

CITY OF ELYRIA
PLAN SUBMISSION CHECKLIST
Pursuant to §106 of the Ohio Building Code (OBC)
Pg. 1 of 5

ADDRESS: _____ DATE: _____

BUSINESS: _____

E-mail: _____

***ALL ITEMS MUST BE ADDRESSED ON THIS APPLICATION PRIOR TO SUBMITTING.
THE DESIGN PROFESSIONAL MUST SHOW EXPIRATION DATE OF THEIR SEAL.***

A. FOOTING/FOUNDATION/SHELL for a NEW BUILDING or ADDITION

1. _____ Five sets of plans DRAWN TO SCALE, bearing the signature of the author;
2. _____ “Application for Certificate of Plan Approval” **Fill out this application COMPLETELY and ACCURATELY**
3. _____ The site plan includes ALL of the following:
 - a. _____ Property lines with dimensions.
 - b. _____ Streets, alleys, easements, water courses, curb cuts, driveways, and sidewalks.
 - c. _____ Detailed parking plan (space dimensions, aisle width, “van accessible” and other handicap spaces, proposed and existing spaces, surface material, and angle of spaces). Indicate type and location of buffering/screening.
 - d. _____ Locations and sizes of all utility lines including the locations of the two closest fire hydrants to the proposed construction. Show the precise distance from each hydrant to the nearest driveway serving the proposed building/addition.
 - e. _____ Locations and dimensions of proposed buildings and all existing buildings.
 - f. _____ Setback and side yard distances and distances between buildings.
 - g. _____ Proposed grading and drainage plan.
 - h. _____ Proposed water main and sanitary sewer extension.
4. _____ Construction drawings include ALL of the following:
 - a. _____ Footing and foundation details, cross sections, wall sections as may be required to describe the general building construction (Include location of firewalls).
 - b. _____ All elevations necessary to completely describe the exterior of the building including floor to floor dimensions and the total building height.
 - c. _____ First-floor plan.

B. CHANGE OF USE or OCCUPANCY or construction of a NEW BUILDING or ADDITION

1. _____ Same as A1-A3 above.
2. _____ The construction drawings shall comply with Section 106.1.1:
 - a. _____ Index.
 - b. _____ Floor plans, including plans of full or partial basements of cellars and full or partial attics or penthouses. Floor plans must show all relevant information, such as door swings, stairs, and ramps, windows, shafts, etc.; and must be sufficiently dimensioned to describe all relevant space sizes. Wall materials must be described by cross-hatching (with explanatory key), by notation, or by another clearly understandable method. Spaces must be identified by code appellation, ie, an “auditorium” may not be identified, as “meeting room” if its size and function dictates that it is an auditorium.
 - c. _____ All elevations necessary to completely describe the exterior of the building including floor-to-floor dimensions.
 - d. _____ Cross sections, wall sections, and detail sections, to scale, as may be required to describe the general building construction; including wall, ceiling, floor and roof materials, and construction, and details which may be necessary to describe typical connections, etc.

- e. _____ Complete structural description of the building on the above drawings or on separate drawings, including size and location of all principal structural elements and a table of live loads used in the design of the building and computations, stress diagrams and other data sufficient to show the correctness of plans.
- f. _____ A complete description of the mechanical and electrical systems of the buildings on the above drawings or on separate drawings, including plumbing schematics and principal plumbing, heating, ventilation, and air conditioning duct and piping layouts and lighting and power equipment layouts. The plumbing drawings shall include a floor plan showing the layout of fixtures, isometric drawings of drainage, waste, and vent lines, a schematic drawing of water lines, and an indication of backflow protections.
- g. _____ Plans, specifications and/or shop drawings for the installation of fire protection systems shall be submitted to indicate conformance with the OBC and shall be reviewed by the department prior to issuance of the permit.
- h. _____ Location and size of all existing and proposed water services.
- i. _____ Type of backflow device on existing water services.
- j. _____ Location and rating of fire extinguishers.
- k. _____ Existing & proposed water meter size.
- l. _____ Oil and grease trap information.
- m. _____ Industrial inspection manhole location.
- n. _____ Additional graphics or test information as may be reasonably required by the Building Official to review special extraordinary construction methods or equipment.

