

### Application for Building, HVAC, Fire Sprinkler and Fire Alarm Plan Review

-Complete all pages-

Contact your Municipality to Verify if there are any additional requirements and to verify fee amounts.



For submission of Building, HVAC, Fi electronically at <u>eplanexam.com/submi</u> the <u>"E-Plan Exam"</u> . For more inform us at info@eplanexam.com and we will <b>must be used for the submission of</b>	<u>t-a-project.</u> Please nation regarding fee p gladly help! <b>This for</b>	ote, in either format paper or e payments and payment options <b>m, the State of Wisconsin S</b>	electronic, fees must or any general ques <b>BD-118 form or the</b>	be made payable to tions, please contact <b>municipalities form</b>
Project Information – Fill in all known i	nformation			
Project/Site Name:				
Tenant Name or Building Designation:				
Previous Tenant Name:				
Number and Street:				
County: Brown Muni	cipality: City of Gr	reen Bay		
Project Scope:				
Designer's Project Number (If Applicable)	:			
1.a. Type of Submittal or Service Requ	ested (check all that a	ipply)		
New     Alteration - Le       Approval Extension     Revision to pr       Permission to Start     Follow Up of all	evel	Addition/Alteration-Level: s	Only	submitting)
Structural Framework Only Other:		☐ Building Shell ☐ Multiple Identical Buildings -	Number of Buildings	:
b. Objects Submitted for This Current	Review (check all that	apply)		
Building HVAC	Sprinkler	E Fire Alarm		
Other Projects (Stand Alone from above Bleacher Interior Exterior	Canop	y		Construction destrian Access
c. Structural Component Plan(s) which	accompany this curre	ent plan submittal (check all th	at apply):	
Roof Truss Metal Bldg	Floor Truss	ast Plank 🛛 Steel Girder	Precast Wall	Laminated Wood
2. Occupancy Type – Major Use of Grea	test Floor Area and Ado	ditional Non-Accessory Occupan	cies – Check all that Ap	oply
A Assembly       A1 A2 A         B Business/Office       B         E Educational       E         F Factory/Industrial       F1 F2         H Hazardous       H1 H2 I		☐ I Institutional/Daycare/CBF ☐ M Mercantile/Retail ☐ R Residential ☐ S Storage ☐ U Utility/Misc.	RF []  1 []  2 []  3 [ ] M ] R1 [] R2 [] R3 ] S1 [] S2 ] U	
3. Construction Information – Construc	tion Class – Check	Area (project area, include all le	evels):	sq ft
One     IA IB IIA III     IIIB IV VA V		If different, Heated/Ventilate Sprinklered/Detector Protec Number of Floor Levels: Is the Total Building Volume les	cted Area:	sq ft

Please Make checks directly payable to: Total amount due (from following pages):

## E-Plan Exam (please verify with your community)

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4. After plans are reviewed, please: (check all that apply)	NOTE: All pap	per plans once reviewed will be directly returned to the municipality.
□ Call customer □ 1 □ 2 □ 3 □ 4 (check number)* □Email Customer	Electronic submittal will be returned to both the municipality and the applicant with additional instructions as required. Once approved, applicants must contact the municipality regarding permit issuance and additional requirements prior to starting work	
(Customer 1) Designer Information First Time Submitter		(Customer 2) Designer Information First Time Submitter

First Name: Last Name			First Name: Last Name				
Company Name:				Company Name:			
Address:				Address:			
City:	State:	Zip Code:		City:	State:	Zip Code:	
Phone Number (area c	ode)			Phone Number (a	area code)		
Email:				Email:			
Check all applicable:			Check all applicable:				
Supervising Professional of Bldg HVAC SpkIr Fire Al			Supervising Professional of Bldg HVAC SpkIr Fire Al				
WI Designer Registration # Exp. Date:			WI Designer Reg	istration #	Exp.	Date:	
(Customer 3) Building First Name	<b>g Owner Information (</b> Last Name	not lessee)		(Customer 4) O First Name	<b>ther</b> Last Name		
Company Name:				Company Name:			
Address:	City:	State	Zip Code	Address:	City:	State	Zip Code
Phone Number (area c	ode)			Phone Number (area code)			
Email:	Email:			Email:			

#### 5. Fire Protection

Provide the following information on any fire alarm or fire suppression system either present within the building or that is being designed as part of this project.

