

State law (A.R.S. § 0-835(D)) requires an Administrative Review of permit applications. A letter of Administrative Completeness of a Notice of Deficiency must be issued to the applicant during the Administrative Review Time Frame. This document serves as that notice. This checklist has been provided to assist the applicant in preparing a complete application. Only complete applications can be accepted for plan review.

| Project Name: | | | Project Number(s): | | |
|--------------------|----------|---|--|--|--|
| Project Address: | | | | | |
| Applicant Name: | | | Applicant Title: | | |
| Applicant Phone: | | | Phone Extension: | | |
| GENERAL GUIDELINES | | | | | |
| Prov | N/A □ | Two (2) complete sets of plans | | | |
| | | | tate Board of Technical Registration must be sealed by a ary" or unsealed sheet can be accepted in the Constructions | | |
| | | All submittals, including those subsequent to fir required) | st review must include all Building Safety sheets/plans (if | | |
| | | Verify the following is listed on the cover sh Basic building code data: current building code | | | |
| | | Occupancy type | | | |
| | | Construction type | | | |
| | | Energy code needs to be listed | | | |
| | | Fire sprinklers information | | | |
| | | Fire alarm information | | | |
| ARCHITECTURAL | | | | | |

Prov N/A

Confirm the architectural sheets which are listed on the cover sheet are included

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For more information or for a copy of this publication in an alternate format, contact Planning & Development at (602) 262-7811 voice or TTY use 7-1-1.

STRUCTURAL

| Prov | N/A □ | Confirm the structural sheets which are listed on the cover sheet are included | | |
|---------|---------------------------------------|---|--|--|
| | | If structural sheets are present, then calcs are required | | |
| | | If structural sheets are present, check to see if a Project Specification book needs to be submitted and confirm, if not otherwise shown on the plans This book would be needed for items such as ICC or other listings for EIFS, Skylights, 1 coat stucco, etc. | | |
| MECH | ANICA | L / PLUMBING | | |
| Prov | N/A | Confirm the mechanical and / or plumbing I sheets which are listed on the cover sheet are included | | |
| ELECT | RICAL | | | |
| Prov | N/A | Confirm the electrical sheets which are listed on the cover sheet are included | | |
| Per the | e requi | rements of state law, this permit application is: | | |
| | Accepted as administratively complete | | | |
| | Defic | cient. Items marked above are required for plan acceptance | | |
| Contac | t staff b | elow for questions regarding the Administrative Review screening: | | |
| Staff I | Name: | Date: | | |
| Staff S | Signatu | re: Staff Phone: | | |
| | | | | |

This Administrative Review is valid for 180 days from the date of acceptance. For additional information, please visit our website at www.phoenix.gov/pdd .