit 1 copy of letter indicating that that the building or structure will use neither electricity nor fossil fuels, and thus is exempt per <i>ASHRAE 90.1</i> , §2.3(B).<br>If " <b>No</b> ," submit 1 copy of the COMcheck-EZ Certificate or the <b>ENERGY CODE PRESCRIPTIVE COMPLIANCE REPORT</b> .                                                                                               |                                                                                                                            |                                                                                                                                                          |                                                                                            |
|                                                                                                                | Is project in flood hazard area?                                                                                                                                                                                                                                                                                                                                                         | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                     |                                                                                                                              | If " <b>Yes</b> ," submit 1 copy of one of the flood hazard certifications mandated in section 1612.5 of the <i>International Building Code</i> .                                                                                                                                                                                                                                                                        |                                                                                                                            |                                                                                                                                                          |                                                                                            |
|                                                                                                                | Are any of the <i>International Building Code</i> (Chapter 17) special inspection or structural observations required?                                                                                                                                                                                                                                                                   | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                     |                                                                                                                              | If " <b>Yes</b> ," submit 1 copy of the <b>SPECIAL INSPECTIONS OBSERVATIONS STATEMENT</b> .                                                                                                                                                                                                                                                                                                                              |                                                                                                                            |                                                                                                                                                          |                                                                                            |
|                                                                                                                | Will an alternative construction method or material be used on this project?                                                                                                                                                                                                                                                                                                             | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                     |                                                                                                                              | If " <b>Yes</b> ," submit a signed statement indicating that the proposed method or material meets the requirements of 34 PA Code §403.44.                                                                                                                                                                                                                                                                               |                                                                                                                            |                                                                                                                                                          |                                                                                            |
|                                                                                                                | Is this application for "phased approval"?                                                                                                                                                                                                                                                                                                                                               | <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                     |                                                                                                                              | If " <b>Yes</b> ," submit a letter signed by the design professional and owner acknowledging that the issuance of a permit for phased construction provides no assurance that the municipality will grant approval of any UCC permits needed to complete the construction, and that the design professional and owner will ensure that the building/structure fully complies with all UCC requirements before occupancy. |                                                                                                                            |                                                                                                                                                          |                                                                                            |

|                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Project Data</b>                                                                                              | <p>Lot Number: _____ Block Number: _____</p> <p>Does municipality have a zoning ordinance? <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>         If <b>"Yes,"</b> has permit been acquired?<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No If <b>"Yes,"</b> list date acquired: _____</p> <p>Minimum setbacks required by municipal zoning ordinance (in feet):<br/> <b>Front:</b> _____ <b>Rear:</b> _____ <b>Right Side:</b> _____ <b>Left Side:</b> _____</p> <p>Sq. ft. of conditioned space _____<br/>         Sq. ft. of unconditioned space _____</p> <p>Number of stories above grade _____<br/>         Does it have a basement? <input type="checkbox"/> Yes <input type="checkbox"/> No<br/>         Total floor area (sq. ft.) _____</p> <p>Floor area <b>new</b> construction (sq. ft.) _____<br/>         Floor area of <b>addition</b> (sq. ft.) _____<br/>         Floor area <b>renovated</b> (sq. ft.) _____</p> <p># of multi-family dwelling units _____<br/>         # of accessible dwelling units _____</p> <p>Type(s) of construction per Chapter 6 of the <i>International Building Code</i> (check all that apply):<br/> <input type="checkbox"/> IA <input type="checkbox"/> IB <input type="checkbox"/> IIA <input type="checkbox"/> IIB <input type="checkbox"/> IIIA <input type="checkbox"/> IIIB <input type="checkbox"/> IV <input type="checkbox"/> VA <input type="checkbox"/> VB</p> <p>Fire suppression: <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> None</p> <p>If application applies to an existing building that is <b>"legally occupied"</b>, indicate permits held:<br/>             Fire and Panic Occupancy Permit File Number: _____<br/>             Municipal Occupancy Permit Permit Number: _____<br/>             Municipality Name _____<br/>             L&amp;I UCC Certificate of Occupancy File number: _____</p> <p>If <b>"legally occupied,"</b> you must select which code requirements the building will comply with (choose only one):<br/> <input type="checkbox"/> <i>International Existing Building Code</i> <input type="checkbox"/> Chap. 34, <i>International Building Code</i></p> <p>Cost of Construction: _____<br/>         Tax Parcel ID #: _____</p> |
| <b>Design Professional In Responsible Charge</b><br><u>Seal must be in space to right of name &amp; address.</u> | <p>Name: _____<br/>         Address: _____<br/>         PA License #: _____<br/>         E-Mail: _____<br/>         Phone: _____<br/>         Fax: _____</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |

Permit #: \_\_\_\_\_

Date: \_\_\_\_\_

|                             |                                                                                                                                                                                                                                                                                                                                                                         |
|-----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Owner Information</b>    | Owner Name _____<br>Street Address _____<br>City _____ State _____ Zip Code _____<br>Phone Number _____                                                                                                                                                                                                                                                                 |
| <b>Deferred Submissions</b> | If you are not submitting plans and other documentation for any of the items listed below with this application, check the appropriate box below <u>and</u> indicate this on the first page of each building plan set.<br><input type="checkbox"/> Fire Alarm System <input type="checkbox"/> Truss Shop Drawings (Certified) <input type="checkbox"/> Sprinkler System |

**Fees:**

Refer to **COMMERCIAL FEE SCHEDULE**

**Applicant's Certification:**

As the owner or the authorized agent of the project for which this application is filed, I certify that:

1. The estimated construction cost and all other information provided as part of this application for a building permit is correct.
2. The building or structure described in this application will not be occupied until all known code violations are corrected and a Certificate of Occupancy has been received.
3. This project will be constructed in accordance with the approved drawings and specifications (including any required non-design changes) and the Uniform Construction Code standards as specified in 34 PA Code Chapters 401-405.
4. Any changes to the approved documents will be filed with the municipal UCC Building Code Official.
5. If the licensed architect or engineer in responsible charge of this construction should change, written notice of the change will be provided to the municipal UCC Building Code Official.
6. When required, up to 20% of the total cost of any work performed on an area of primary function in an existing building will be expended to provide an accessible route to the area of primary function.
7. No error or omission in either the drawings and specifications or application, whether approved or not, shall permit or relieve me from constructing the work in any manner other than provided for in 34 PA Code Chapters 401-405.

Applicant Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone Number \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

## Usage Group Factors

| Factor | Usage Group                                            |
|--------|--------------------------------------------------------|
| 2.0    | I2                                                     |
| 1.6    | A1                                                     |
| 1.5    | (A3-Churches), I3                                      |
| 1.2    | A2, A4, (A3-nonchurch), A5<br>B, E, H5, I1, I4, R1, R4 |
| 1.0    | R2, R3                                                 |
| 0.9    | M                                                      |
| 0.7    | F1, F2, H1, H2, H3, H4, S1, S2                         |
| 0.5    | U                                                      |

Usage Group definitions per Chapter 3 of current International Building Code.