# Check system type as applicable. Building plans must also include this information to determine allowable building area / heights FIRE ALARM FIRE SUPPRESSION

🗌 Complete 🔲 Partial 🗌 None	Compl	ete 🗌 None	🗌 Partial (If p	partial state sy	vstem extents below in comments)
Type: Automatic Detection Manual Alarm		Anti-Freeze	Dry Mai Standards u	nual Wet	Pre-action/Deluge
Monitoring Type: Central Station Remote Supervision Proprietary Supervision Protected Premises	□ 11 □ 13D □ 16 □ 22	☐ 11A ☐ 13D – Mi ☐ 17 ☐ 24	12	☐ 13 ☐ 14 ☐ 17A ☐ 2001	☐ 13R ☐ 15 ☐ 20 ☐ Other
Submitter Comments or Requests (Optional)					

### 6. Other Potential Plan Submittals Required For A Project?

Contact your local municipality for individual submittal requirements for all of the following:

- Petition for Variance

- Plumbing Systems
- There is no required state Electrical review
- NOTE: Department of Health Services enforces building code requirements, including plan review, for hospitals and nursing homes. Daycare facilities must meet building codes prior to their licensing.

### 7. Required Signatures

a) <u>Supervising Professionals:</u> If building will be 50,000 cubic fersupervising professional per SPS 361.40 for the performance of the the construction is in substantial compliance with the approved plan written statement with the department and municipality certifying that not been performed in substantial compliance with the approved plan with this project I will file a compliance statement (State of Wisconst current status of compliance.	s and specifications. Upon completion of construction, I will file a it, to the best of my knowledge and belief, construction has or has ans and specifications. In the event that I am no longer associated
Signature below:	Print below:
Building HVAC Sprinkler Fire Alarm Date:	
Signature below:	Print below:
Building HVAC Sprinkler Fire Alarm Date:	
NOTE: Building supervising professional or registered designer is reinstallation (if applicable)	esponsible for supervision of the fire suppression/fire alarm
<b>b)</b> <u><b>Component Submittal</b></u> . The department requires that the projecompliance with the general design concept. The project designer, for compliance with the codes as they apply to their designs.	and department, will rely on the seal of the component designers
Original Signature of Building Designer Date Sign	ed Name of Component Fabricator
	the site.
Owner's Signature:	Date:
Designer's Signature	
8. Statements of Owners and Designer	
code requirements and any conditions of approval. If a buildir	The owner recognizes responsibility for compliance with all the

b) DESIGNERS Statement (SPS 361.20, 361.31(1), and 361.40): The designer indicated on page one of this form is responsible for preparing or supervising the preparation of the plans to the best of his/her knowledge to comply with the applicable codes of the Industry Services Division for this submittal. If a building, following construction of this project, contains more than 50,000 cubic feet in volume, plans are required to be prepared, signed, sealed and dated by a Wisconsin-registered engineer, architect, or designer [SPS 361.31(1)]. Signatures and seals affixed to the plans shall be original.

# CERTIFICATE OF SUPERVISION

Premise address

I hereby certify that I am a Registered Architect, Registered Professional Engineer, or Designer of Engineering Systems, in accordance with Chapter 443 of the current Wisconsin Statutes.

I further certify that I have been retained as the supervising professional for the performance of the supervision of reasonable on-the-site observations to determine if the construction is in substantial compliance with the approved plans and specifications as required by Section SPS 361.40 of the Wisconsin Administrative Code. Upon completion of construction, I will file a Certificate of Compliance with the municipality certifying that, to the best of my knowledge and belief, construction has or has not been performed in substantial compliance with the approved plans and specifications. If in the event that I am no longer associated with this project I will file a Certificate of Compliance notifying the municipality as such and indicating the current status of compliance.

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This certificate is for supervision of:

- \_\_\_\_ Building or structural design
- \_\_\_\_ Heating, ventilating and air conditioning design
- \_\_\_\_ Energy conservation design
- \_\_\_\_ Other (Specify)\_\_\_\_\_\_

Signature of architect, engineer or designer

Printed name

Address

**Registration number** 

Telephone number

Email address

Date

### 9. Fee Calculation Instructions:

**Building, heating and ventilation, fire alarm and suppression plans.** Fees relating to the submittal of all building and heating and ventilation plans (new, addition, alteration) and fire alarm and fire suppression plans shall be computed on the basis of the total gross floor area of each building, area of addition or area of alteration and shall be determined in accordance with the following adopted fee schedule of the municipality. Verify if the following fee schedule is adopted in the community you are applying with:

