



# Commercial Plan Review Submittal Checklist

## CITY OF SCAPPOOSE

52610 NE 1st St. 503-543-7184

Mailing Address; 33568 E. Columbia Ave., Scappoose OR 97056

scappoosebuildingdept@scappoose.gov

<https://www.scappoose.gov/building>

### DEPARTMENT USE ONLY

Permit #.:

Amt. Paid.:

Receipt#

Employee initials:

### JOB INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

### OWNER

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

### ARCHITECT / ENGINEER

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

### APPLICANT

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Fax: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

### REVIEW INFORMATION

Declaration of value: \$

Building sq. ft.:

Review fee: \$

Building use (be specific):

Check type of review: ☐ Fire and life safety

☐ Structural

☐ Mechanical

☐ Sprinkler

☐ Alarm

### MINIMAL PLAN REQUIREMENTS CHECKLIST

Three sets of plans and the following items are required for review: \_

Initials Date

1. \_\_\_\_\_

**Site plan:** changes of occupancy, additions, alterations, and new construction

2. \_\_\_\_\_

**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

9. \_\_\_\_\_

**Energy documentation:** If building is heated or cooled, submit on Oregon Energy Code guideline forms.

**Residential** (motels, SR, apartments): identify path \_\_\_\_\_

10. \_\_\_\_\_

**Complete specifications:** quality and type of all construction materials, and methods of construction

11. \_\_\_\_\_

**Architect/engineer stamp:** over 4,000 sq. ft. or 20' height — Architect law-ORS 671.030, Engineer law-ORS 672.020

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: 8 1/2" 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

APPLICANT: \_\_\_\_\_

Signature

Print name: \_\_\_\_\_ Date: \_\_\_\_\_



440-2558 (4/19/COM)