### **A Assembly**

- A-1 Theaters
- A-2 Restaurants
- A-3 Worship, recreation and amusement
- A-4 Indoor Sports
- A-5 Outdoor Sports

### **B Business**

### **E Education**

### **F Factory**

- F-1 Moderate Hazard
- F-2 Low Hazard

### **H High Hazard**

- H-1 Detonation Hazard
- H-2 Deflagration or Accelerated burning
- H-3 Readily support combustion
- H-4 Health hazards
- H-5 Semiconductor fabrication

### **I Institutional**

- I-1 Ambulatory
- I-2 Hospital
- I-3 Prison
- I-4 Day Care

### **M Mercantile**

### **R Residential**

- R-1 Hotel
- R-2 Apartment House
- R-3 One & Two Family
- R-4 Assisted Living

### **S Storage**

- S-1 Moderate Hazard
- S-2 Low Hazard

### **U Utility & Misc**

Uniform Construction Code (UCC)  
**UCC PLAN REVIEW CHECKLIST**

**This checklist must accompany permit applications for new buildings/structures, additions and renovation projects (those which exceed the scope of ALTERATIONS-LEVEL 1)**

**ALL INFORMATION MUST BE FILLED IN, CHECKED OR MARKED "N/A"**

|                                                                                                                                                                       |                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| Project Name:                                                                                                                                                         |                                                                                                                                              |
| Project Address:                                                                                                                                                      |                                                                                                                                              |
| Owner/Agent:                                                                                                                                                          | Telephone:                                                                                                                                   |
| Design professional or other person we can contact about info on this form and other project details (if same as Owner/Agent, just provide fax # and e-mail address): | <div style="height: 30px;">Telephone: _____</div> <div style="height: 30px;">Fax: _____</div> <div style="height: 30px;">E-mail: _____</div> |

**General Requirements:**

All drawings shall be sealed, signed, and dated by a design professional (licensed architect or engineer). The only exception is when all of the following apply:

- a) The proposed work only involves remodeling or alterations of an existing building or structure.
- b) The proposed work does not change the building's structure or means of egress.
- c) The person preparing the plans is not compensated for the preparation of the drawings.

All drawings must be neatly drawn with clean, crisp lettering --- they must remain legible after reduction for microfilming.

Computer-generated vicinity maps obtained from web-based services (such as *MapQuest*) are acceptable, as long as the roadways or street names are legible and will remain that way after reduction for microfilming.

When photographs (including digital ones) are submitted to show building elevations, the images must be in focus and correctly exposed.

A Pennsylvania Department of Transportation (PennDOT) permit allowing access to a highway under its jurisdiction is not required at the time that application is made for a UCC building permit. If the highway occupancy permit issued by PennDOT requires a location of the building/structure differing from that approved under the UCC building permit, applicants must send the municipal UCC BCO a letter requesting a determination whether a revision of approved plans will be required.

While we understand that many items on this checklist may not be included in some alteration or renovation projects, we request that all applicants work through the entire checklist to ensure that any necessary items are included. If any item is not necessary, please check N/A ("not applicable"). This will greatly facilitate review and approval of projects.

If any of the non-mandatory sections (any sections other than Site Plans and Architectural Plans) in this document do not apply to the proposed work, please check the "N/A" box beside the section title (rather than fill in "N/A" next to each item in that section).

## SITE PLANS:

- |                              |                              |                                                                                                                                              |
|------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | a. Site plans shall be prepared to scale (not less than 1"=20'), with legend, north arrow, and <u>separate</u> vicinity (site location) map. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | b. Show the correct street address, parcel number and required municipal zoning (if there is local zoning ordinance) on the site plans.      |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | c. Show and identify all property lines and rights-of-way, with distance from property lines and adjacent buildings on site plans.           |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | d. Show all accessible parking spaces and signage per ICC/A NSI A117.1 and the <i>International Building Code</i> on site plan.              |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | e. Show accessible curb cuts, ramps and access ways to the building.                                                                         |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | f. Show all existing and proposed driveway entrances.                                                                                        |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | g. Identify adjacent land uses and zoning.                                                                                                   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | h. Show all easements, flood ways, and required buffers.                                                                                     |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | i. Show existing and proposed utilities (with backflow preventers) to serve the site.                                                        |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | j. Show existing and proposed finish grades.                                                                                                 |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | k. Show details, sections, and elevations needed for construction.                                                                           |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | l. Show all buffer and screening landscaping.                                                                                                |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | m. Show all required parking and loading spaces and calculations.                                                                            |

## ARCHITECTURAL PLANS:

- |                              |                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|------------------------------|------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | a. Show architectural floor plans of each floor. These pages must be at least 18" x 24" in size (but not more than 36" x 42"), drawn to a scale of not less than 1/8" = 1'. Indicate (or reproduce) the approved, tested hourly rating, number, and location of all rated members and assemblies (walls, columns, beams, floor and ceiling, and ceiling and roof fire-rated design assemblies).                                                                                                                                                           |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | b. Show the square footage of each floor on the corresponding floor plans.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | c. Identify the names and uses of each room.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | d. Furnish door schedule(s), including size, type, rating (if any) and hardware.                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | e. Provide all glazing schedules.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | f. Show elevations with dimensions defining overall building height, floor-to-floor heights, or heights to ridge and eave as applicable to the type of building construction listed on the UCC application. (Note: Where an existing building is involved, photographs of all sides of the building may be submitted to show elevations. <b>These will be acceptable only if they show <u>all elements</u> necessary to determine compliance with the UCC.</b> )                                                                                          |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | g. Provide basement percentage-below-grade calculations.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | h. Indicate roof slopes, drainage system and sized through wall scupper, if applicable to the project.                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | i. Show fixed seating for assembly occupancy to allow determination of occupancy posting required by <i>International Building Code</i> .                                                                                                                                                                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | j. Show wall sections with proposed material sizes, construction, and fire-rated assemblies.                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | k. Show proposed plumbing fixtures and privacy screens on the plans.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | l. If masonry construction is proposed, include the following information:<br>___ Type of brick ties and spacing of weep holes<br>___ Control joints<br>___ Placement of wall flashing and reinforcement                                                                                                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | m. If appropriate for the proposed occupancy, plans should identify all hazardous material control areas, fire barriers, and the required fire-resistance ratings for these barriers. All identified control areas shall list the name, class, quantity and method of storage of all hazardous materials processed, manufactured or used in a manufacturing process and contained within its fire barriers. Provide a Material Safety Data Sheet for each listed hazardous material. See sections 414 and 415 of the <i>International Building Code</i> . |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | n. Show the floor slab vapor barrier.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | o. Show foundation waterproofing, if applicable.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | p. All penetrations of fire-rated construction must be per manufacturer's details. The details shall meet or exceed the rating of construction being penetrated. The penetration details shall be exactly as tested by an approved testing laboratory or agency and shall include                                                                                                                                                                                                                                                                         |

their system numbers. New penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs.

- |                              |                              |                                                                                                                                                                                                                |
|------------------------------|------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | q. Show penthouse drawings.                                                                                                                                                                                    |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | r. Provide on the drawings the calculations for the means of egress widths for the entire floor occupancy load and the existing capacity of all exits including all stairs, doors, corridors and ramped exits. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | s. Show required ventilation louvers and vent sizes.                                                                                                                                                           |

**STRUCTURAL PLANS:** ☐ N/A

- |                              |                              |                                                                                                                                                                                                                                                                                                                                                                                                         |
|------------------------------|------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | a. Show foundation plans indicating the proposed slab elevations and type of foundation (i.e., mat foundation, caissons, spread footings, etc.)                                                                                                                                                                                                                                                         |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | b. Provide preliminary soil analysis data done by a licensed engineer, if required.                                                                                                                                                                                                                                                                                                                     |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | c. Indicate dimensions of foundations.                                                                                                                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | d. Show type, size and location of piling and pile caps for pile foundation.                                                                                                                                                                                                                                                                                                                            |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | e. Indicate grade beam sizes.                                                                                                                                                                                                                                                                                                                                                                           |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | f. Indicate a footing schedule defining footing sizes and the required reinforcing.                                                                                                                                                                                                                                                                                                                     |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | g. Show the established footing depth below grade and method of frost protection allowed in section 1805.2.1 of the <i>International Building Code</i> .                                                                                                                                                                                                                                                |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | h. Indicate the thickness of the floor slab, size of reinforcing, slab elevations, and type and details of foundations.                                                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | i. Indicate location, size, and amount of reinforcing steel.                                                                                                                                                                                                                                                                                                                                            |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | j. Show foundation corner reinforcing bars and minimum overlapping (as applicable to project structure).                                                                                                                                                                                                                                                                                                |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | k. Provide strength of concrete according to designed soil reports.                                                                                                                                                                                                                                                                                                                                     |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | l. Show beams, joists, girders, rafters, and/or truss layouts and details of connections, structural steel stud gage, gage size, and connections.                                                                                                                                                                                                                                                       |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | m. Indicate the sizes and species of all wood members and their respective design strength.                                                                                                                                                                                                                                                                                                             |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | n. Show all columns, girders, joists, purlins, beams, and base plates; for wood construction show all headers.                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | o. Provide a complete lintel schedule.                                                                                                                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | p. Indicate the type of anchoring for steel bearing directly on masonry.                                                                                                                                                                                                                                                                                                                                |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | q. Indicate design dead and live, wind, snow, seismic loads for floor areas, roofs, balconies, porches, breezeways, corridors, stairs, mezzanines, and platforms. Show concentrated loads, i.e. file rooms, machinery and forklift areas, if greater than those shown on the Code Summary Sheet. Identify shear walls, bracing, strapping, fastening, reinforcement and any special anchoring required. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | r. Where applicable, indicate on roof framing plan where concentrated loads (mechanical equipment, cranes, etc.) will be placed.                                                                                                                                                                                                                                                                        |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | s. Indicate on foundation and framing plans the location and lateral load resisting system. (Show walls, braced frames, moment connections, etc.)                                                                                                                                                                                                                                                       |

**FIRE PROTECTION PLANS:** ☐ N/A

- |                              |                              |                                                                                                                                                       |
|------------------------------|------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | a. Complete a sprinkler design data sheet and include it on the first plan of the sprinkler drawings.                                                 |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | b. Show floor plans for each floor with sprinkler piping layout, pipe sizes, pipe hanger details, piping materials, doors, walls and room identities. |

Often, these shop drawings are not available at the time of initial plan submission. If this is the case, write in "NA," but note the following:

- These shop drawings must be submitted for review and approval **at least two weeks before the projected installation date.**
- Failure to obtain approval of these drawings before installation could result not only in delay of the final inspection and issuance of an occupancy permit, but also in removal and reconstruction of installations which fail to meet UCC requirements.

- ☐ Yes ☐ N/A c. Show ceiling plans with sprinkler head(s) layout, walls, soffits, openings, doors, dimensions and room identities.
- ☐ Yes ☐ N/A d. Verify system design by providing hydraulic calculations along with the following:  
☐ Recent water flow test  
☐ 10 percent safety margin  
☐ Type of backflow-preventer or reduced pressure zone showing equivalent foot loss  
☐ Fire pump summary
- ☐ Yes ☐ N/A e. Note the type of sprinkler system used (e.g. 13, 13D, or 13R)
- ☐ Yes ☐ N/A f. For residential occupancies such as apartments and condominiums, show sprinkler head locations at breezeways, if applicable.
- ☐ Yes ☐ N/A g. Indicate the certified testing laboratory agency (e.g. U.L.), their test number and hourly ratings of all new and/or affected rated members and assemblies (i.e. columns, beams, floor/ceiling and ceiling/roof fire-rated design assemblies). Show all new and/or affected fire-rated walls with their ratings, if not show elsewhere.
- ☐ Yes ☐ N/A h. All penetrations of fire-rated construction must be per manufacturer's details. Details shall meet or exceed ratings of construction being penetrated. Penetration details shall be exactly as tested by a certified testing laboratory or agency and shall include their system numbers. All new penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs.
- ☐ Yes ☐ N/A i. Provide a fire alarm riser showing connection to a UL-approved central station. Show tamper switcher on both OS and Y valves of backflow prevention device, unless shown elsewhere.
- ☐ Yes ☐ N/A j. Indicate commodity class (per section 2303 of the *International Fire Code*) and height of any storage.
- ☐ Yes ☐ N/A k. Provide Material Safety Data Sheets for any hazardous materials (also specified under "**Architectural Plans**").
- ☐ Yes ☐ N/A l. Where special temperature-rated or high-temperature sprinklers are required, show sprinkler type(s) per area, office size, cut sheets with K-factor, water requirements, spray pattern, coverage and other pertinent data.

**SYSTEM CALCULATIONS (FIRE PROTECTION):** ☐ N/A

Hydraulically calculated and pipe schedule fire systems should be designed with a 10 percent safety margin for all new buildings and additions to existing buildings. Calculations for hydraulic systems should include:

- ☐ Yes ☐ N/A a. Flow and pressure at each flowing sprinkler head
- ☐ Yes ☐ N/A b. Flow diagram for a grid system.

**PLUMBING PLANS:** ☐ N/A

- ☐ Yes ☐ N/A a. Show a site utilities plan, if not provided with the civil drawings.  
☐ 1. Show the domestic water, fire, and irrigation services.  
☐ 2. Show the location of water meters, backflow protection type and location.  
☐ 3. Show the sanitary sewer service from building to public sewer or approved private sewage disposal system.
- ☐ Yes ☐ N/A b. Show interceptors as applicable to project and size by flow rate. (i.e. grease, oil, lint, acid, sand)
- ☐ Yes ☐ N/A c. Provide plumbing plan layouts for each floor. These should show the water distribution and drain-waste-vent piping, and all details, notes, legends and schedules necessary to define the system being installed.
- ☐ Yes ☐ N/A d. Show the location of all major components required for a complete system.
- ☐ Yes ☐ N/A e. Provide fixture and equipment schedule showing fixture number, detailed description, hot water, cold water, waste and vent connection sizes and other pertinent data.
- ☐ Yes ☐ N/A f. Identify all fixtures on floor plans and in riser diagrams with the plumbing fixture schedule number.
- ☐ Yes ☐ N/A g. Supply and Waste/Vent piping shall be shown on the floor plans. All pipe sizes shall be clearly shown. In congested areas (e.g. restaurants, grocery stores, etc.), isometrics are required.

- ☐ Yes ☐ N/A h. On buildings two stories and above, provide isometric diagrams and/or schematic riser diagrams for Supply and Waste/Vent piping and identify the risers by number (e.g. R1, R2, etc.). Show where all riser base terminations connect to the building drain, along with all interconnected piping on each floor plan. All pipe sizes shall be clearly defined.
- ☐ Yes ☐ N/A i. Show the water, sanitary drain-waste-vent piping and storm leaders/drains. Indicate sizes and materials for above/below grade.
- ☐ Yes ☐ N/A j. Show slope of horizontal sanitary and storm drains that equal or exceed 3" diameter, if less than 1/8" per foot.
- ☐ Yes ☐ N/A k. Indicate roof drains and emergency roof drains/scuppers with the areas they impact. Note that "emergency" = "secondary" = "overflow." See following roof drainage examples:  
Roof Drain – 6" RD (16880 SF)  
Emergency Roof Drain – 6" ERD (8180 SF)  
Parapet Wall Scupper – 8" x 5" WS (4000 SF)  
Emergency Scupper – 8" x 7" ES (4200 SF)
- ☐ Yes ☐ N/A l. Show toilet room layouts with minimum of 1/4" = 1 foot scale.
- ☐ Yes ☐ N/A m. Show drinking fountain locations.
- ☐ Yes ☐ N/A n. All penetrations of fire-rated construction must be per manufacturer's details. The details shall meet or exceed rating of construction being penetrated. The penetration details shall be exactly as tested by an approved testing laboratory or agency and shall include their system numbers.
- ☐ Yes ☐ N/A o. Room names and numbers for each floor should be on a floor plan for each level.
- ☐ Yes ☐ N/A p. Provide minimum facilities calculations.
- ☐ Yes ☐ N/A q. Column line notations, if provided on the architectural/structural plans, shall be indicated on the plumbing plans.

