

# FORM F3

# BUILDING CODE ANALYSIS FORM

PROJECT \_\_\_\_\_ DISTRICT \_\_\_\_\_

SUBMITTAL:  SCHEMATIC  DESIGN DEVELOPMENT  CONSTRUCTION DOCUMENT

DATE \_\_\_\_\_ CODE & EDITION \_\_\_\_\_ GUIDE EDITION \_\_\_\_\_

BASIC BUILDING CODE INFORMATION						
DESIGNATED AREAS OF BUILDING	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6
CONSTRUCTION CLASSIFICATION TYPE (IBC 602)						
OCCUPANCY GROUP (indicate all) (IBC 302) (Note IBC <del>506.5</del> 506.2.2, 506.2.4)						
OCCUPANCY GROUP (indicate most restrictive) (IBC Table <del>503</del> 504.3, 504.4, 506.2)						
	_____	_____	_____	_____	_____	_____
<del>Does building require</del> Incidental Use Area Separation? (IBC <del>508.2.5</del> 509.4)	<input type="checkbox"/> no <input type="checkbox"/> yes					
<del>Does building have</del> Accessory Occupancy (ies)? What percent of story is the sum of all accessory occupancies? (IBC 508.2)	<input type="checkbox"/> no <input type="checkbox"/> yes SF %					
Mixed Occupancy – <u>Separated?</u> (IBC <del>508</del> 508.4, 506.2.2, 506.2.4)	<input type="checkbox"/> no <input type="checkbox"/> yes					
<u>Mixed Occupancy</u> - Non separated? (IBC 508.3)	<input type="checkbox"/> no <input type="checkbox"/> yes					
<del>Separated</del> (IBC <del>508.4</del> ) (IBC <del>506.5</del> )	<input type="checkbox"/> no <input type="checkbox"/> yes					

<p>OTHER FIRE PROTECTION SYSTEMS, DEVICES or FEATURES</p> <p>If the building has any special or notable fire protection or safety feature or hazard the designers should list them here, describe the performance characteristics and refer to locations in construction documents. (e.g. fire extinguishers, smoke-evacuation/control/compartments. Note IBC 414.1.3.)</p>						
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<b>BUILDING AREA</b>						
<b>DESIGNATED AREAS OF BUILDING</b>	<b>Area-1</b>	<b>Area-2</b>	<b>Area-3</b>	<b>Area-4</b>	<b>Area-5</b>	<b>Area-6</b>
<p><b>AREA LIMIT BY PER STORY</b> (IBC Table 503) (Do not indicate increases for sprinklers &amp; street frontage.)</p>	_____SF	_____SF	_____SF	_____SF	_____SF	_____SF
<p><b>MAXIMUM AREA MODIFICATION PER STORY FROM EQUATION 5-1 OF IBC</b> (Insert equation from IBC 506.1 with completed calculations in this box) (Equation 5-1)</p> $A_a = A_t + [A_t \times I_f] + [A_t \times I_s]$ <p><math>A_a</math> _____ = Allowable area per floor (square feet).  <math>A_t</math> _____ = Tabular area per floor in accordance with _____ Table 503  <math>I_f</math> _____ = Area increase factor due to frontage _____ (percent) as calculated in accordance with _____ Section 506.2.  <math>I_s</math> _____ = Area increase due to sprinkler protection as _____ calculated in accordance with Section 506.3.            (Repeat equation for each story of differing occupancies, IBC 506.5.2)</p> <p>Note: footnote "e." from table 601</p>	_____SF	_____SF	_____SF	_____SF	_____SF	_____SF
<p><b>MAXIMUM AREA PER STORY</b></p>	_____SF	_____SF	_____SF	_____SF	_____SF	_____SF

TOTAL ALLOWED AREA OF BUILDING (Summary of all stories)	_____ SF					
AREA AS DESIGNED PER STORY (Repeat for each story)	_____ SF					
Total Designed Area of Building	_____ SF					

<b><u>BUILDING AREA</u></b>						
<b><u>DESIGNATED AREAS OF BUILDING</u></b>	<b><u>Area 1</u></b>	<b><u>Area 2</u></b>	<b><u>Area 3</u></b>	<b><u>Area 4</u></b>	<b><u>Area 5</u></b>	<b><u>Area 6</u></b>

