

**ALLOW 14 BUSINESS DAYS  
FOR REVIEW PROCESS**



**ATTACH ONE COMPLETED COPY OF  
PACKAGE TO EACH SET OF DRAWINGS**

**PLAN REVIEW REQUIREMENTS**

BUILDING PLANS SUBMITTED FOR REVIEW MUST CONTAIN APPLICABLE STANDARD INFORMATION, PLUS ADDITIONAL REQUESTED INFORMATION AS FOLLOWS:

Zoning: \_\_\_\_\_ Occupancy Load/Type: \_\_\_\_\_ Construction Type: \_\_\_\_\_

**SITE REQUIREMENTS:**

PROJECT NAME: \_\_\_\_\_ E-911 ADDRESS \_\_\_\_\_

**E-911 OFFICER VERIFICATION REQUIRED**

	YES	NO	N/A	
1.				Original and final contours or elevations.
2.				Storm water runoff collection plan including what provisions are planned for roof drains and down spouts. Provide storm drainage calculations and/or detention/retention pond (s).
3.				Erosion control plan including location of hay bales/silt fences during and after construction.
4.				Location of nearest public storm drainage system.
5.				Location of nearest public sanitary sewer.
6.				Elevation of the sewer lateral at tie to city sewer.
7.				Location of retaining wall with cross-section details.
8.				Construction plan submittal requirement sheets by Planning & Zoning.
9.				Septic tank location and Health Dept. approval.

**CONSTRUCTION REQUIREMENTS:**

	YES	NO	N/A	
1.				Four sets and one digital copy of stamped building plans showing life safety plan, foundation, floor, wall, roof section, plumbing, mechanical, and electrical. Plans should show connections to water and sewer utilities or septic tank information.  1. Riser Diagram and typical wall section 2. Grease trap and/or sand trap details. 3. Gas plans should show riser diagram, appliances & BTU demands as well as allowances for combustion and ventilation air make-ups and meter location.
2.				Provide a digital copy of the site plan, showing state plane coordinates in an AutoCAD format, Release 14 or greater (you can email Tangi Hill at thill@enterprise.com for E-911 address)
3.				Wind load and live load for metal buildings.
4.				Architects/Engineers to affix seal on all sheets required and local jurisdiction code reference (2009 IBC, IFC, 2008 NEC).
5.				Electrical load sheet
6.				Water calculations
7.				Said use of building (office, warehouse, apartments, auto repair, etc.), occupancy load, and construction type.
8.				Name and telephone of person to be contacted.
9.				Completed application with correct address from E-911 coordinator
10.				Health department approval letter

Person who completed this form: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(Print or type)

Contact person: \_\_\_\_\_ Office/Cell phone: \_\_\_\_\_ Email address: \_\_\_\_\_

(Print or type)

- Note:** (1) Any information missing or incomplete on this sheet may cause delay in the review process.  
(2) After review, this office will hold plans for 180 days before they are disposed of.