



Commercial Plumbing Application Checklist

City of Troutdale

104 SE Kibling Ave., Troutdale Or 97060

Permit Specialist 503 674-7229

Application No.:

Date Received

Received By

SECTION 1.0 — GENERAL PROJECT DATA			
1.1	<input checked="" type="checkbox"/>	Required	No. of sets of plans: 3 _____
1.2	<input checked="" type="checkbox"/>	Required	Cover sheet plan index _____
1.3	<input checked="" type="checkbox"/>	Required	Code summary _____
1.4	<input checked="" type="checkbox"/>	Required	Site plan _____
1.5	<input type="checkbox"/> P	<input type="checkbox"/> NA	Professional stamp and signature _____
1.6	<input type="checkbox"/> P	<input type="checkbox"/> NA	Fire and life-safety plan _____
SECTION 2.0 — CIVIL DATA			
2.1	<input checked="" type="checkbox"/>	Required	Site utility plan _____
2.2	<input checked="" type="checkbox"/>	Required	Erosion-control plan _____
2.3	<input type="checkbox"/> P	<input type="checkbox"/> NA	Utility-vault location and details _____
2.4	<input type="checkbox"/> P	<input type="checkbox"/> NA	Utility maintenance agreements _____
2.5	<input type="checkbox"/> P	<input type="checkbox"/> NA	Storm-water calculations _____
SECTION 3.0 — PLUMBING DATA			
3.1	<input checked="" type="checkbox"/>	Required	Floor plan(s) _____
3.2	<input checked="" type="checkbox"/>	Required	Piping and material schedule _____
3.3	<input checked="" type="checkbox"/>	Required	Equipment layout plan _____
3.4	<input checked="" type="checkbox"/>	Required	Fixture schedule _____
3.5	<input type="checkbox"/> P	<input type="checkbox"/> NA	Site utility plan: 3 _____
3.6	<input type="checkbox"/> P	<input type="checkbox"/> NA	Building cross section _____
3.7	<input type="checkbox"/> P	<input type="checkbox"/> NA	Rise diagram _____
3.8	<input type="checkbox"/> P	<input type="checkbox"/> NA	Roof plan _____
3.9	<input type="checkbox"/> P	<input type="checkbox"/> NA	Back flow prevention location _____
3.10	<input type="checkbox"/> P	<input type="checkbox"/> NA	Irrigation plan _____
3.11	<input type="checkbox"/> P	<input type="checkbox"/> NA	Fire-rated construction details _____
3.12	<input type="checkbox"/> P	<input type="checkbox"/> NA	Under-slab plumbing plan _____
3.13	<input checked="" type="checkbox"/>	Required	Structural calculations for vertical loads and lateral loads for equipment weighing over 400 pounds _____
3.14	<input type="checkbox"/> P	<input type="checkbox"/> NA	Equipment manufacturers' catalog "cut sheets" or specifications _____
3.15	<input type="checkbox"/> P	<input type="checkbox"/> NA	Utility maintenance agreements _____
3.16	<input type="checkbox"/> P	<input type="checkbox"/> NA	Water supply calculations _____
3.17	<input type="checkbox"/> P	<input type="checkbox"/> NA	Sanitary system calculations _____
3.18	<input type="checkbox"/> P	<input type="checkbox"/> NA	Irrigation demand calculations _____
3.19	<input type="checkbox"/> P	<input type="checkbox"/> NA	Roof drain and storm water calculations _____