C. ALTERATION of an EXISTING BUILDING, NOT INVOLVING A CHANGE OF USE or OCCUPANCY:

- 1. _____ **Four**, not five sets of plans.
- 2. _____ “Application for Certificate of Plan Approval” is COMPLETELY AND ACCURATELY filled out.
- 3. _____ Same as B2 except elevation drawings is not required unless the alteration involves the exterior.

D. SPECIAL PROVISIONS:

The following are special provisions:

- 1. When construction includes the use of industrialized units or alternative materials, designs, and methods of construction or equipment approved by the Board, documentation shall be provided to the building official describing how they are to be used. Before these items are installed or used, the following shall be submitted:
 - a. A copy of the construction documents approved by the Board; and
 - b. Details pertaining to the on-site interconnection of modules or assemblies.
- 2. Construction documents submitted that include construction of public swimming pools shall include documentation indicating approval of the pool construction documents by the Ohio Department of Health in accordance with Section 3109.3 of the OBC.
- 3. Construction documents submitted that include alterations or construction of, or additions to buildings where sales, display, storage or manufacture of consumer fireworks, 1.4g or display fireworks, 1.3g shall include documentation indicating that the applicant has received preliminary approval for construction issued by the Ohio Fire Marshal.
- 4. The elevation certification provided by a registered surveyor and dry floodproofing certification, when required in Section 1612.3 for buildings or structures located in identified flood hazard areas, shall be submitted to the building official.

Note: _____ If the construction project involves installation of an automatic fire suppression system, a fire alarm system, or smoke control system, or other specially designed fire protection systems, five sets of construction documents are required and must be submitted under separate permit application(s).

All information required herein have been submitted as required.

Submitters Signature: _____

Print Name: _____

Title Position: _____

E-mail: _____

NOTE: THE APPLICANT HAS THE OPTION OF HAND-CARRYING PLANS AND A COMPLETED APPLICATION TO THE FIRE PREVENTION BUREAU, LOCATED AT, 330 EAST BROAD STREET FOR ALL PROJECTS, OR TO THE FIRE PREVENTION BUREAU AND THE CITY ENGINEER, LOCATED AT 131 COURT ST.

THIS IS FOR NEW CONSTRUCTION AND ADDITIONS, TO REDUCE PLAN REVIEW TIME.

CITY OF ELYRIA
APPLICATION FOR CERTIFICATE OF PLAN APPROVAL
FOR PLANS PREPARED UNDER THE CURRENT OBC

SUBMIT ONE APPLICATION FOR EACH BUILDING OR STRUCTURE. PRINT OR TYPE

1. Business owner's name: _____ 2. Contractor: _____
 Company name: _____ Address: _____
 Mailing Address: _____ City, State, Zip: _____
 City, State, Zip: _____ Phone: _____ E mail: _____
 Phone: _____ E mail: _____ Registration #: _____

3. Land owner's name: _____ 4. Author of Plans: _____
 Mailing address: _____ Address: _____
 City, State, Zip: _____ City, State, Zip: _____
 Phone: _____ E-mail: _____ Phone: _____ Email: _____

5. PROJECT Address: _____
 Intended use (Church, Store, Restaurant, etc.) _____
Describe use in detail _____

6. A. Nature of Job (**Check One**):
 New _____; Addition _____; Alteration _____; Change of Use _____; Ohio Existing Bldg _____.

B. Dimensions and Square Footage:

	New Building	Addition	Alteration	Existing Bldg.
Basement	_____	_____	_____	_____
First Floor	_____	_____	_____	_____
Second Floor	_____	_____	_____	_____
Third Floor	_____	_____	_____	_____
Additional Floors	_____	_____	_____	_____
Total Sq. Ft.	_____	_____	_____	_____

DO NOT WRITE BELOW THIS LINE

The following departments received a copy of this application and one set of plans:

Fire Prevention Bureau	City Engineering Dept.
Date/Time Received _____	Date/Time Received _____
Received By: _____	Received By: _____

PROJECT ADDRESS: _____

6. C. Existing Building Information:

Walls: Masonry _____, Metal _____, Wood Frame _____, Other (Specify) _____

Roof: Wood Frame _____, All Metal _____, Reinforced Concrete _____, Heavy Timber _____,
Other (Specify) _____

Floors: Wood on wood joists _____, Concrete on steel joists _____, Reinforced Concrete _____,
Slab on grade _____, Other (Specify) _____

Ceilings: Exposed steel joists _____, Exposed wood joists _____, Plaster on lath _____,
Regular Drywall _____, Fire-rated Drywall _____, Other (Specify) _____

D. Change of Use: Existing or Previous Use _____, Proposed Use _____

Describe existing or previous use of the building _____

7. Type of construction (Chapter 6, OBC):

I-A _____, I-B _____, II-A _____, II-B _____, III-A _____, III-B _____, IV-A _____, IV-B _____, IV-C _____, IV-HT _____, V-A _____,
V-B _____.