### COMMERCIAL PLAN REVIEW FEE SCHEDULE – BUILDING/HVAC/FIRE ALARM/FIRE SUPPRESSION

2. New construction and additions are calculated based on total gross floor area of the structure.

3. A separate plan review fee is charged for each type of plan review.

Area (Square Feet)	Building Plans	HVAC Plans	Fire Alarm System Plans	Fire Suppression System Plans	
Less than 2,500	\$250	\$150	\$100	\$100	
2,500 - 5,000	\$300	\$200	\$100	\$100	
5,001 - 10,000	\$500	\$300	\$100	\$100	
10,001 - 20,000	\$700	\$400	\$150	\$150	
20,001 - 30,000	\$1,100	\$500	\$200	\$200	
30,001 - 40,000	\$1,400	\$800	\$350	\$350	
40,001 - 50,000	\$1,900	\$1,100	\$500	\$500	
50,001 - 75,000	\$2,600	\$1,400	\$700	\$700	
75,001 - 100,000	\$3,300	\$2,000	\$1,000	\$1,000	
100,001 - 200,000	\$5,400	\$2,600	\$1,200	\$1,200	
200,001 - 300,000	\$9,500	\$6,100	\$3,000	\$3,000	
300,001 - 400,000	\$14,000	\$8,800	\$4,400	\$4,400	
400,001 - 500,000	\$16,700	\$10,800	\$5,600	\$5,600	
Over 500,000	\$18,000	\$12,100	\$6 <i>,</i> 400	\$6 <i>,</i> 400	
Note:	<ol> <li>A Plan Entry Fee of \$100.00 shall be submitted with each submittal of plans in addition to the plan review and inspection fees.</li> <li>At the Sole discretion of the Supervisor of Building Inspection and Plans Examiner; Fees may be modified, reduced or waived based on scope of services, project</li> </ol>				
Determination of Area	type, or other relevant factors.The area of a floor is the area bounded by the exterior surface of the building walls or the outside face of columns where there is no wall. Area includes all floor levels such as subbasements, basements, ground floors, mezzanines, balconies, lofts, all stories, and all roofed areas including porches and garages, except for cantilevered canopies on the building wall. Use the roof area for free standing canopies.				
Structural Plans and other Component Submittals	I structural plans precast concrete laminate wood beams cladding elements other				
Accessory Buildings	The plan review fee for accessory buildings less than 500 square feet shall be \$125.00 with the plan entry fee waived.				
Early Start	The plan review fee for permission to start construction shall be \$75.00 for all structures less than 2,500 sf. All other structures shall be \$150.00. The square footage shall be computed as the first floor of the building or structure.				
Plan Examination Extensions	The fee for the extensi review fee, not to exce	on of an approved plan ed \$3,000.00.	review shall be 50% (	of the original plan	
Resubmittals & revisions to approved plans	approved plans, the review fee shall be \$75.00. Any significant changes or alterations beyond minor amendments as determined by the Plans Examiner and Building				

Submittal of plans after construction	Where plans are submitted after construction, the standard late submittal fee of \$250.00 will be assessed per each review type that occurred after construction. This is in addition to any other plan entry fees, structural components and base fees applied to a project.
Expedited Priority Plan Review	The fee for a priority plan review, which expedites completion of the plan review in less than the normal processing time when the plan is considered ready for review, shall be 200% of the fees specified in these provisions.

### ONCE YOU HAVE SUBMITTED - E-PLAN EXAM WILL VERIFY FEES OWED, CONTACT APPLICANTS DIRECTLY AND PROVIDE PAYMENT SPECIFICS ON WHO TO MAKE PAYMENT TO AND WHAT OPTIONS ARE AVAILABLE.

# \*\*NOTE: THIS FORM IS PLAN REVIEW APPLICATION ONLY. APPROVAL OR APPLICATION DOES NOT AUTOMATICALLY TRANSLATE INTO PERMISSION TO BEGIN CONSTRUCTION ACTIVITIES NOR DOES IT CONSTITUTE A PERMIT.

CONTACT YOUR LOCAL BUILDING INSPECTION DEPARTMENT FOR ADDITIONAL INFORMATION REGARDING PERMITTING AND INSPECTIONS REQUIREMENTS FOR ALL CONSTRUCTION ACTIVITIES ON PUBLIC AND PRIVATE PROPERTY.\*\*