<p><u>ALLOWABLE AREA DETERMINATION</u> (Indicate equation used)</p> <p><input type="checkbox"/> <u>IBC 506.2.1 Equation 5-1</u> <u><math>Aa = At + (NS \times If)</math></u></p> <p><input type="checkbox"/> <u>IBC 506.2.3, Equation 5-2</u> <u><math>Aa = [At + (NS \times If)] \times Sa</math></u></p> <p><input type="checkbox"/> <u>IBC 506.2.4, Equation 5-3</u> <u><math>Aa = [At + (Ns \times If)]</math></u></p> <p><u>Aa = Allowable area per story (square feet).</u>  <u>At = Tabular allowable area factor (NS, S1, or S13R value as applicable in accordance with Table 506.2)</u>  <u>NS = Tabular allowable area factor in accordance with Table 506.2 for a non-sprinklered building (regardless of whether the building is sprinklered)</u>  <u>If = Area factor increase factor due to frontage (percent) as calculated in accordance with Section 506.3.</u>  <u>Sa = Actual number of building stories above grade plane, not to exceed three (3). For buildings equipped throughout with automatic sprinkler system installed in accordance with Section 903.3.1.2, use the actual number of building stories above grade plane, not to exceed four (4).</u></p>	<p><u>Aa=_____</u></p> <p><u>At=_____</u></p> <p><u>NS=_____</u></p> <p><u>If=_____</u></p> <p><u>Sa=_____</u></p>					
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<p><b><u>FRONTAGE INCREASE, If</u></b>  <b><u>IBC 506.3.3, Equation 5-5</u></b></p> <p><b><u>If = [F/P - 0.25] W/30</u></b></p> <p><b><u>If = Area factor increase factor due to frontage.</u></b>  <b><u>F = Building Perimeter that fronts on a public way or open space having minimum distance of 20 feet.</u></b>  <b><u>P = Perimeter of entire building (feet).</u></b>  <b><u>W = Width of public way or open space in accordance IBC 506.3.2, Equation 5-4</u></b></p> <p><b><u>W = (L1 x w1 + L2 x w2 + L3 x w3 +...) / F</u></b></p> <p><b><u>Ln = Length of a portion of the exterior perimeter wall.</u></b>  <b><u>wn = Width (&gt;= 20 feet) of public way or open space associated with that portion of the exterior perimeter wall.</u></b>  <b><u>F = Building perimeter that fronts on a public way or open space having a width of 20 feet or more.</u></b></p>	If= _____  F= _____  P= _____  W= _____					
<u>ALLOWABLE AREA PER STORY</u>	_____ SF					
<u>AREA AS DESIGNED - First Story</u>	_____ SF					
<u>AREA AS DESIGNED - Second Story</u>	_____ SF					
<u>AREA AS DESIGNED - Third Story</u>	_____ SF					

<b>BUILDING HEIGHT</b>							
<b>DESIGNATED AREAS OF BUILDING</b>		<b>Area-1</b>		<b>Area-2</b>		<b>Area-3</b>	
<b>HEIGHT</b>		<b>DESIGNED</b>	<b>ALLOWED</b>	<b>DESIGNED</b>	<b>ALLOWED</b>	<b>DESIGNED</b>	<b>ALLOWED</b>
<i>Without any Allowable Increase (IBC Table 503)</i>	<i>In Feet</i>	_____	_____	_____	_____	_____	_____
	<i>In Stories</i>	_____	_____	_____	_____	_____	_____
<i>Allowable Height Increase (IBC 504.2)</i>	<i>In Feet</i>	_____	_____	_____	_____	_____	_____
	<i>In Stories</i>	_____	_____	_____	_____	_____	_____
<i>Total Height including any Allowable Increase</i>	<i>In Feet</i>	_____	_____	_____	_____	_____	_____
	<i>In Stories</i>	_____	_____	_____	_____	_____	_____