**MECHANICAL PLANS:** ☐ N/A

- ☐ Yes ☐ N/A a. Show all required wall louvers, penetrations and fans.
- ☐ Yes ☐ N/A b. Indicate roof-mounted equipment locations.
- ☐ Yes ☐ N/A c. Show all mechanical equipment, piping, ductwork (above/below slab) on the mechanical floor and/or roof plan.
- ☐ Yes ☐ N/A d. Provide mechanical plans for each floor and the roof. These shall show the ductwork layouts, schedules, notes, legends, piping schematics, and details necessary to define the system being installed.
- ☐ Yes ☐ N/A e. Indicate air distribution devices and show cfm for all supply, return and exhaust devices.
- ☐ Yes ☐ N/A f. Indicate the location of all equipment components required for a complete system.
- ☐ Yes ☐ N/A g. Show the smoke ventilation of atriums and pressurization of high-rise stairwells.
- ☐ Yes ☐ N/A h. Show condensation drains, primary and secondary, from the unit to the point of discharge.
- ☐ Yes ☐ N/A i. Indicate toilet exhaust requirements.
- ☐ Yes ☐ N/A j. Show mechanical room layouts at sufficient scale for dimensions and details to be ascertained.
- ☐ Yes ☐ N/A k. Show the size of duct runs.
- ☐ Yes ☐ N/A l. Indicate controls for fan shutdown: emergency manual and automatic smoke detection.
- ☐ Yes ☐ N/A m. Show the location of all UL 555-certified fire dampers, ceiling radiation dampers, smoke dampers, and fire doors.
- ☐ Yes ☐ N/A n. Show all fire-rated walls (both existing and new) with their ratings on the mechanical plans.
- ☐ Yes ☐ N/A o. All penetrations of fire-rated construction must be per manufacturer's details.
- ☐ Yes ☐ N/A p. Room names and numbers for each floor should be on a floor plan for each level.
- ☐ Yes ☐ N/A q. Provide outside air ventilation rate per the *International Mechanical Code*.
- ☐ Yes ☐ N/A r. Column line notations, if provided on the architectural/structural plans, shall be identified on the mechanical plans.
- ☐ Yes ☐ N/A s. Provide gas piping layout on the floor plan for each floor. If it is a multi-story building, all gas piping shall be shown per floor. Include pipe sizes, water column, and type of material. Provide a schedule of connected equipment, total BTUH demand, and total equivalent length, and most remote gas appliance.

**ELECTRICAL PLANS:** ☐ N/A

- |                              |                              |                                                                                                                                                                                                                                                                                                                                                                                                        |
|------------------------------|------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | a. Provide panel schedules with circuit and feeder loading, overcurrent protection, and NEC load summaries for all new and/or affected panels and services (loading has to be evaluated by highest phase); include fault current data, short circuit ratings and fault current protection co-ordination.                                                                                               |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | b. Provide a single line riser diagram showing all new and/or affected services, feeders, wire sizes and insulation types, and conduit sizes and types.                                                                                                                                                                                                                                                |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | c. Indicate number of services and their physical locations; clearly indicate mains and characteristics.                                                                                                                                                                                                                                                                                               |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | d. Indicate the grounding electrode conductor size with new and/or affected services and transformers; where necessary provide details or notes on methods.                                                                                                                                                                                                                                            |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | e. Show physical locations of all new and/or affected panels and switchgear (indicate front).                                                                                                                                                                                                                                                                                                          |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | f. Indicate receptacle plans with circuitry.                                                                                                                                                                                                                                                                                                                                                           |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | g. Indicate lighting plans with circuitry.                                                                                                                                                                                                                                                                                                                                                             |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | h. Show electrical plans for each affected floor, including the roof.                                                                                                                                                                                                                                                                                                                                  |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | i. Show wiring method(s), conduit sizes and types, termination temperature (60, 75, 90) requirements, conductor sizes and insulation types.                                                                                                                                                                                                                                                            |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | j. Indicate the design and/or operation for any of the following applicable life safety systems: emergency generators, smoke evacuation, shaft pressurization and relief, smoke detection, egress and emergency lighting, and fire alarms.                                                                                                                                                             |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | k. Indicate how special needs such as classified (hazardous), corrosive and patient care are treated. Provide detailed plan of classified areas, the classifications and how complied with (i.e. hangers, waste treatment and collection, flammable dusts, gases or liquids, spray booths, vehicle servicing and parking, etc.).                                                                       |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | l. Provide all HVAC nameplate data, including MCA and MOCP. List all other appliance and/or equipment (other than those which will be connected to a general use receptacle) with nameplate data (i.e. voltage, phasing, HP, KVA, FLA, RLA, etc.).                                                                                                                                                     |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | m. Indicate all motor horsepower ratings, if not supplied elsewhere.                                                                                                                                                                                                                                                                                                                                   |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | n. Indicate the certified testing laboratory or agency (e.g. UL), their test # and hourly ratings of all new and/or affected rated members and assemblies (i.e. columns, beams, floor/ceiling, and ceiling/roof fire-rated design assemblies). Show all new and/or affected fire-rated walls with their ratings, if not shown elsewhere.                                                               |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | o. All penetrations of fire-rated construction must be per manufacturer's details. The details shall meet or exceed ratings of construction being penetrated. Penetration details shall be exactly as tested by an approved testing laboratory or agency and shall include their system numbers. New penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | p. Provide all applicable <i>International energy Conservation Code</i> compliance data on the Building Code Summary sheet or on the electrical plans.                                                                                                                                                                                                                                                 |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | q. All submittals should include a listing and labeling statement. (All electrical materials, devices, appliances and equipment shall be labeled and listed by a certified testing laboratory or agency.)                                                                                                                                                                                              |

Uniform Construction Code (UCC)

## SPECIAL INSPECTIONS AND OBSERVATIONS STATEMENT

|                                                                                                                                                                                |            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|
| This statement must accompany permit applications for all construction for which special inspections and observations are required in the <i>International Building Code</i> . |            |
| Project Name:                                                                                                                                                                  |            |
| Project Address:                                                                                                                                                               |            |
| Owner:                                                                                                                                                                         | Telephone: |
|                                                                                                                                                                                |            |

This is to certify that all the inspections and observations that I have checked on pages 2-3 and on page 4 of this statement are required for the project named above and will be performed by the designated individuals or firms. By signing this statement, I also acknowledge that:

- these inspections and observations must be performed by competent individuals in accordance with sections 1704 and 1709 (as applicable) and that the construction work must comply with the approved plans and specifications and all applicable provisions of the Uniform Construction Code;
- records of all required special inspections and testing observations (including any discrepancies and methods of correction of these discrepancies) will be retained and made available to municipal UCC Officials, upon request; and,
- the Final Report section of this statement must be signed by me and a copy of this statement submitted to the municipal UCC inspector, at the time that the final inspection is performed and before a certificate of occupancy is issued.

\_\_\_\_\_  
Name of Design Professional in Responsible Charge

\_\_\_\_\_  
Signature of Design Professional in Responsible Charge

\_\_\_\_\_  
PA License Number      Date signed (Month/Day/Year)  
**PLEASE AFFIX SEAL IN SPACE TO THE LEFT.**

| CHECK EACH THAT APPLIES  | TYPE OF SPECIAL INSPECTION OR OBSERVATION | NAME AND ADDRESS OF INDIVIDUAL AND/OR FIRM PERFORMING INSPECTION OR OBSERVATION | CREDENTIALS<br>(Enter acronym from page 4. If "Other," please specify special training or basis for competency to perform work.) |
|--------------------------|-------------------------------------------|---------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | Inspection of Fabricators                 |                                                                                 |                                                                                                                                  |
| <input type="checkbox"/> | Inspection of Steel Construction          |                                                                                 |                                                                                                                                  |
| <input type="checkbox"/> | Inspection of Concrete Construction       |                                                                                 |                                                                                                                                  |
| <input type="checkbox"/> | Inspection of Masonry Construction        |                                                                                 |                                                                                                                                  |
| <input type="checkbox"/> | Inspection of Wood Construction           |                                                                                 |                                                                                                                                  |
| <input type="checkbox"/> | Inspection of Soil Conditions             |                                                                                 |                                                                                                                                  |

