



# RESIDENTIAL BUILDING PERMIT APPLICATION CHECKLIST

## CITY OF ASHLAND - BUILDING DIVISION

**Location:** \_\_\_\_\_

**Applicant:** \_\_\_\_\_

Yes No N/A


**General Information:**

- Project name and location
- Design professional, architect and /or engineer(s) name and phone #
- Three (3) sets of plans
- Energy forms
- Names, addresses and phone #'s of all owners and contractors w/ license #
- Total square footage of impervious surfaces
- Gross square footage
- Demolished structures information
- Remodels: Total # of plumbing fixtures being removed, relocated or added
- Any conditions imposed as part of an approved planning action shall be shown
- Structural design loads shown on plans (snow load, wind & exposure)

**Plot plan**


- Show all proposed and existing buildings
- Direction indicator (show north)
- easement location, public & private. All maintenance agreements for common areas.
- distances to property lines and buildings
- Location of storm drains, sanitary sewer, water service connection and electric service panel
- Show point of termination for footing, roof and storm drains (Street or approved disposal site)
- Show contour lines (topography)
- Basement and retaining walls,(cross sections and details or attached engineering)

**Foundation Plan**

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- Elevation of footing and foundation details (including hold downs and their locations)

**Floor Plan**


- Show each floor and use of all rooms and other areas
- If remodel / addition show existing floor plan.
- Beam calculations. Provide 2 sets of calc's for all beams and multiple joists over 10'
- Show brace panels (exterior & interior), Alt. brace panels, Portal Frame or Engineered System

**Framing cross section & details**

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- Show coverings for all surfaces (roofing, ceilings interior, exterior and projections)

**Elevations**

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- Show all sides of building

**Roof Plan**


- Engineered trusses (Deferred)
- Stick frame

**Mechanical Plan**


- Show all heating, ventilation and A/C equipment and location of each
- Gas fixtures (appliances) listed w/ BTU requirements

**Signature of applicant submitting plans** \_\_\_\_\_

**Inspector** \_\_\_\_\_

**Date** \_\_\_\_\_

\* This list does not constitute a plan review.