<b>BUILDING HEIGHT</b>							
<b>DESIGNATED AREAS OF BUILDING</b>		<b>Area-4</b>		<b>Area-5</b>		<b>Area-6</b>	
<b>HEIGHT</b>		<b>DESIGNED</b>	<b>ALLOWED</b>	<b>DESIGNED</b>	<b>ALLOWED</b>	<b>DESIGNED</b>	<b>ALLOWED</b>
<i>Without any Allowable Increase (IBC Table 503)</i>	<i>In Feet</i>	_____	_____	_____	_____	_____	_____
	<i>In Stories</i>	_____	_____	_____	_____	_____	_____
<i>Allowable Height Increase (IBC 504.2)</i>	<i>In Feet</i>	_____	_____	_____	_____	_____	_____
	<i>In Stories</i>	_____	_____	_____	_____	_____	_____
<i>Total Height including any Allowable Increase</i>	<i>In Feet</i>	_____	_____	_____	_____	_____	_____
	<i>In Stories</i>	_____	_____	_____	_____	_____	_____

*Per IBC Chapter 10. List individual space occupancy load on life safety or architectural plans.*

<u>ALLOWABLE BUILDING HEIGHT</u> & <u>ALLOWABLE NUMBER OF STORIES ABOVE GRADE PLANE</u>							
<u>DESIGNATED AREAS OF BUILDING</u>		<u>Area 1</u>		<u>Area 2</u>		<u>Area 3</u>	
<u>HEIGHT</u>		<u>DESIGNED</u>	<u>ALLOWED</u>	<u>DESIGNED</u>	<u>ALLOWED</u>	<u>DESIGNED</u>	<u>ALLOWED</u>
<u>IBC Table 504.3</u>	<u>In Feet</u>	_____	_____	_____	_____	_____	_____
<u>IBC Table 504.4</u>	<u>In Stories</u>	_____	_____	_____	_____	_____	_____

<u>ALLOWABLE BUILDING HEIGHT</u> & <u>ALLOWABLE NUMBER OF STORIES ABOVE GRADE PLANE</u>							
<u>DESIGNATED AREAS OF BUILDING</u>		<u>Area 4</u>		<u>Area 5</u>		<u>Area 6</u>	
<u>HEIGHT</u>		<u>DESIGNED</u>	<u>ALLOWED</u>	<u>DESIGNED</u>	<u>ALLOWED</u>	<u>DESIGNED</u>	<u>ALLOWED</u>
<u>IBC Table 504.3</u>	<u>In Feet</u>	_____	_____	_____	_____	_____	_____
<u>IBC Table 504.4</u>	<u>In Stories</u>	_____	_____	_____	_____	_____	_____

<b>BUILDING DESIGN OCCUPANT LOAD</b>						
<b>DESIGNATED AREAS OF BUILDING</b>	<b>Area 1</b>	<b>Area 2</b>	<b>Area 3</b>	<b>Area 4</b>	<b>Area 5</b>	<b>Area 6</b>
<u>First</u> Story						
<u>Second</u> Story						
<u>Third</u> Story						
Total						

## GENERAL FIRE PROTECTION REQUIREMENTS

DESIGNATED AREAS OF BUILDING	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6
<b>SEPARATIONS</b>						
Fireblocking Required (IBC Section <del>717</del> 718.2)	<input type="checkbox"/> no <input type="checkbox"/> yes					
Draftstopping Required (IBC Section <del>717</del> 718.3, 718.4)	<input type="checkbox"/> no <input type="checkbox"/> yes					
<u>Fire Wall Required (IBC Section 706)</u>	<u><input type="checkbox"/> no <input type="checkbox"/> yes</u>					
Fire Barrier Required (IBC Section 707)	<input type="checkbox"/> no <input type="checkbox"/> yes					
Fire Partition Required (IBC Section <del>420-708</del> )	<input type="checkbox"/> no <input type="checkbox"/> yes					
Smoke Barriers Required (IBC Sections <del>407 and 408</del> 709)	<input type="checkbox"/> no <input type="checkbox"/> yes					
Smoke Partitions Required (IBC Section <del>407-710</del> )	<input type="checkbox"/> no <input type="checkbox"/> yes					
Smoke Control System Required (IBC Section 909)	<input type="checkbox"/> no <input type="checkbox"/> yes					
<b>ALARM &amp; DETECTION</b>						
Fire Alarm System Required (IFC Section 907.5.2.2)	<input type="checkbox"/> no <input type="checkbox"/> yes					
<del>Emergency Alarm System Required (IFC 908)</del> <u>Fire Alarm System Required (IFC 907.5.2.1)</u>	<input type="checkbox"/> no <input type="checkbox"/> yes					
<b>SUPPRESSION</b>						
Standpipes Required (IFC Section 905)	<input type="checkbox"/> no <input type="checkbox"/> yes					
Sprinklers Required (IFC Section 903)	<input type="checkbox"/> no <input type="checkbox"/> yes					
Sprinklers Provided?	<input type="checkbox"/> no <input type="checkbox"/> yes					
Portable Extinguishers Required (IFC 906)	<input type="checkbox"/> no <input type="checkbox"/> yes					
Other suppression systems required (IFC 904)	<input type="checkbox"/> no <input type="checkbox"/> yes					
<u>Smoke Control Required (IFC 909)</u>	<u><input type="checkbox"/> no <input type="checkbox"/> yes</u>					