| <b>CHECK EACH THAT APPLIES</b> | <b>TYPE OF SPECIAL INSPECTION OR OBSERVATION</b>         | <b>NAME AND ADDRESS OF INDIVIDUAL AND/OR FIRM PERFORMING INSPECTION OR OBSERVATION</b> | <b>CREDENTIALS</b><br>(Enter acronym from page 4. If "Other," please specify special training or basis for competency to perform work.) |
|--------------------------------|----------------------------------------------------------|----------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/>       | Inspection of Pile Foundations                           |                                                                                        |                                                                                                                                         |
| <input type="checkbox"/>       | Inspection of Pier Foundations                           |                                                                                        |                                                                                                                                         |
| <input type="checkbox"/>       | Inspection of Wood Panels and Veneers                    |                                                                                        |                                                                                                                                         |
| <input type="checkbox"/>       | Inspection of Sprayed Fire-Resistant Materials           |                                                                                        |                                                                                                                                         |
| <input type="checkbox"/>       | Inspection of Smoke Control                              |                                                                                        |                                                                                                                                         |
| <input type="checkbox"/>       | Inspection of Exterior Insulation & Finish System (EIFS) |                                                                                        |                                                                                                                                         |
| <input type="checkbox"/>       | Structural Observations                                  |                                                                                        |                                                                                                                                         |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                 |                                                                             |                                                                         |            |                                                      |             |                                             |             |                                            |            |                                                                             |           |                                             |           |                                            |              |                                                                                 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------------------------|------------|------------------------------------------------------|-------------|---------------------------------------------|-------------|--------------------------------------------|------------|-----------------------------------------------------------------------------|-----------|---------------------------------------------|-----------|--------------------------------------------|--------------|---------------------------------------------------------------------------------|
| <b>FINAL<br/>REPORT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><b>Required Special Inspections or Observations:</b></p> <div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <input type="checkbox"/> Inspection of Fabricators<br/> <input type="checkbox"/> Inspection of Steel Construction<br/> <input type="checkbox"/> Inspection of Concrete Construction<br/> <input type="checkbox"/> Inspection of Masonry Construction<br/> <input type="checkbox"/> Inspection of Wood Construction<br/> <input type="checkbox"/> Inspection of Soil Conditions<br/> <input type="checkbox"/> Structural Observations </div> <div style="width: 48%;"> <input type="checkbox"/> Inspection of Pile Foundations<br/> <input type="checkbox"/> Inspection of Pier Foundations<br/> <input type="checkbox"/> Inspection of Wood Panels and Veneers<br/> <input type="checkbox"/> Inspection of Sprayed Fire-Resistant Materials<br/> <input type="checkbox"/> Inspection of Smoke Controls<br/> <input type="checkbox"/> Inspection of Exterior Insulation &amp; Finish System (EIFS) </div> </div> </div> <p>I certify that I have reviewed the report on each of the inspections or observations checked above. These reports indicate that the covered work is in compliance with the approved plans and specifications and all applicable provisions of the Uniform Construction Code.</p> <div style="text-align: right; margin-top: 20px;"> <p>Signature of Design Professional in Responsible Charge: _____</p> <p>Date signed (Day/Month/Year): _____</p> </div> </div> |                                                                                 |                                                                             |                                                                         |            |                                                      |             |                                             |             |                                            |            |                                                                             |           |                                             |           |                                            |              |                                                                                 |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td rowspan="8" style="width: 30%; text-align: center; vertical-align: middle;">KEY for use in <b>CREDENTIALS</b> column:<br/>(on pages 2 and 3)</td> <td style="width: 10%; text-align: center;"><b>ACI</b></td> <td>American Concrete Institute Certified Concrete Field Testing Technician</td> </tr> <tr> <td style="text-align: center;"><b>AWS</b></td> <td>American Welding Society Certified Welding Inspector</td> </tr> <tr> <td style="text-align: center;"><b>ASNT</b></td> <td>American Society of Non-Destructive Testing</td> </tr> <tr> <td style="text-align: center;"><b>AWCI</b></td> <td>Association of Wall and Ceiling Industries</td> </tr> <tr> <td style="text-align: center;"><b>MCA</b></td> <td>Model code agency (ICC, BOCA, SBCCI, ICBO) special inspection certification</td> </tr> <tr> <td style="text-align: center;"><b>PA</b></td> <td>Professional Architect (currently licensed)</td> </tr> <tr> <td style="text-align: center;"><b>PE</b></td> <td>Professional Engineer (currently licensed)</td> </tr> <tr> <td style="text-align: center;"><b>OTHER</b></td> <td>Specialized training coursework or other basis for competency deemed acceptable</td> </tr> </table> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | KEY for use in <b>CREDENTIALS</b> column:<br>(on pages 2 and 3)                 | <b>ACI</b>                                                                  | American Concrete Institute Certified Concrete Field Testing Technician | <b>AWS</b> | American Welding Society Certified Welding Inspector | <b>ASNT</b> | American Society of Non-Destructive Testing | <b>AWCI</b> | Association of Wall and Ceiling Industries | <b>MCA</b> | Model code agency (ICC, BOCA, SBCCI, ICBO) special inspection certification | <b>PA</b> | Professional Architect (currently licensed) | <b>PE</b> | Professional Engineer (currently licensed) | <b>OTHER</b> | Specialized training coursework or other basis for competency deemed acceptable |
| KEY for use in <b>CREDENTIALS</b> column:<br>(on pages 2 and 3)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>ACI</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 | American Concrete Institute Certified Concrete Field Testing Technician     |                                                                         |            |                                                      |             |                                             |             |                                            |            |                                                                             |           |                                             |           |                                            |              |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>AWS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 | American Welding Society Certified Welding Inspector                        |                                                                         |            |                                                      |             |                                             |             |                                            |            |                                                                             |           |                                             |           |                                            |              |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>ASNT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                 | American Society of Non-Destructive Testing                                 |                                                                         |            |                                                      |             |                                             |             |                                            |            |                                                                             |           |                                             |           |                                            |              |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>AWCI</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                 | Association of Wall and Ceiling Industries                                  |                                                                         |            |                                                      |             |                                             |             |                                            |            |                                                                             |           |                                             |           |                                            |              |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>MCA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                 | Model code agency (ICC, BOCA, SBCCI, ICBO) special inspection certification |                                                                         |            |                                                      |             |                                             |             |                                            |            |                                                                             |           |                                             |           |                                            |              |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>PA</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                 | Professional Architect (currently licensed)                                 |                                                                         |            |                                                      |             |                                             |             |                                            |            |                                                                             |           |                                             |           |                                            |              |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>PE</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                 | Professional Engineer (currently licensed)                                  |                                                                         |            |                                                      |             |                                             |             |                                            |            |                                                                             |           |                                             |           |                                            |              |                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | <b>OTHER</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Specialized training coursework or other basis for competency deemed acceptable |                                                                             |                                                                         |            |                                                      |             |                                             |             |                                            |            |                                                                             |           |                                             |           |                                            |              |                                                                                 |

Uniform Construction Code (UCC)  
**ENERGY CODE PRESCRIPTIVE COMPLIANCE REPORT**

**PROJECT INFORMATION**

Project Name: \_\_\_\_\_

Street Number and Name: \_\_\_\_\_

City: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Political Subdivision: \_\_\_\_\_

County: \_\_\_\_\_

*IECC*  
**Climate  
 Zone**

- ☐ Zone 4  
☐ Zone 5  
☐ Zone 6  
☐  
☐  
☐  
☐

*ASHRAE/IESNA*  
**90.1  
 Table**

- ☐ B-13  
☐ B-14  
☐ B-15  
☐ B-16  
☐ B-17

**PROJECT DESCRIPTION**

Building floor area: \_\_\_\_\_ square feet

- ☐ New construction  
☐ Unconditioned shell

- ☐ Addition (conditioned)  
☐ Unconditioned addition

- ☐ Alteration

If using *ASHRAE/IESNA* 90.1 prescriptions, indicate if ☐ Semi-heated Space or if ☐ Cooled Space

**APPLICABLE STANDARDS**

Check which standards will be used for each component listed below.

*IECC CHAPTER 8*

*ASHRAE/IESNA 90.1*

Building Envelope  
 Mechanical Systems  
 Electrical/Lighting Systems

☐  
☐  
☐

☐  
☐  
☐

If no Building Envelope box was checked above, please indicate why the building envelope is exempt from the energy conservation requirements:

- ☐ Peak design rate of energy usage will be less than 3.4 Btu/h/sq. ft.  
☐ Building or structure will be neither heated nor cooled.

