



CITY OF TUMWATER
 555 ISRAEL RD. SW, TUMWATER, WA 98501
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 (360) 754-4180

**COMMERCIAL REMODEL PERMIT
 Submittal Checklist**

TUM -	DATE STAMP
RCVD BY	

APPLICANT INFORMATION *(please print neatly)*

NAME OF APPLICANT: _____ EMAIL: _____

SUBJECT PROPERTY INFORMATION

ADDRESS OF PROPERTY (COMPLETE): _____

A. PERMIT APPLICATION	N/A	Provided		Staff
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1. Provide a complete and signed (by owner or authorized representative) application and applicable fee. Note: Payment of the plan check fee is required at the time of application.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
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B. BUILDING	N/A	Provided		Staff
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1. Provide two copies of all plans and two copies of all specifications. Draw plans to scale of 1/4" = 1' or larger. Minimum plan sheet size is 18"x24". All notations and drawings must be clear and legible.		<input type="checkbox"/>		<input type="checkbox"/>
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2. Plans for all structures 4,000 sq. ft. and greater, or when the occupancy is an assembly, institutional, educational, or food service related use, shall be prepared, stamped and signed by a Washington State licensed architect. When structural changes are required, the structural plans shall be designed and stamped by a licensed structural engineer (including engineering calculations).	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
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3. Provide:				
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a. Type of construction.		<input type="checkbox"/>		<input type="checkbox"/>
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b. Occupancy type(s).		<input type="checkbox"/>		<input type="checkbox"/>
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c. Deferred submittals (only Fire Alarm and Fire Sprinklers are permitted to be deferred).	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
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d. Number of stories.		<input type="checkbox"/>		<input type="checkbox"/>
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e. Occupant load for each proposed area and total occupant load.		<input type="checkbox"/>		<input type="checkbox"/>
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4. Provide exiting calculations showing exit width, travel distances and type of exiting elements.		<input type="checkbox"/>		<input type="checkbox"/>
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E. ELEVATIONS AND WALL DETAILS	N/A	Provided		Staff
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1. Show:				
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a. Typical and rated wall details.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
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b. Reports and details for fire-resistive wall designs.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
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c. Building elevations.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
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d. Door and window schedule.	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
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F. FLOOR PLAN	N/A	Provided	Staff
1. Show:			
a. Existing floor plans.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. New floor plans.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Square-footage of each floor being remodeled.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Use of each room.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Location and dimensions of all doors and windows.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Full dimensions of buildings and rooms.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Location and type of HVAC, water heaters, and fans.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Location of plumbing fixtures.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Location and rating of all fire-resistive walls.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
G. ELEVATIONS AND WALL DETAILS	N/A	Provided	Staff
1. Show:			
a. Typical and rated wall details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Reports and details of fire-resistive wall designs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Building elevations.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Door and window schedule.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. ROOF PLAN	N/A	Provided	Staff
1. Show:			
a. Roof framing plan with material sizes. If using engineered trusses, provide stamped engineered truss specifications.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Roof pitch and covering materials.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Sheathing type and dimensions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Attic venting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I. PLUMBING PLANS	N/A	Provided	Staff
1. Show:			
a. Waste and vent piping diagram with size, type and slope of drain for each floor level.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Roof drains and leaders.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Water piping layout with size and type of materials.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Location and fuel source of all water heaters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e. Grinder pump spec.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f. Location of all backflow preventers. Provide name and model number of each backflow device.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g. Location of DCVA for fire sprinkler riser(s).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h. Plumbing fixture schedule.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i. Location of waste backwater valve, if required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j. Total number of new or relocated plumbing fixtures, including floor drains and floor sinks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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J. MECHANICAL PLANS	N/A	Provided	Staff
1. Provide:			
a. Layout of all duct work on all levels (specify on plans if the system utilizes a return air plenum ceiling).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Mechanical venting details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Schedule of the mechanical equipment including size, make, efficiency, capacity, weight, location, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Engineering calculations for mechanical loads imposed on the structure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
K. ELECTRICAL PLANS	N/A	Provided	Staff
1. Show:			
a. Location of interior and exterior emergency lights.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Location of exit signage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Location of emergency generator (separate permit and checklist).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
L. EXTERIOR LIGHTING PLAN	N/A	Provided	Staff
1. Basic Lighting Plan elements (see attached example):			<input type="checkbox"/>
a. Location of all new exterior lighting, including wall-mounted lights. The light locations can be shown on the site plan or on a separate plan.	<input type="checkbox"/>	<input type="checkbox"/>	
b. Descriptions, illustrations or photos of the types of lighting fixtures to be installed.	<input type="checkbox"/>	<input type="checkbox"/>	
c. Legend of the number of each type of light-fixture.	<input type="checkbox"/>	<input type="checkbox"/>	
d. The "statement of compliance" with the applicant's signature and date as follows: This lighting design (including the design, placement, and aiming of the lighting fixtures) complies with the Tumwater outdoor lighting regulations. If it is found that changes are necessary to come into compliance with the regulations, we will complete the changes in a timely manner and before an occupancy permit is issued.	<input type="checkbox"/>	<input type="checkbox"/>	
e. Total number of light-fixtures		(Enter number)	_____
2. Photometric Lighting Plan elements (see attached example), for a building Proposal that is 4,000 sq. ft. or larger, or an addition to a building that is 4,000 sq. ft. or larger:			<input type="checkbox"/>
a. Location of all new exterior lighting, including wall-mounted lights. The light locations can be shown on the site plan or on a separate plan.	<input type="checkbox"/>	<input type="checkbox"/>	
b. Descriptions, illustrations or photos of the types of lighting fixtures to be installed.	<input type="checkbox"/>	<input type="checkbox"/>	
c. Legend of the number of each type of light-fixture.	<input type="checkbox"/>	<input type="checkbox"/>	
d. Show foot-candle intensity (from proposed light-fixtures) on the site and along all property-lines and associated public rights-of-way.	<input type="checkbox"/>	<input type="checkbox"/>	
e. The "statement of compliance" with the applicant's signature and date as follows: This lighting design (including the design, placement, and aiming of the lighting fixtures) complies with the Tumwater outdoor lighting regulations. If it is found that changes are necessary to come into compliance with the regulations, we will complete the changes in a timely manner and before an occupancy permit is issued.	<input type="checkbox"/>	<input type="checkbox"/>	
f. Total number of light-fixtures		(Enter number)	_____
M. ENERGY CODE REQUIREMENTS	N/A	Provided	Staff
1. Submit completed Washington State energy code forms.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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N. ADDITIONAL INFORMATION	N/A	Provided	Staff
1. Food service establishments: provide plan review letter from Thurston County Health indicating that they have reviewed the project and listed conditions for opening.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. On projects that may increase the domestic water usage, provide a civil engineers estimate of what the usage will be.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
O. ELECTRONIC SUBMITTAL	N/A	Provided	Staff
1. Compact disc (CD) or USB drive containing all of the plans, reports, etc. as outlined under B through D above, in PDF-file format. Maximum format shall be 300 dpi. Note: Please do not include the application or submittal checklist in electronic format.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I verify that all required documents associated with this application have been submitted.

Signature of Applicant

Date