Smoke & Heat <del>vents</del> <u>Removal</u> required (IFC 910)	<input type="checkbox"/> no <input type="checkbox"/> yes					
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**OTHER FIRE AND LIFE SAFETY FEATURES**

DESIGNATED AREAS OF BUILDING	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6
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**AREA OF REFUGE**

<del>Separation required (IBC 1007.6.2)</del>	<del><input type="checkbox"/> no <input type="checkbox"/> yes</del>					
<del>Two-way communication provided (IBC 1007.6.3)</del>	<del><input type="checkbox"/> no <input type="checkbox"/> yes</del>					
<u>Area of Refuge with Instruction provided (IBC 1007.6.4, 1009.6, 1009.11)</u>	<input type="checkbox"/> no <input type="checkbox"/> yes					

**EXTERIOR AREA FOR ASSISTED RESCUE**

<del>Separation required (IBC 1007.8 )</del>	<del><input type="checkbox"/> no <input type="checkbox"/> yes</del>					
<u>Identification Exterior Area for Assisted Rescue with Instruction provided (IBC 1007.8.3, 1009.9, 1009.11)</u>	<input type="checkbox"/> no <input type="checkbox"/> yes					

**OTHER**

	<input type="checkbox"/> no <input type="checkbox"/> yes					
	<input type="checkbox"/> no <input type="checkbox"/> yes					
	<input type="checkbox"/> no <input type="checkbox"/> yes					
	<input type="checkbox"/> no <input type="checkbox"/> yes					
	<input type="checkbox"/> no <input type="checkbox"/> yes					
	<input type="checkbox"/> no <input type="checkbox"/> yes					
	<input type="checkbox"/> no <input type="checkbox"/> yes					
	<input type="checkbox"/> no <input type="checkbox"/> yes					
	<input type="checkbox"/> no <input type="checkbox"/> yes					
	<input type="checkbox"/> no <input type="checkbox"/> yes					

**FIRE RESISTANCE RATING OF BUILDING ELEMENTS**

<b>DESIGNATED AREAS OF BUILDING</b>		<b>Area 1</b>	<b>Area 2</b>	<b>Area 3</b>	<b>Area 4</b>	<b>Area 5</b>	<b>Area 6</b>
Structural Frame ( IBC Table 601)	As Required, Hrs						
	As Designed, Hrs						
	Testing Agency & Design No.(UL, FM, etc)						
	Wall/Partition Key Code						
Bearing Walls, Exterior ( IBC Table 601)	As Required, Hrs						
	As Designed, Hrs						
	Testing Agency & Design No.(UL, FM, etc)						
	Wall/Partition Key Code						
Bearing Walls, Interior ( IBC Table 601)	As Required, Hrs						
	As Designed, Hrs						
	Testing Agency & Design No.(UL, FM, etc)						
	Wall/Partition Key Code						
Nonbearing Walls & Partitions, Exterior (IBC Table 601 & 602)	As Required, Hrs						
	As Designed, Hrs						
	Testing Agency & Design No.(UL, FM, etc)						
	Wall/Partition Key Code						