**Attach either the IECC Chapter 8 or the ASHRAE/IESNA “Prescriptive Report” for each of the components checked above.**

## IECC Prescriptive Report: BUILDING ENVELOPE

Window and Glazed Door Area/Above Grade Wall Area Ratio: \_\_\_\_\_ %

### Skylights

Total Roof Area: \_\_\_\_\_ square feet  
 Total Skylight Area: \_\_\_\_\_ square feet  
 U-factor: \_\_\_\_\_  
 Assembly Type: \_\_\_\_\_

R value of slab or below-grade walls: \_\_\_\_\_

### Windows and Glass Doors (list individual assemblies):

| Number/Location | PF | SHGC | U |
|-----------------|----|------|---|
|                 |    |      |   |
|                 |    |      |   |
|                 |    |      |   |
|                 |    |      |   |
|                 |    |      |   |
|                 |    |      |   |
|                 |    |      |   |
|                 |    |      |   |
|                 |    |      |   |
|                 |    |      |   |

### Roof Assembly (list each type of assembly used):

| Elements of Roof Assembly | Insulation Between Framing<br>(R-Value) | Continuous Insulation<br>(R-Value) |
|---------------------------|-----------------------------------------|------------------------------------|
|                           |                                         |                                    |
|                           |                                         |                                    |
|                           |                                         |                                    |
|                           |                                         |                                    |

### Floors Over Outdoor Air or Unconditioned Spaces (list each type of assembly used):

| Elements Of Floor Assemblies | Insulation Between Framing<br>(R-Value) | Continuous Insulation<br>(R-Value) |
|------------------------------|-----------------------------------------|------------------------------------|
|                              |                                         |                                    |
|                              |                                         |                                    |
|                              |                                         |                                    |

### Above-Grade Walls (list each type of assembly used):

| Elements of Wall<br>Assembly Used | No Framing<br>(R-Value) | Metal Framing<br>(R-Value) | Wood Framing<br>(R-Value) |
|-----------------------------------|-------------------------|----------------------------|---------------------------|
|                                   |                         |                            |                           |
|                                   |                         |                            |                           |
|                                   |                         |                            |                           |
|                                   |                         |                            |                           |

**IECC BUILDING ENVELOPE CHECKLIST** (requirements that will also be checked during inspection process):

- All joints and penetrations caulked, gasketed, weather-stripped, or otherwise sealed.
- Windows, doors, and skylights certified as meeting leakage requirements.
- All component R-values and U-factors labeled as certified.
- Stair, elevator shafts, vents and other dampers integral to building envelope are equipped with motorized dampers. (Gravity dampers may be used in buildings less than 3-stories in height.)
- Cargo/loading dock doors weather sealed.
- Recessed lighting fixtures installed per Section 802.3.7
- Vestibule provided at building entrances, with self-closing doors.
- Vapor retarder installed.

## IECC Prescriptive Report: MECHANICAL SYSTEMS

Fill in all the requested information for either a simple or complex HVAC system.

### Simple HVAC System & Equipment:

The section 803.2.1 design loads calculated per the ASHRAE *Fundamentals Handbook* are:

Heating Load = \_\_\_\_\_

Cooling Load = \_\_\_\_\_

### 803.2.2 HVAC Equipment Performance

| Manufacturer Model Number | Capacity | Equipment Efficiency | Table used from Section 803 | Required Efficiency |
|---------------------------|----------|----------------------|-----------------------------|---------------------|
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |

### Complex HVAC Systems & Equipment:

The section 803.2.1 design loads calculated per the ASHRAE *Fundamentals Handbook* are:

Heating Load = \_\_\_\_\_

Cooling Load = \_\_\_\_\_

### 803.2.1 HVAC Equipment Performance

| Manufacturer Model Number | Capacity | Equipment Efficiency | Table used from Section 803 | Required Efficiency |
|---------------------------|----------|----------------------|-----------------------------|---------------------|
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |
|                           |          |                      |                             |                     |

Fill in all the information requested below for the service water heating system.

### Section 804 Service Water Heating Equipment Performance

| Manufacturer Model Number | Capacity | Equipment Efficiency | Equipment Type | Required Efficiency |
|---------------------------|----------|----------------------|----------------|---------------------|
|                           |          |                      |                |                     |
|                           |          |                      |                |                     |
|                           |          |                      |                |                     |
|                           |          |                      |                |                     |

**IECC Building Mechanical Systems & Service Water Heater Requirement Checklist** (requirements that will also be checked during inspection process):

- Load calculations per *ASHRAE Fundamentals Handbook-2001*.
- Plant Equipment and system capacity not greater than needed to meet loads.
- Minimum one temperature control device per zone.
- Stair and elevator shaft vents are equipped with motorized dampers
- Discharge dampers prohibited on constant volume fans & variable volume fans with motors >25hp.
- Balancing and pressure test connections on all hydronic terminal devices.
- Single-duct Variable Air Volume (VAV) terminals reduce primary air before reheating.
- Dual-duct (VAV) mixing boxes installed to minimize mixing.
- Controls capable of resetting supply air temperature (SAT) by 25% of SAT-room temperature difference.
- Minimum one humidity control device per installed humidification/dehumidification system.
- Automatic Controls: Setback to 55 degrees F (heat) & 85 degrees F (cool)
- Outside air supply and exhaust ducts equipped with gravity or motorized dampers with automatic shut off.
- Duct insulation: R-5 unconditioned spaces, R-8 outside building, R-8 between duct and exterior envelope.
- Duct construction per *International Mechanical Code (IMC)*.
- Balancing devices provided in accordance with IMC.
- Minimum pipe insulation per Table 803.3.
- Heat traps in inlet/outlet fittings for service water heating.
- Pipe insulation for Service Water Heating per Section 804.5
- Water temperature controls: 110 degrees F for dwelling units, or 90 degrees F for other occupancies.
- Hydronic three-pipe systems not used.
- Operation and maintenance manual provided to building owner.

## IECC Prescriptive Report: Electrical Power & Lighting Systems

Fill in all the requested information for either the entire building method or the tenant portion/portion of the building method.

### Entire Building Method:

Building Use or Area Type from Table 805.5.2: \_\_\_\_\_  
Total Area of the Building (Sq. Ft.): \_\_\_\_\_  
Total Interior Light Power (Watts): \_\_\_\_\_

### Tenant Area or Portion of Building Method:

| Tenant Area/<br>Building Portion | Use From<br>Table 805.5.2 | Total Area<br>sq.ft. | Total Interior<br>Lighting Power<br>(Watts) |
|----------------------------------|---------------------------|----------------------|---------------------------------------------|
|                                  |                           |                      |                                             |
|                                  |                           |                      |                                             |
|                                  |                           |                      |                                             |
|                                  |                           |                      |                                             |
|                                  |                           |                      |                                             |
|                                  |                           |                      |                                             |
|                                  |                           |                      |                                             |
|                                  |                           |                      |                                             |

**IECC Electrical Power & Lighting Systems Requirements Checklist** requirements that will also be checked during inspection process:

- Exterior Lighting: Efficacy greater than 45 lumens/W
- Independent controls for each space (switch/occupancy sensor).
- Master switch at entry to hotel/motel guest rooms.
- Individual dwelling units separately metered.
- Each space provided with a manual control to provide uniform light reduction capability.
- If area is corridor, storeroom, restroom, or lobby; area must be continuously illuminated; areas greater than 250 sq. ft. or use less than 0.6 watts/sq. ft.
- Photocell/astronomical time switch on exterior lighting.
- Tandem wired one-lamp & 3-lamp ballasted luminaries.

## ASHRAE/IESNA 90.1 Prescriptive Report: Electrical Power & Lighting Systems

Fill in all the requested information for either the entire building method or the tenant portion/portion of the building method.

