



OBC CONSTRUCTION DOCUMENTS SUBMISSION CHECKLIST

City of Cleveland

Department of Building & Housing
Division of Construction Permitting
601 Lakeside Avenue, Room 505
Cleveland, Ohio 44114-1070
216/664-2910

Adequacy Review Statement:

The project plans were checked for the minimum construction document information required by OBC Section 106.1.1 to perform a plan examination.

Project Street Address: _____

Description of Proposed Work: _____

Applicant Name: _____ Phone #: _____

E-Mail: _____ Fax #: _____

The following checked items are inadequate for this project submission:

Construction Documents

- ___ a. A minimum of four (4) complete bound sets of construction documents, including specification books if issued by the design professional, must be submitted. Additional sets may be requested by the master plans examiner
- ___ b. Plans must bear the seal of an Ohio Registered Architect or Professional Engineer responsible for their preparation.
- ___ c. Plans to clearly show location, nature and extent of proposed work, and show in detail that it will conform to the provisions of this code.
- ___ d. Architectural, mechanical, electrical, and plumbing plans to be coordinated to show consistency in work information when dealing with relevant parts of the project.

1. Index of drawings/general code information

- ___ a. All occupancy classifications(s).
- ___ b. Type(s) of construction.
- ___ c. Gross square footage of project work area on each floor.
- ___ d. Maximum design occupant load per floor.

2. Site Plan

- ___ a. Shown to scale
- ___ b. Dimensioned size & location of new construction, and dimensions to existing buildings.
- ___ c. Dimensioned property lines and interior lot lines.
- ___ d. Setback & side yard dimensions, and distances from property lines and interior lot lines.
- ___ e. Identification, location & right-of-way width of address street.
- ___ f. Type, size and location of all utility lines.
- ___ g. Elevations of all proposed finish grades.
- ___ h. Demolition site plan shall show construction and utilities to be demolished, and location and size of existing construction and utilities to remain on the site.

2.1 Structures in flood hazard areas.

- ___ a. Current FEMA "FHBM", "FIRM", or "FBFM" for the project location.
- ___ b. Building elevation using same basic flood elevation as above related map.

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3. Floor Plans

- a. Complete plans of all floors affected by the proposed work or change of occupancy.
- b. Sufficient dimensions to describe size of all relevant spaces.
- c. Relevant information such as windows, door swings, shafts, stairs and ramps.
- d. Wall type materials described by legend, notation, or other clearly understandable method.
- e. All spaces identified by use, example: KITCHEN.
- f. Number of people to be accommodated on every floor, and in all rooms and spaces.
For child day care facilities: the number of children older than two and one-half years of age, and the number two and one-half years of age or less in each room.

4. Exterior Wall Envelope

- a. Exterior elevations of building identifying exterior materials, locations of all wall openings, floor to floor dimensions, and dimensioned building height.
- b. Location of gutters & downspouts.
- c. Exterior grade line along face of walls.
- d. For new building construction and additions, information to show compliance with building energy efficiency criteria referenced in the OBC.

5. Sections

- a. Building cross sections(s).
 - b. Exterior and/or interior wall section(s).
- Note:** Sections to be detailed to include typical connections, and to describe building construction showing wall, ceiling, floor, and roof materials

6. Structure

- a. Table of design loads including earthquake design data.
- b. Dimensioned foundation plan, floor and roof framing plans and details.
- c. Soils report if applicable.
- d. Wood truss design drawings sealed by an Ohio registered design professional.

7. Fire Protection Systems

- a. Describe location, nature and extent of required fire protection systems complying with OBC chapter 9.
- b. Plans prepared by an Ohio certified fire protection system designer shall be submitted separately to the city's Fire Prevention Bureau for review and issuance of separate installation permits.

8. Ratings

- a. Construction details of fire resistance ratings for structural elements.
- b. Construction details of ratings for separation walls, and shaft enclosures.
Note: Show ratings in hours. Provide code approved fire test design name & number, or data from approved alternative methods for determining fire resistance.
- c. ASTM E 84 flame spread classifications of interior wall and ceiling finish materials.
- d. NFPA 253 critical radiant flux classifications of interior floor finish materials.
- e. NFPA 701 test report for flame resistance or test report of noncombustibility for membrane materials, tents, hanging and other decorative materials.

9. System Descriptions

- a. Mechanical (HVAC) floor plans and details.
- b. Electrical power and lighting floor plans and detail.
- c. Plumbing floor plans and details.

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10. Additional Information & Special Provisions.

- ___ a. For Ohio Industrialized Units provide:
 - i). Two copies of the construction documents approved by the Ohio Board of Building Standards, with each page bearing the board's approval stamp dated after June 30, 2005
 - ii). Foundation plan and details bearing the seal of an Ohio design professional, and showing connections between unit and foundation.
 - iii). Details bearing the seal of an Ohio design professional, and showing all on-site construction and interconnection of units or modules.
- ___ b. For construction of public swimming pools, include documentation indicating approval of pool construction documents from the Ohio Department of Health.

ADJUDICATION ORDER #: _____

The above "checked" items were not provided with the submitted construction documents. This project does not conform to the requirements of the rules adopted by the Ohio Board of Building Standards. This adequacy review was performed to determine if the minimum required documents per OBC Section 106.1 were submitted. You have the right to appeal this decision within 30 days of the date on this Commercial Building Plan Review Checklist by filing an appeal through the City of Cleveland Chief Building Official to the City of Cleveland Board of Building Standards and Building Appeals. You have the right to be represented by counsel, present arguments or contentions orally or in writing, and present evidence and examine witnesses appearing for or against you. Be advised it is a violation of the Ohio Revised Code, the Cleveland Building Code and the Ohio Building Code to build, alter, or change use or occupancy without first obtaining the required approval from the City of Cleveland Department of Building and Housing.

Thomas Vanover
Chief Building Official
City of Cleveland
Department of Building and Housing

Adequacy Plan Reviewer: _____

(Signature/Date)

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SUGGESTED PLAN EXAMINATION ROUTING CHECKLIST

<input type="checkbox"/>	Building & Housing Records – Room 517
<input type="checkbox"/>	Address and Property Lines Verification Room 518
<input type="checkbox"/>	Zoning Administration Room 505
<input type="checkbox"/>	Fire Prevention Bureau
<input type="checkbox"/>	Building Code Chapters 1 thru 35
<input type="checkbox"/>	Structural Review
<input type="checkbox"/>	Ohio Mechanical Code
<input type="checkbox"/>	National Electric Code
<input type="checkbox"/>	Ohio Plumbing Code
<input type="checkbox"/>	Dept. of Health – 1925 St. Clair Ave
<input type="checkbox"/>	City Planning Department - Room 501
<input type="checkbox"/>	Landmark Commission – Room 519
<input type="checkbox"/>	Water Pollution Control – 12302 Kirby Ave.
<input type="checkbox"/>	Site Drainage & Engineering/Work in Right-of-Way – Room 518
<input type="checkbox"/>	Curb cuts: Division of Traffic – Room 518
<input type="checkbox"/>	Right-of-Way obstructions: Div. of Streets – Room 25
<input type="checkbox"/>	Div. of Air Quality 1925 St. Clair Ave.
<input type="checkbox"/>	Other: _____
<input type="checkbox"/>	Other: _____
<input type="checkbox"/>	Other: _____