

Attachment "A"

Minimum Required Information on the plan for Performing a Plan Review:

Name of Project _____

Address of Project _____

Date _____

Designer's Name _____

Designer's Occupation _____

Phone Number _____ FAX Number _____

Reference Code _____ Edition of Code _____

Use Group _____ Type of Construction _____

Area of Building or Tenant Space _____ square feet

Design Occupant Load _____

Sprinklered – Yes _____ No _____