### Entire Building Method:

Building Use or Area Type from Table 9.3.1.1: \_\_\_\_\_  
Total Area of the Building (Sq.Ft.): \_\_\_\_\_  
Total Interior Light Power (Watts): \_\_\_\_\_

### Tenant Area or Portion of Building Method:

| Tenant Area/<br>Building Portion | Use From<br>Table 9.3.1.2 | Total Area<br>Sq. Ft. | Total Interior<br>Lighting Power<br>(Watts) |
|----------------------------------|---------------------------|-----------------------|---------------------------------------------|
|                                  |                           |                       |                                             |
|                                  |                           |                       |                                             |
|                                  |                           |                       |                                             |
|                                  |                           |                       |                                             |
|                                  |                           |                       |                                             |
|                                  |                           |                       |                                             |
|                                  |                           |                       |                                             |
|                                  |                           |                       |                                             |
|                                  |                           |                       |                                             |

### ASHRAE/IESNA 90.1 Electric Power & Lighting Requirements Checklist (requirements that will also be checked during inspection process):

- Minimum Efficacy of 60 lumens/watts for lamps greater than 100W used for exterior lighting.
- Lighting power for freestanding canopy areas for building entrances with canopies less than or equal to 3 watts per square foot.
- Lighting power for building entrances without a canopy less than or equal to 33 watts per linear foot of exterior door width.
- Lighting power for buildings exits less than or equal to 20 watts per linear foot of exit door width.
- Lighting power for building facades less than or equal to 0.25 watts per square foot of the illuminated area.
- Independent manual or occupancy sensing controls for each space (remote switch with indicator allowed for safety or security).
- Automatic shutoff control for lighting in > 5000 sq.ft. buildings by time-of-day device, occupant sensor or other automatic control.
- Master switch at entry to hotel/motel guest room.
- Photocell/astronomical time switch on exterior lights (except areas requiring lighting during daylight hours).
- Tandem wired one-lamp and three-lamp ballasted luminaires (except high-frequency ballasts; luminaires not on same switch).
- Feeder conductors have been designed for a maximum voltage drop of 2 percent.
- Branch circuit conductors have been designed for a maximum voltage drop of 3 percent.

## ASHRAE/IESNA 90.1 Prescriptive Report: Building Envelope

### Roof Assembly (list each type of assembly used per table 5.3)

| <u>List</u> Building Envelope Option:<br><b>Residential Non-residential Semi-heated</b> | <b>Opaque Elements</b> | <b>Assembly<br/>Max. U</b> | <b>Insulation<br/>Min. R</b> |
|-----------------------------------------------------------------------------------------|------------------------|----------------------------|------------------------------|
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |

### Walls, Above-Grade (list each type of assembly used per table 5.3)

| <u>List</u> Building Envelope Option:<br><b>Residential Non-residential Semi-heated</b> | <b>Opaque Elements</b> | <b>Assembly<br/>Max. U</b> | <b>Insulation<br/>Min. R</b> |
|-----------------------------------------------------------------------------------------|------------------------|----------------------------|------------------------------|
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |

### Floor Assembly (list each type of assembly used per table 5.3)

| <u>List</u> Building Envelope Option:<br><b>Residential Non-residential Semi-heated</b> | <b>Opaque Elements</b> | <b>Assembly<br/>Max. U</b> | <b>Insulation<br/>Min. R</b> |
|-----------------------------------------------------------------------------------------|------------------------|----------------------------|------------------------------|
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |

### Slab on Grade Floors (list each type of assembly used per table 5.3)

| <u>List</u> Building Envelope Option:<br><b>Residential Non-residential Semi-heated</b> | <b>Opaque Elements</b> | <b>Assembly<br/>Max. U</b> | <b>Insulation<br/>Min. R</b> |
|-----------------------------------------------------------------------------------------|------------------------|----------------------------|------------------------------|
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |
|                                                                                         |                        |                            |                              |

### Wall, Below Grade (list each type of assembly used per table 5.3)

| <u>List</u> Building Envelope Option:<br><b>Residential Non-residential Semi-heated</b> | <b>Opaque Elements</b> | <b>Assembly<br/>Max. U</b> |
|-----------------------------------------------------------------------------------------|------------------------|----------------------------|
|                                                                                         |                        | _____                      |
|                                                                                         |                        | _____                      |
|                                                                                         |                        | _____                      |
|                                                                                         |                        | _____                      |

### Opaque Doors (list each type of assembly used per table 5.3)

| <u>List</u> Building Envelope Option:<br><b>Residential Non-residential Semi-heated</b> | <b>Opaque Elements</b> | <b>Assembly<br/>Max. U</b> |
|-----------------------------------------------------------------------------------------|------------------------|----------------------------|
|                                                                                         |                        | _____                      |
|                                                                                         |                        | _____                      |
|                                                                                         |                        | _____                      |
|                                                                                         |                        | _____                      |

## ASHRAE/IESNA 90.1 Prescriptive Report: Building Envelope (Continued)

### Fenestration (list each type of assembly used per table 5.3)

| List Building Envelope Option:<br>Residential Non-residential Semi-heated | % Vertical<br>Glazing | SHGC<br>Multiplier | Assembly<br>Max. U | SHGC<br>North | SHGC<br>All |
|---------------------------------------------------------------------------|-----------------------|--------------------|--------------------|---------------|-------------|
|                                                                           |                       |                    |                    |               |             |
|                                                                           |                       |                    |                    |               |             |
|                                                                           |                       |                    |                    |               |             |
|                                                                           |                       |                    |                    |               |             |
|                                                                           |                       |                    |                    |               |             |
|                                                                           |                       |                    |                    |               |             |

### Skylights (list each type of assembly used per table 5.3)

| List Building Envelope Option:<br>Residential Non-residential Semi-heated | Type | % of Roof | Assembly<br>Max. | SHGC<br>Max. |
|---------------------------------------------------------------------------|------|-----------|------------------|--------------|
|                                                                           |      |           |                  |              |
|                                                                           |      |           |                  |              |
|                                                                           |      |           |                  |              |
|                                                                           |      |           |                  |              |
|                                                                           |      |           |                  |              |

### ASHRAE/IESNA 90.1 Building Envelope Requirements Checklist (requirements that will also be checked during inspection process):

- Open-blown or poured loose-fill insulation has not been used in attic roof spaces with ceiling slope greater than 3 in 12.
- Wherever vents occur, vents are baffled to deflect incoming air above the insulation.
- Recessed lights, equipment and ducts are not affecting insulation thickness.
- No roof insulation is installed on a suspended ceiling with removable ceiling panels.
- All exterior insulation is covered with protective material.
- Cargo and loading dock doors are equipped with weather seals.
- Windows & skylights are labeled & certified by the manufactures for U-factor & SHGC.
- Fixed windows & skylights unlabeled by manufacturer have been site labeled using the default U-factor & SHGC.
- Other unlabeled vertical fenestration, operable and fixed, not labeled by the manufacturer, has been site labeled using the default U-factor and SHGC.
- All joints & penetrations are caulked, gasketed, weather-stripped, or otherwise sealed.
- Windows, doors, and skylights certified as meeting leakage requirements.
- Components R-values & U-factors labeled as certified.
- Building entrance doors have a vestibule and equipped with closing devices.

## ASHRAE/IESNA 90.1 Prescriptive Report: Mechanical Systems (Simple)

A building that is less than 2 stories in height, and, has less than 25,000 total square feet floor area, and, has a single HVAC zone, must meet the requirements for a simple mechanical system.

