

Plan Review Permit

City of Rogers
Risk Reduction
113 N 4th St
Rogers, AR 72756
(479)-621-1100



Application Instructions: READ BEFORE COMPLETING APPLICATION

1. One COMPLETE set of construction documents in PDF form (to include specifications) are required for review. *All files must be combined into one PDF file and may be emailed to - planreview@rogersar.gov.*
2. The plan review fee is due at the time of plan submission. **Information in RED is required to figure your permit cost for New Construction/Additions.**

PROJECT INFORMATION

PERMIT NUMBER: _____

Property Address: _____ Suite/Unit Number: _____

Project/Tenant Name: _____

**** You will be required to obtain and submit an address verification letter from Benton County 911 Addressing on all new construction prior to submitting your permit - this will include suite numbers as well. They can be reached by calling 479-271-1085****

BUILDING INFORMATION

Class of Work: New Construction Addition Remodel/Tenant In-fill Accessory Structure

*Occupancy Type: _____ *Total Floor Area: _____ Building Height: _____ Number of Stories: _____

*Construction Type: IA IB IIA IIB IIIA IIIB IV VA VB

If mixed use, will use be: Separated Non-Separated

Additional occupancy type if mixed use: _____

Additional SQFT of each occupancy type: _____

Sprinklers: Yes No

Sprinkler Type: NFPA 13 NFPA 13D NFPA 13R

Valuation of Work: \$ _____ (Figured from ICC Valuation Table)

OWNER INFORMATION

Owner Name: _____ Phone Number: _____

Address: _____ City/State: _____

ARCHITECT INFORMATION

Architect: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Phone Number: _____

Signature of Applicant: _____ Date: _____

OFFICE USE ONLY: Cash Credit Card Check Check # _____ Total Due: \$ _____

COMMERCIAL BUILDING PERMIT

PLAN REVIEW CHECKLIST

THIS MUST BE CHECKED OFF & TURNED IN WITH SUBMITTAL

PROJECT ADDRESS: _____

ONE PAPER AND ONE ELECTRONIC SET OF PLANS TO INCLUDE:

Y N NA

- | | | | |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Original seals and signatures (AR Registered Design Professional) on all sheets |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Zoning approvals, variances and determination letters |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Planning approval - signed LSD letter or waiver |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plumbing approval letter from State Health Dept |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Index Sheet/Cover Page on each set of plans - this is to include the CORRECT address and suite number that pertains to the job. Addresses need to be obtained from Benton County 911 Addressing (479)271-1085. |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Code Analysis (change of use should indicate previous use and new use) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Site Plans (site plans are not required for interior work except first floor tenant or rooftop equipment) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Soils Report and Foundation Plans (required for new buildings or additions to existing buildings) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Mechanical Plans (equipment schedule, mechanical symbols, hood details with exhaust locations) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Electrical Plans (riser diagrams, electrical symbols, equipment schedules) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Plumbing Plans (fixture schedule, riser diagram, details for special devices) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Architectural Plans (dimensioned for each floor level, layouts, fire rated assemblies must have a UL design) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Structural Plans (floor and roof framing plans) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Energy Plans (energy calculations, specifications and details) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Accessibility Plans (ingress, egress, areas of refuge facilities and elevations, hardware, ramps, etc) |

I am indicating that all of the above items have been included in the submission of the plans for this project. Additionally, I acknowledge that should any of the required items be missing or be deficient, the plans may, at the sole discretion of the reviewer, be returned to me for resubmission.