8. Proposed Use Group (Chapter 3, OBC):

A. Assembly (303.1): A-1 _____, A-2 _____, A-3 _____, A-4 _____, A-5 _____. Business (304.1): B _____, Education (305.1).
E _____ Factory: F-1 _____ (Mod-Haz, 306.2), F-2 _____ (Low-Haz, 306.3), High-Hazard: H-1 _____ (Detonation, 307.3).
H-2 _____ (Deflagration/Acc Burn, 307.4), H-3 _____ (Support Combustion, 307.5); H-4 _____ (Health Haz, 307.6).
H-5 _____ (HPM/Excess Quantities, 307.7), Institutional: I-1 _____ (308.2), I-2 _____ (308.3), I-3 _____ (308.4),
I-4 _____ (308.5): Mercantile: M _____ (309.1) Residential: R-1 _____, R-2 _____, R-3 _____, R-4 _____, (310.1)
Storage: S-1 _____ (Mod-Haz, 311.2): S-2 _____ (Low-Haz, 311.3): Utility (312.1): U _____

Mixed Use (Check One): Non-separated _____ Separated by Fire Separation Walls _____ Separated by Fire Walls _____

B. If building is Use Group S, are the materials to be stored? Combustible _____ Noncombustible _____

C. If building is Use Group R1, R2, R3, or R4, specify the number of apartments or units: _____

D. If building is Use Group I2, specify number of beds: _____

9. Maximum Occupant Load (Table 1004.5, OBC): _____

10. List all major subcontractors (Separate applications must be submitted and additional fees are required).

Electrical _____ HVAC _____

Plumbing _____ Fire Alarm _____

Sprinklers _____ Others _____

PROJECT ADDRESS: _____

11. The estimated cost of construction (This estimate shall include heating, plumbing, electrical, fire suppression, fire alarm, and all labor and material costs associated with the project).

\$ _____

12. Fee Schedule:

A. Plan Review	Greater of \$100.00 or \$5.00 per \$1,000 cost of construction (includes all sub trades)	\$ _____
B. Basic Fee	Greater of \$100.00 or 1/2 of 1% of the total cost of construction	\$ _____
C. Sq. Ft. Fee	5 cents/sq. ft. of new floor area	\$ _____
	4 cents/sq. ft. of altered floor area	\$ _____
D. Plan Resubmission due to disapproval	Greater of \$50.00 or 27% of first plan review cost	\$ _____
E. Subtotal	Subtotal	\$ _____
F. State Fee	Add 3% Subtotal (times) the State fee	\$ _____
	Total Fees	\$ _____

13. Owner Signature: _____ . **Print:** _____

Owners Agent Signature: _____ . **Print:** _____

WARNING: CONSTRUCTIONAL ALTERATION WITHOUT PLAN APPROVAL & A PERMIT IN HAND SHALL RESULT IN PAYMENT OF A DOUBLE FEE (1317.07, ELYRIA CODIFIED ORDINANCES). THE BUILDING PERMIT MUST BE CONSPICUOUSLY POSTED FOR PUBLIC VIEW. Preferably in a front window.

DO NOT WRITE BELOW THIS LINE

1st SUBMISSION

OBC: Date _____ Plan Examiner _____

Approved _____, Approved With Contingencies _____, Resubmit _____

ZONING: Date _____ Plan Examiner _____

Approved _____, Approved With Contingencies _____, Resubmit _____

EFD: Date _____ Plan Examiner _____

Approved _____, Approved With Contingencies _____, Resubmit _____

2nd SUBMISSION

OBC: Date _____ Plan Examiner _____

Approved _____, Approved With Contingencies _____, Resubmit _____

ZONING: Date _____ Plan Examiner _____

Approved _____, Approved With Contingencies _____, Resubmit _____

EFD: Date _____ Plan Examiner _____

Approved _____, Approved With Contingencies _____, Resubmit _____

Additional Comments: _____