Commercial Plan Review- Exempt Work Number:

Project Name: Project Address:

Applicant Company: Phone Number:

Contact Person: Email:

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| |  |  |  | | --- | --- | --- | | Exempt Classes of Buildings: | | | |  | A-2 | < 1,000 GSF, One Story, NO Bsmt, Seating for < 20 persons | |  | B | < 2,250 GSF, Two Story, Bsmt OK | |  | F-2 | < 3,000 GSF, One Story, NO Bsmt | |  | M | < 1,500 GSF, Two Story, Bsmt OK | |  | R | < 3 Dwelling Units  < 10 Residents in Congregate Hsg | |  | S-1 | Aircraft Hangars & Helistops  < 3,000 GSF, One Story, NO Bsmt  !!! See IBC 412!!! | |  | S-2 | < 5,000 GSF, One Story, NO Bsmt | |  | U\* | < 1,000 GSF, One Story, NO Bsmt | |  |  | Remodeling/Renovations that don’t:   * Change the Occupancy * Change the structural loading in a way that may cause a code violation * Change the mechanical system in a way that may cause a code violation * Change the electrical system in a way that my cause a code violation * Change the exiting system in a way that may cause a code violation |   \* Fences over 8 feet; tanks and towers & retaining walls with over 4 feet of vertical exposed face NOT exempt | | Type of Construction:\_\_\_\_\_\_\_\_[IBC 601]   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | Occupancies & Mixed Use Table | | | | | | | Occupancy Group(s) |  |  |  |  |  | | Accessory Use |  |  |  |  |  | | Non- Separated |  |  |  |  |  | | Separated Use |  |  |  |  |  | | Actual Area |  |  |  |  |  |   Total Building Area:\_\_\_\_\_\_\_\_\_\_\_\_  Sprinkler System? Yes No Type\_\_\_\_\_\_\_   |  |  |  |  | | --- | --- | --- | --- | | Fire Separation Table (hours) [IBC Table 602] | | | | | Direction | Dist.  (feet) | Wall Req’t (hrs)  [IBC Table 602] | Opening Req’t (hrs)  [IBC Table 705.8] | | North |  |  |  | | East |  |  |  | | South |  |  |  | | West |  |  |  | | |
| |  |  |  | | --- | --- | --- | | Applicable Special Provisions [IBC Chapter 4] | | | |  | Occupancy/ Use | Req’t | |  | S-2/ Parking Garage | IBC 406 | |  | S-1/ Aircraft Hangar | IBC 412 | |  | Combustible Storage | IBC 413 | |  | B/ Ambulatory Care Facilities | IBC 422 | |  | R/ Residential | IBC 420 | | |  | |
| |  |  |  | | --- | --- | --- | | Incidental Use Separations [IBC Table 509] | | | |  | Use | Req’t | |  | Paint Shops | 2 hr or 1 hr with sprinkler | |  | Waste & Linen Collection Rooms > 100 sf | 1 hr | |  | Waste & Linen Collection Rooms in Ambulatory Care | 1 hr | |  | Laundry Rooms > 100 sf | 1 hr or sprinkler | | |
| |  |  | | --- | --- | | Means of Egress: IBC Chapter 10 | | |  | Minimum egressway size: [IBC 1005, 1020.2]   * Not less than 7’-6” clear vertical * Not less than 36” clear width for occupant loads < 50 persons * Not less than 44”clear width for occupant loads > 50 persons * No overhead protrusions below 80” * No side protrusions >4”   \* May be reduced to 32” clear width for not more than 24” travel distance. | |  | Door Encroachment [IBC 1005.7.1]   * May not reduce the required width by more than 7” when fully open. * May not reduce the required width by less than ½ in any position. | |  | Occupant Load: [Table 1004.5]   * Each Space * Cumulative Occupant Loads | |  | Exit Access Analysis:   * Common Path Limits [IBC 1006.2.1] \_\_\_\_\_\_\_ * Travel Distance Limits [IBC 1017.2] \_\_\_\_\_\_ * Multiple Exits [IBC 1006.2] * Multiple Exit Separation [IBC 1007.1.1] * Intervening Spaces [1016.2] * Corridors * Fire Ratings [IBC 1020.1] * Min. Width [IBC Table 1020.1] * Dead Ends [IBC 1020.4] * Continuity [IBC 1020.4] * Exit Access Stairways [IBC 1019] * Travel Distance & Common Path * Two Stories open Okay [IBC 1019.3, 1006.3, and 713] * Protectives > 2 stories | |  | Exit Analysis:   * Number and Configuration [IBC 1007] * Exits on Different Levels [IBC 1006.3.1] * Travel distance [IBC Table 1006.2.1] * Accessible Exit (Elevator, Ramp, or Area of Refuge) | |  | Exit Discharge Analysis:   * Direct & Unobstructed * Exterior Door Landings * Egress Courts * Includes Accessible means of egress to the public way. [IBC 1009.2] * Exterior areas for rescue assistance * Fire Protection * 48” wide stairs * Communications System * Signage/ Instructions | | |  |  | | --- | --- | |  | Means of Egress Illumination [IBC 1008] | |  | Doors:   * Not less than 32” clear width and 80” height (36” x 80” for egress) * Not more than 48” wide * Door Swings [IBC 1010.1.2] * Swing in the direction of travel > 50 * Door Landings [IBC 1010.1.5, 1010.1.6] * A-2 Occupancy > 50 = Panic Hdwe * No manual flush bolts on egress * Power operated doors NOT required * Special Locking A, B, F, M, S Occupancies: Double keyed deadbolt permissible if: * Main Entry Door * Readily distinguishable when locked. * Sign: “THIS DOOR SHALL REMAIN UNLOCKED WHEN BUILDING IS OCCUPIED. * Permission of the Building Official * Delayed Egress Locks * Sprinkler system required * 15 Second delay | |  | Notes: | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | | |

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| |  |  | | --- | --- | | Exterior Walls: IBC Chapter 14 | | |  | Weather Resistive Barrier Complete | |  | Vapor Retarder- warm in winter side | |  | Flashings   * Base of Wall * Top of wall/ coping * Window and Door Flashings * Flashings at wall materials transitions | |  | Wall Claddings   * Clearance Requirements | |  | EIFS   * Clearance Requirements * Top of wall/ coping * Window and Door Flashings * Flashings at wall materials transitions | | Roofs: IBC Chapter 15 | | |  | Specified material meets all code reqm’ts | |  | Minimum slope acceptable for drainage | |  | Primary Drainage Acceptable | |  | Secondary (emergency) drainage | |  | Roofing Flashings | | Interior Environment IBC Chapter 12 | | |  | Attic Ventilation | |  | Interior Ventilation | |  | Sound Transmission (Residential ONLY) | |  | Minimum Space Sizes | |  | Toilet & Bathroom Finishes | | Special Inspections IBC Chapter 17 | | |  | Geotechnical Testing & Inspections | |  | Concrete Testing & Inspections | |  | Structural Welding Testing & Inspections | |  | Cold Formed Light Gauge Steel Framing Insp. | |  | Exterior Insulation Finish System (EIFS) | | Foundations IBC Chapter 18 | | |  | Geotechnical Report provided with foundation recommendations | |  | Footings & Foundations by prescription, IBC Tables 1807.1.6.2 (concrete) ; or  Tables 1807.1.6.3(1), (2), (3) or (4) (masonry)   * Concrete Mix Strength * Walls correct size for unbalanced load * Reinforcing Stl strength, size & spacing   OR | |  | Engineered Footings & Foundations | |  | Lowest Floor elevation relative to ground water level:   * If > 6” Damp proof foundation. * If < 6” Provide a subsoil drainage system per IBC 1805 with damp proofing OR provide waterproofing. | | |  |  | | --- | --- | |  | Notes: | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |

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| |  |  | | --- | --- | | Concrete: IBC Chapter 19 | | |  | Compressive Strength [ACI 318, see IRC R402.2 section and table for similar] | |  | Wall Reinforcement per ACI 318   * Spacing < 3x wall thickness * Spacing < 18” o.c. * Walls > 10” thick- (2) layers reinf. * IRC Tables as reference | |  | Minimum slab thickness 3 ½” [IBC 1907] | |  | Vapor Retarder under slab [IBC 1907] | | Steel: | | |  | Pre-engineered buildings- document deferred submittal & require engineering signature for structural design | |  | Cold Formed Light Gauge Steel Framing- document deferred submittal & require engineering signature for structural design | | Wood: | | |  | Foundation Plates: [IBC 2308.5.3]   * ½” diameter anchor bolts with min. 7” embedment @ < 6’ o.c. * ½” diameter anchor bolts with min. 7” embedment located not less than 4” nor more than 12” from the end. * Not less than (2) anchor bolts per piece. | |  | Wood in contact with concrete, masonry, or ground: preservative treated. [IBC 2304.12] | |  | Floor Framing either trusses or per 2308.4. | |  | Wall Framing per Table 2308.5.1 | |  | Provide full end bearing on wood columns and posts [IBC 2304.10.7] | |  | Ensure a continuous Load Path [IBC 2304.10.6] | |  | Verify header sizes | |  | Verify Joist spans wrt Tables | |  | Ensure Truss Drawings are SIGNED. | | Glass & Glazing: | | |  | Hazardous Locations [IBC 2406.4] | | Foam Plastics: | | |  | Thermal Barriers [IBC 2603.4] | |  |  | |  |  | |  |  | | |  |  | | --- | --- | |  | Notes: | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |

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| |  |  | | --- | --- | | Plumbing Systems: | | |  | Separate Facilities Required | |  | Number of toilets per gender | |  | Number of lavatories per gender | |  | Service Sink | |  | Drinking Fountains | | Mechanical Review: | | |  | Mechanical Ventilation [IMC Table 403.3] | |  | Enclosed parking garages [IMC 404.1]- also see Energy Code. | |  | Occupied spaces adjacent to parking garages [IMC 404.2] | |  | Exhaust Systems:   * Discharge separation * Opening protection * Pressure equalization | |  | Commercial Kitchen Hoods:   * Exhaust recovery * Type I Hoods * Type II Hoods * Grease Ducts | |  | Contamination Prevention/ Exhaust separation | | Energy Code: | | |  | Prohibition of heated commercial parking garages [MN Statute 216C.20] | |  | Compliance Paths:   * ASHRAE 90.1-2010 * IECC 2012 (C402, C403, C404 and C405 plus either C406.2, C406.3, or C406.4) | |  | Building Envelope:   * Roof * Above Grade Walls * Below Grade Walls * Slab on Grade * Opaque Doors * Windows * Allowable % of Exterior Wall * U-value * Air Barrier Continuity | |  | Mechanical Efficiency | |  | Lighting | | |  |  | | --- | --- | |  | Notes: | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |