



E-SUBMITTAL CHECKLIST AND QUESTIONNAIRE

Please save and upload **PDFs** of all required DOCUMENTS and PLANS from the checklist below. All pre-application attachments uploaded to the Online Plan Submission Portal must comply with the E-Plan Submittal Requirements.

- STEP 1:** Select project group: **BUILDING AND GRADING**
- STEP 2:** Select project type: **TENANT IMPROVEMENT FOR WIRELESS FACILITY**
- STEP 3:** Complete the required documents and questionnaire (if applicable) below.
- STEP 4:** Log in to the [Online Plan Submission Portal](#) and enter your project information to begin the pre-application process.
- STEP 5:** Upload your completed PDF documents.

ADDITIONAL INFORMATION

- All submissions must comply with the City of Irvine [E-Plan Submittal Requirements](#).
- All commercial projects and most residential projects, with the exception to residential remodels/additions that do not add conditioned space, are required to submit an online [Construction and Demolition Waste Management Plan](#). This must be completed and approved before a permit can be issued.
- Once your pre-application has been processed, you will receive a request for payment of your plan review fees. Please note, your submittal will not be distributed to applicable City departments, nor will your plan review period begin, until payment has been received.
- If you are only looking to receive Advanced Plan Check Fees and do not have plan sheets to upload for review yet, upload this completed E-Submittal Checklist and Questionnaire in PDF as a plan document to the Online Plan Submission Portal. Staff will send you the plan check fees, assuming the plans will be submitted at a later date.

DOCUMENTS

- [Electronic/Digital Signature Disclosure](#)
- [Building Permit Application](#)
- [EFP Checklist Questionnaire](#)
- [Commercial Take-Off Sheet](#) (If applicable)
- [Recycling and Diversion of Construction and Demolition Waste Assessment 2.0](#)
- [OCFA Plan Submittal Criteria](#) (NOTE: Upon review, City staff will email an OCFA SR Form if required)
- [Developer Deposit Case Set Up](#) (If applicable)
- [Tenant Improvement Title Sheet](#) (Plans must be formatted utilizing the standard title sheet)

QUESTIONNAIRE

- Does this submittal include any parking lot modifications? YES NO (If YES, complete 1a and 1b)
 - How many parking spaces are affected? _____
 - Will there be any asphalt removal? YES NO If YES, how many sq. ft.? _____
- Does this scope of work include any roof-top mechanical? YES NO (If YES, complete 2a and 2b)
 - Will there be any new pads/curbs installed for the roof-top equipment? YES NO
 - Will the existing pads/curbs be modified or enhanced? YES NO



COMMUNITY DEVELOPMENT
Building and Safety

BUILDING PERMIT APPLICATION

FOR OFFICE USE ONLY	
PLAN CHECK #:	_____
SUBMITTAL DATE:	_____
TARGET DATE:	_____
EXP DATE:	_____

PROJECT ADDRESS		SUITE	GRID NUMBER
TRACT	LOT	UNITS	
RESIDENTIAL TRACTS: PRODUCT NAME		PHASE	VILLAGE
PERMIT TYPES APPLIED FOR			
<input type="checkbox"/> RESIDENTIAL BUILDING <input type="checkbox"/> COMMERCIAL BUILDING <input type="checkbox"/> STRUCTURAL <input type="checkbox"/> NON-STRUCTURAL <input type="checkbox"/> PLUMBING <input type="checkbox"/> ELECTRICAL <input type="checkbox"/> MECHANICAL			

APPLICANT INFORMATION			PROJECT INFORMATION		
APPLICANT/COMPANY NAME			DESCRIPTION OF WORK		
ADDRESS	CITY	ZIP			
CONTACT	PHONE				
EMAIL			RELATED GRADING CASE/OTHER RELATED CASES		
OWNER OF THE PROPERTY			DOES THE SCOPE INCLUDE AN ACCESSORY DWELLING UNIT? <input type="checkbox"/> YES <input type="checkbox"/> NO		
ADDRESS			DOES THE PROPOSED USE INCLUDE MEDICAL OR CHIROPRACTIC OFFICES; OR RETAIL OR WAREHOUSE? <input type="checkbox"/> YES <input type="checkbox"/> NO		
ADDRESS	CITY	ZIP	OCCUPANCY GROUP(S)	CONSTRUCTION TYPE	
CONTACT			OCCUPANCY CURRENT	PROPOSED	
PHONE	EXT	FAX	CURRENT USE	PROPOSED USE	
TENANT NAME	VALUATION	NO. OF STORIES	SPRINKLERS	A/C	
			<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	

FOR OFFICE USE ONLY: PLAN CHECK FEE SUMMARY

BUILDING: _____ ELECTRICAL: _____
 ENERGY: _____ MECHANICAL: _____
 ZONING: _____ PLUMBING: _____
 WMPB: _____ AUTOMATION: _____

TOTAL PLAN CHECK FEES: \$ _____

RECEIPT #: _____ **CUSTOMER #:** _____
 IFAS#: _____ EST INITIALS: _____
 TMPL#: _____ SUB INITIALS: _____
 TMPL#: _____ TMPL#: _____
 TMPL#: _____ WMPB#: _____

BY SIGNING BELOW, I CERTIFY THE ABOVE INFORMATION TO BE TRUE AND CORRECT.