**FIRE RESISTANCE RATING OF BUILDING ELEMENTS**

<b>DESIGNATED AREAS OF BUILDING</b>	<b>Area 1</b>	<b>Area 2</b>	<b>Area 3</b>	<b>Area 4</b>	<b>Area 5</b>	<b>Area 6</b>
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Nonbearing Walls & Partitions (IBC Table 601 & 602) Exterior Interior	As Required, Hrs					
	As Designed, Hrs					
	Testing Agency & Design No.(UL, FM, etc)					
	Wall/Partition Key Code					
Floor Construction including supporting beams & joists ( IBC Table 601)	As Required, Hrs					
	As Designed, Hrs					
	Testing Agency & Design No.(UL, FM, etc)					
	Wall/Partition Key Code					
Roof Construction including supporting beams & joists (IBC Table 601)	As Required, Hrs					
	As Designed, Hrs					
	Testing Agency & Design No.(UL, FM, etc)					
	Wall/Partition Key Code					
Fire Walls (IBC Section 706)	As Required, Hrs					
	As Designed, Hrs					
	Testing Agency & Design No.(UL, FM, etc)					
	Wall/Partition Key Code					

**FIRE RESISTANCE RATING OF BUILDING ELEMENTS**

DESIGNATED AREAS OF BUILDING	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6
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Fire Barriers (IBC Section 707)	As Required, Hrs						
	As Designed, Hrs						
	Testing Agency & Design No.(UL, FM, etc)						
	Wall/Partition Key Code						
Fire Partitions (IBC Section <del>709</del> 708)	As Required, Hrs						
	As Designed, Hrs						
	Testing Agency & Design No.(UL, FM, etc)						
	Wall/Partition Key Code						
<u>Smoke Barriers</u> (IBC Section 709)	<u>As Required, Hrs</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
	<u>As Designed, Hrs</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
	<u>Testing Agency &amp; Design No.(UL, FM, etc)</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
	<u>Wall/Partition Key Code</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
<u>Smoke Partitions</u> (IBC Section 710)	<u>As Required, Hrs</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
	<u>As Designed, Hrs</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
	<u>Testing Agency &amp; Design No.(UL, FM, etc)</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>
	<u>Wall/Partition Key Code</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>	<u>_____</u>

**FIRE RESISTANCE RATING OF BUILDING ELEMENTS**

DESIGNATED AREAS OF BUILDING	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6
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<u>Horizontal Assemblies</u> (IBC Section 711)	<u>As Required, Hrs</u>	_____	_____	_____	_____	_____	_____
	<u>As Designed, Hrs</u>	_____	_____	_____	_____	_____	_____
	<u>Testing Agency &amp; Design No.(UL, FM, etc)</u>	_____	_____	_____	_____	_____	_____
	<u>Wall/Partition Key Code</u>	_____	_____	_____	_____	_____	_____
Shaft Enclosures (IBC Section 708)	As Required, Hrs						
	As Designed, Hrs						
	Testing Agency & Design No.(UL, FM, etc)						
	Wall/Partition Key Code						
Opening & Protective Listing by Category (fire shutters, doors, etc.) (IBC Section 715)	As Required, Hrs						
	As Designed, Hrs						
	Testing Agency & Design No.(UL, FM, etc)						
	Wall/Partition Key Code						
Others (as required by Designer)	As Required, Hrs						
	As Designed, Hrs						
	Testing Agency & Design No.(UL, FM, etc)						
	Wall/Partition Key Code						



<b>FLOOD HAZARD INFORMATION and FLOOD LOADS</b>	
FLOOD HAZARD AREA	
Base Flood Elevation (NGVD or FIRM)	MSL
Design Flood Elevation IBC 1612.3 and ASCE 24	MSL
NON HIGH-VELOCITY WAVE ACTION	
Elevation of Lowest Proposed Floor (Meet ASCE 24 Section 2.6.2.1)	MSL
Dry floodproofing ASCE 24	<input type="checkbox"/> no <input type="checkbox"/> yes
HIGH-VELOCITY WAVE ACTION	
Elevation of bottom of Lowest Horizontal Structural Member of lowest floor	MSL
Flotation resistant (ASCE 24)	<input type="checkbox"/> no <input type="checkbox"/> yes
Breakaway wall per ASCE 24	<input type="checkbox"/> no <input type="checkbox"/> yes