If the requirements for a **simple mechanical system** apply, fill in all of the following information.

|                                         |                                         |                                                                        |                             |  |
|-----------------------------------------|-----------------------------------------|------------------------------------------------------------------------|-----------------------------|--|
| <b>Cooling (if provided)</b>            |                                         |                                                                        |                             |  |
| Manufacturer Name                       |                                         |                                                                        |                             |  |
| Mfg'er Specified Efficiency             |                                         |                                                                        |                             |  |
| <input type="checkbox"/>                | Air Conditioner                         | Min. Efficiency (Table 6.2.1A)                                         |                             |  |
| <input type="checkbox"/>                | Heat Pump                               | Min. Efficiency (Table 6.2.1B)                                         |                             |  |
| <input type="checkbox"/>                | Packaged Terminal & Room AC & Heat Pump | Min. Efficiency (Table 6.2.1D)                                         |                             |  |
| Is Economizer required per Table 6.1.3? |                                         | <input type="checkbox"/> Yes                                           | <input type="checkbox"/> No |  |
| <b>Heating</b>                          |                                         |                                                                        |                             |  |
| Manufacturer Name                       |                                         |                                                                        |                             |  |
| Mfg'er Specified Efficiency             |                                         |                                                                        |                             |  |
| <input type="checkbox"/>                | Heat Pump                               | Min. Efficiency (Table 6.2.1A)                                         |                             |  |
| <input type="checkbox"/>                | Heat Pump                               | Min. Efficiency (Table 6.2.1D)                                         |                             |  |
| <input type="checkbox"/>                | Fuel Fired Furnace                      | Min. Efficiency (Table 6.2.1E)                                         |                             |  |
| <input type="checkbox"/>                | Fuel Fired Boiler                       | Min. Efficiency (Table 6.2.1F)                                         |                             |  |
| <input type="checkbox"/>                | Electric Resistance Heat                |                                                                        |                             |  |
| <b>Service Hot Water</b>                |                                         |                                                                        |                             |  |
| Manufacturer Name                       |                                         |                                                                        |                             |  |
| Mfg'er Specified Efficiency             |                                         |                                                                        |                             |  |
|                                         |                                         | Load calculated per 7.2.1                                              |                             |  |
|                                         |                                         | Efficiency/Performance Requirements per 7.2.2                          |                             |  |
|                                         |                                         | Prescriptive Path per 7.3, if <u>combined boiler/service hot water</u> |                             |  |

### ASHRAE/IESNA 90.1 Mechanical Systems (Simplified) Requirements Checklist (requirements that will also be checked during inspection process):

- Energy recovery ventilation required if outside air quality supplied by the system is greater than 3000 cfm & greater than 70% of the supply air quantity at min. outside air designs.
- Manual change over or dual set-point thermostat supplied.
- Heat pump controls to prevent supplemental heater operation.
- Systems controls to prevent reheat or any other form of simultaneous heating & cooling for humidity control supplied.
- Programmable time clock on HVAC systems greater than 15,000 BTU/H & supply fan greater than 3/4/hp.
- HVAC piping shall be insulated in accordance with Table 6.2.4.1.3 insulation suitable for outdoor service.
- Ductwork & plenums insulated in accordance with Table 6.2.4.1.2A & 6.2.4.1.2B and ducted systems air balanced.
- Thermostats shall be interconnected to prevent simultaneous heating & cooling.

### **ASHRAE/IESNA 90.1 Mechanical Systems (Simple) Requirements Checklist (continued)**

- Dampers automatically shut on systems greater than 300 cfm.
- Optimum start controls supplied on systems with capacities greater than 10,000 cfm.

### **ASHRAE/IESNA 90.1 Service Hot Water Systems Requirements Checklist (requirements that will also be checked during inspection process):**

- Service Hot Water Piping Insulation meets 7.2.3
- Temperature maintenance automatic time switches installed (7.2.4.2)
- Outlet temperature controls installed (7.2.4.4)
- Circulating pump controls installed (7.2.4.4)
- Storage temperature controls installed (7.2.4.1)
- Heat traps installed (7.2.6)

## ASHRAE/IESNA 90.1 Prescriptive Report: Mechanical Systems (Complex)

If the requirements for a **complex mechanical system** apply, fill in all of the following information.

Heating System Design Load: \_\_\_\_\_  
Cooling System Design Load: \_\_\_\_\_

### HVAC Equipment Performance per section 6.2.1

| Manufacturer/<br>Model # | Capacity | Equipment<br>Efficiency | Table used<br>from<br>Section 6.2.1 | Required<br>Efficiency | 1992<br>Epact |
|--------------------------|----------|-------------------------|-------------------------------------|------------------------|---------------|
|                          |          |                         |                                     |                        |               |
|                          |          |                         |                                     |                        |               |
|                          |          |                         |                                     |                        |               |
|                          |          |                         |                                     |                        |               |
|                          |          |                         |                                     |                        |               |
|                          |          |                         |                                     |                        |               |
|                          |          |                         |                                     |                        |               |
|                          |          |                         |                                     |                        |               |

### Service Hot Water

|                             |                                                                        |       |
|-----------------------------|------------------------------------------------------------------------|-------|
| Manufacturer Name           | _____                                                                  |       |
| Mfg'er Specified Efficiency | _____                                                                  |       |
|                             | Load calculated per 7.2.1                                              | _____ |
|                             | Efficiency/Performance Requirements per 7.2.2                          | _____ |
|                             | Prescriptive Path per 7.3, if <u>combined boiler/service hot water</u> | _____ |

### ASHRAE/IESNA 90.1 Mechanical Systems (Complex) Requirements Checklist (requirements that will also be checked during inspection process):

- Economizers per 6.3.1
- Simultaneous heating & cooling limitations per 6.3.2
- Air system design & controls per 6.3.3
- Hydronic system design & control 6.3.2.2.3
- Heat rejection equipment per 6.3.5
- Energy recovery per 6.3.6.
- Exhaust Hoods per 6.3.7
- Radiant Heating systems per 6.3.8
- Hot gas bypass limitations per 6.3.9
- Service hot water piping insulation meets 7.2.3
- Temperature maintenance automatic time switches installed per 7.2.4.2
- Outlet temperature controls installed per 7.2.4.3
- Circulating pump controls installed per 7.2.4.4
- Storage temperature controls installed per 7.2.4.1
- Heat traps installed per 7.2.6

## **Commercial Building Permit Fee Schedule (PA UCC Projects)**

This fee schedule applies to all commercial projects subject to the Pennsylvania Uniform Construction Code (UCC), including new construction, additions, alterations, and single-discipline work.

### **1. Commercial Plan Review Fees**

All commercial projects require plan review in accordance with UCC requirements. The plan review fee must be submitted with the permit application.

| Project Type / Review Component                                         | Minimum Fee        |
|-------------------------------------------------------------------------|--------------------|
| General Plan Review – Commercial Projects<br>Small Projects/ Renovation | \$750.00 minimum   |
| Plan Review – New Construction                                          | \$1,500.00 minimum |
| Building Review                                                         | \$250.00           |
| Electrical Review                                                       | \$250.00           |
| Mechanical Review                                                       | \$250.00           |
| Plumbing Review                                                         | \$250.00           |
| Energy Review                                                           | \$250.00           |
| ADA Review                                                              | \$250.00           |

#### **Credits and Re-Review Policy:**

- The above \$250.00 per-discipline review fees are included within the base plan review amounts of \$750.00 (for small projects) and \$1,500 (for new construction) They are not additional to those base fees.
- Any unused balance of the plan review fee will be credited toward the final permit fee upon issuance.
- If a substantial number of corrections or deficiencies are found during the initial plan review, an additional plan review fee per discipline may be required at the time of resubmittal.

## 2. Commercial New Construction and Additions

| Estimated Construction Cost | Permit Fee                                                                  |
|-----------------------------|-----------------------------------------------------------------------------|
| \$0 – \$1,000,000           | 1.5% of the estimated construction cost, minimum \$750.00 plus plan review. |
| \$1,000,001 – \$5,000,000   | 1% of the estimated construction cost                                       |
| \$5,000,001 and higher      | .5% of the estimated construction cost                                      |

If a conflict arises regarding the estimated construction cost during plan review, the ICC Building Valuation Data (BVD) charts may be used to determine a standard construction value based on occupancy type and construction classification. Alternatively, a signed contract between the applicant and contractor may be requested to verify actual construction cost.

## 3. Commercial Small Projects (Single-Discipline Permits)

This category applies to minor commercial projects involving a single scope of work within an existing building that already holds a valid Certificate of Occupancy. Examples include:

- Electrical system upgrades
- Replacement or installation of a single mechanical unit
- Installation of an ADA-compliant restroom
- Minor plumbing, fire protection, or accessibility modifications

Fee: A flat fee of \$750.00 shall be charged. This fee includes the cost of plan submittal, review, and required inspections under the UCC.

## 4. Additional Notes

- Permit fees include plan review and inspection costs unless otherwise noted.
- Separate fees may apply for zoning review, re-inspections, or third-party agency services.
- All fees are non-refundable once plan review has begun.