

Commercial Plan Review Submittal Checklist

Department of Consumer & Business Services Building Codes Division

1535 Edgewater St. NW, Salem, Oregon

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oregon.gov/bcd

DEPARTMENT USE ONLY
Plan review no.:
Permit no.:
Office:
BCD employee initials:

JOB INFORMATION			OWNER		
Name:		Name:			
Address:					
City:	State: ZIP		State: ZIP:		
Phone:	- Fax: -	Phone:	- Fax:		
ARG	CHITECT / ENGINEER		APPLICANT		
Name:		Name:			
A 11					
City:	State: ZIP		State: ZIP:		
Phone: -	- Fax: -		- Fax:		
REVIEW INFORMATION					
Declaration of value: \$	Building sq. ft.:		Review fee: \$		
Building use (be specifi	c):				
Check type of review:	☐ Fire and life safety ☐	Structural Mechanic	al Sprinkler Alarm		
MINIMAL PLAN REQUIREMENTS CHECKLIST					
Three sets of plans and the following items are required for review:					
Initials Date					
 Site plan: changes of occupancy, additions, alterations, and new construction Floor/roof plans: including dimensions, windows, and doors 					
3		Floor/roof framing: framing member size, joist, beam, and column			
4.		Foundation plan: wall dimensions and footings — for complete review			
5.		Building elevations: minimum two views			
6.		Building cross-sections: structural members, roof and wall sheathing			
7.		Structural calculations: new or change of occupancy			
8		Electrical: exits, fire alarms, and fire and life safety equipment Energy documentation: If building is heated or cooled, submit on Oregon Energy Code guideline forms.			
9		Residential (motels, SR, apartments): identify path			
10		Complete specifications: quality and type of all construction materials, and methods of construction			
10		Architect/engineer stamp: over 4,000 sq. ft. or 20' height — Architect law-ORS 671.030, Engineer law-ORS 672.020			
11					
12	Mechanical plans: equipment location, size, type, and layout — fan capacity, etc.				
13		Disabled access: indicate compliance measures			
14. Minimum scale: 1/8"-minimum paper size: 81/2" X 11" on all plans					
Other agency clearances:					
15		Department of Environmental Quality or local sanitary authority			
16	Local planning department: zoning, special land use. Building is in flood plain? Yes No				
A DDI IC A N.T.					
APPLICANT:		Signature			
Print name:			Date:		