*Per IBC Chapter 16 and ASCE 7 – Structural tables may be shown on initial Structural Sheet of the drawings or on Sheet with other code information. List floor design loads on structural plans.*

<b>STRUCTURAL DESIGN INFORMATION, AREA</b>							
<b>OCCUPANCY CATEGORY (IBC Table 1604.5)</b>							
LIVE LOAD FOR EACH OCCUPANCY TYPE (IBC Figure 1608.2 or ASCE 7)	Floor Live Load, $F_{ll}$	PSF	PSF	PSF	PSF	PSF	PSF
	Roof Live Load, $R_{ll}$	PSF	PSF	PSF	PSF	PSF	PSF
	Ground Snow Load, $p_g$	PSF	PSF	PSF	PSF	PSF	PSF
MISCELLANEOUS LOADS BY SPECIAL USE AREA (ARCHITECTURAL, MECHANICAL, DATA CENTER, ETC., ASCE 7)		PSF	PSF	PSF	PSF	PSF	PSF

<b>SOILS &amp; SITE</b>	
SOILS INVESTIGATION REQUIRED? (IBC 1803.2)	<input type="checkbox"/> no <input type="checkbox"/> yes
SOILS CLASSIFICATION	
Seismic Site Class (IBC <del>1613.5.2</del> <a href="#">1613.3.2</a> )	
Classes Soil of Materials (UCS System) (IBC 1803.5.1)	
Allowable Footing Bearing Pressure	psf
MINIMUM DESIGN SOIL BEARING LOAD (IBC Table 1806.2)	psf
COMPACTION	
Subgrade (ASTM D698, ASTM D1557) or (AASHTO only for paving & roads)	%
Base (ASTM D698, ASTM D1557) or (AASHTO only for paving & roads)	%
Other (ASTM D698, ASTM D1557) or (AASHTO only for paving & roads)	%
MINIMUM DESIGN SOIL LATERAL LOAD (IBC 1610.1)	psf
FOOTINGS	
Undisturbed footings	<input type="checkbox"/> no <input type="checkbox"/> yes
Compacted Fill Material (IBC 1804.5 <a href="#">6</a> )	<input type="checkbox"/> no <input type="checkbox"/> yes
ELEVATIONS	
Elevation of Water Table	MSL
Elevation of lowest footing	MSL
Elevation of lowest floor or basement	MSL

<b>STRUCTURAL DESIGN INFORMATION, BUILDING</b>		
<b>WIND LOADS</b>	Analysis Procedure (ASCE 7 or IBC 1609.6)	
	Basic Wind Speed, MPS (3 sec gust IBC Fig 1609.3)	$V_{3S} =$
	Exposure Category	
	Wind Importance Factor (ASCE 7 Table 6.1)	$I_w =$
<b>SEISMIC LOADS</b>	Internal Pressure Coefficient (ASCE 7)	$GC_{pi} =$
	External Pressure Coefficient (ASCE 7)	$GC_p =$
	Seismic Importance Factor (ASCE 7)	$I =$
	Soil Class (IBC 1613.5.2 <a href="#">3.2</a> )	
	Mapped Spectral Response Accelerations	$S_s =$
		$S_1 =$
	Design Spectral Response Acceleration Parameters	$S_{DS} =$
		$S_{D1} =$
	Seismic Use Group (ASCE 7 and Seismic Occupancy Category IBC)	
	Seismic Design Category (IBC Tables <del>1613.5.6(1) &amp; 1613.5.6(2)</del> <a href="#">1613.3.5(1)</a> , <a href="#">1613.3.5(2)</a> )	
Basic Seismic Force Resisting System		
Design Base Shear	KIPS	
Seismic Response Coefficient(s) ASCE 7	$C_s =$	
Response Modification Factor(s) ASCE 7	$R =$	
Analysis Procedure		





Provide a table for each structure.

PLUMBING INFORMATION		
WATER SYSTEM		
Service Line Size	Inches	
Distribution Design Criteria (IPC Table 604.3)	Fixture Units	
Maximum Flow Rate (IPC Table 604.4)	GPM	
Backflow	Location	
	Type	
Test Pressure	psi	
SANITARY SEWER SYSTEM		
Service Line Size	Inches	
Drainage Design Criteria (IPC Tables 709.1 and 709.2)	Fixture Units	
Maximum Flow Rate	GPD	
Slope (IPC Table 704.1)	Inches/Ft	
MINIMUM PLUMBING FIXTURES REQUIRED/PROVIDED (IPC Section 403 & Table 403.1)		
For structures with multiple building areas and/or occupancy groups, show calculation for shared fixtures. Expand table as needed.		
Applicable area(s)		
Most restrictive area		
Fixture counts required		

CODE REQUIRED BUILDING FIXTURE COUNTS		
Water Closets	Male-Required	
	Male WC -Provided	
	Male Urinal -Provided	
	Female-Required	
	Female-Provided	
Lavatories	Male-Required	
	Male-Provided	
	Female-Required	
	Female-Provided	
Showers	Male-Required	
	Male-Provided	
	Female-Required	
	Female-Provided	
Drinking Fountains	Required	
	Provided	
<del>Unisex toilet</del> Family or Assisted Use Toilet	Required	
	Provided	
Service Sink	Required	
	Provided	
Others (list)	Required	
	Provided	

<b>FIRE SERVICE INFORMATION</b>		
Service Line Size		Inches
Fire Department Connection	Location	
Backflow	Location	
	Type	
Fire Hydrant Flow Test	Date	
	Flow	GPM
	Residual	PSI
	Static	PSI

*Summary of data from approved ASHRAE 90.1 compliance sheets.*

<b>MECHANICAL INFORMATION</b>		
GENERAL INFORMATION		
Building Location		
Climate Zone		
Outdoor Design Temperature	Summer	deg F DB
		deg F WB
	Winter	deg F DB
		deg F WB
Indoor Design Temperature	Summer	deg F DB
		% RH
	Winter	deg F DB
		% RH
OUTSIDE AIR		
Occupied Minimum Outside Air	cfm per person	
CO2 Demand Management	<input type="checkbox"/> no <input type="checkbox"/> yes	
Supervised Control System	<input type="checkbox"/> no <input type="checkbox"/> yes	
MECHANICAL SYSTEMS, SERVICE SYSTEMS & EQUIPMENT		
Briefly describe mechanical system:		

<b>ELECTRICAL INFORMATION</b>		
SERVICE TRANSFORMER	<input type="checkbox"/> By Utility	
	<input type="checkbox"/> By District	KVA Primary
		Voltage/Phase
<b>ELECTRICAL SERVICE INFORMATION</b>		
Service Voltage/Phase		Amperes
Service Entrance Conductors Size		Qty per Phase
Total Connected Load		KVA
Estimated Maximum Demand		KVA
Available Fault Current in Symmetrical Amperes		
Interrupting Capacity of Service Overcurrent Device		
GROUNDING ELECTRODE SYSTEM COMPONENTS (NEC 250)		
<b>EMERGENCY SERVICE INFORMATION</b>		
Emergency Generator	<input type="checkbox"/> no <input type="checkbox"/> yes	KVA
		Voltage/Phase
	Fuel	
Exit/Emergency Lights Backup Power		<input type="checkbox"/> Integral Battery
		<input type="checkbox"/> Generator
Fire Alarm System	<input type="checkbox"/> Manual <input type="checkbox"/> Automatic	<input type="checkbox"/> Addressable
		<input type="checkbox"/> Class A
		<input type="checkbox"/> Class B
LIGHTNING PROTECTION PROVIDED		<input type="checkbox"/> no <input type="checkbox"/> yes

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<b>ENERGY INFORMATION</b>		
INSULATION		
Roof	Cavity	R
	Continuous	R
Walls	Cavity	R
	Continuous	R
Underslab		R
GLAZING (each type)		
Window to wall ratio	North	%
	East	%
	South	%
	West	%
Glass Type	U Factor	
	SHG	