EXISTING BUILDINGS

CHECK ALL THAT APPLY TO YOUR SCOPE OF WORK

INT. ALT. _____ sq.ft. DEMOLITION _____ sq.ft.
 EXT. ALT. _____ sq.ft. REPAIR _____ sq.ft.
 ADDITION _____ sq.ft. PARKING LOT _____ sq.ft.
 NO. OF SPACES _____

NEW BUILDINGS ONLY

COMMERCIAL: Complete data sheet for multiple buildings.

TOTAL NUMBER OF BUILDINGS: _____
 TOTAL SQ. FT. OF ALL BUILDINGS: _____

RESIDENTIAL: Complete data sheet for multiple floor plans.

CHECK ONE: MODELS PRODUCTION
 CHECK ONE: SFD DET CONDO
 CHECK ONE: ATT CONDO APT

TOTAL NUMBER OF DWELLING UNITS: _____
 TOTAL SQ. FT. OF DWELLING UNITS: _____

APPLICANT SIGNATURE _____ PRINT APPLICANT NAME _____ DATE _____



ELIGIBLE FACILITIES PERMIT CHECKLIST

FOR OFFICE USE ONLY	
EFP CASE #:	_____
PERMIT #:	_____

An Eligible Facilities Permit (EFP) shall be reviewed and approved consistent with the procedures and standards set forth in Chapter 2-37.6 and Chapter 3-8-5 of the Zoning Ordinance (ZO). Pursuant to Section 2-37.6-6 of the ZO, an EFP request must be submitted in conjunction with a Building Permit Application. ***The following items must be provided at the time of submittal: (1) completed Building Permit Application with \$1500.00 deposit for Planning Division review; (2) completed EFP Checklist including all documentation required by the checklist; and (3) completed EFP Questionnaire.*** Failure to provide any of the above-mentioned items will cause an application to be denied for processing. Please be aware that additional fees may apply for Building Division review and will be established at the time of submittal. Please complete Sections 1-3 below and move to the Checklist items beginning on page 2.

SECTION 1 - APPLICANT DATA			
APPLICANT NAME		FIRM NAME	
ADDRESS		PHONE	FAX
CITY	ZIP	EMAIL	
<p>I hereby certify that the information contained herein and in the accompanying exhibits is true and correct to the best of my knowledge and belief. Per State Government Code Section 65483, I acknowledge that I am applying for a development permit.</p>			
APPLICANT SIGNATURE		DATE	

SECTION 2 - PROPERTY OWNER AUTHORIZATION			
PROPERTY OWNER OF RECORD (Print)			
ADDRESS			
CITY	ZIP	PHONE	
<p>I am the owner of record, or his/her authorized representative, of the property which is the subject of this application. I approve of the action requested.</p>			
PROPERTY OWNER SIGNATURE		DATE	

SECTION 3 - PROJECT LOCATION/LEGAL DATA	
SITE ADDRESS	PLANNING AREA
LEGAL DESCRIPTION (Tract, Lot, Parcel)	ASSESSOR'S PARCEL NUMBER
PREVIOUSLY APPROVED DEVELOPMENT CASES FOR THIS SITE	
RELATED DEVELOPMENT CASE SUBMITTALS AT THIS TIME? IF YES, PLEASE LIST OTHER CASE TYPES:	
<input type="checkbox"/> YES <input type="checkbox"/> NO	

STAFF APPROVAL _____

DATE _____

NOTE: Staff signature will be provided at the time an EFP Checklist has been determined complete and approval of the EFP request has been granted.

EFP CHECKLIST

The following is a list of materials which must be submitted in order to have a complete application. For some applications, it may not be necessary to submit all of the listed materials. Consult with the Development Assistance Center if you have questions. Please do not submit your application until all materials which apply to your proposal have been gathered. Your application will be reviewed for completeness by utilizing the items within this checklist.

PRE-SUBMITTAL MEETING (NOT REQUIRED, BUT RECOMMENDED)

- A meeting with a staff planner to discuss the project and required submittal materials.

SUBMITTAL REQUIREMENTS

- A complete Development Case Application signed by the property owner or authorized representative (see page 1 of the checklist form).
- A completed Substantial Change Criteria Questionnaire form.
- A project description letter including the following information:
- An accurate chronological history of the project to include approval dates, City case numbers, and project description relating to any underlying project approvals or subsequent modifications.
 - An accurate project description detailing the proposed change in dimension, service, or attachments.
 - A narrative description and accompanying evidence to show how the project will satisfy the findings in Section 2-37.6-7 for an EFP.

PROCESSING FEES

- A deposit or fee as set forth by ordinance or resolution of the City Council.

PROJECT PLANS

- PDF-formatted construction quality plans of the proposed project wet stamped by a professional engineer, showing the entire proposed structure in plan and elevation views, all proposed changes in plan and elevation views, and all utility runs and points of contact. The plans must be drawn at 1" = 20' or a comparable scale, and shall include the following information:**
- Location, dimensions, and height of the existing wireless facility.
- Location, type, dimensions, height, number, color, and technical specifications of proposed antennas and existing antennas.
- Location, type, dimensions, gross floor area, height, materials, and color of proposed equipment structure. Location of exhaust ports or outlets.

** For facilities to be located on an existing structure, some items below may be waived during the discretionary pre-submittal meeting.

PROJECT PLANS (continued)

- Location of existing and proposed power, telephone, and other utilities serving the site.
- Specific landscape, screening, and fencing materials. Landscape plans shall include size, species, location, distance apart, plus irrigation and maintenance plans.
- Proposed setbacks from property lines, nearest residential unit, and residentially zoned properties.
- Location of adjacent roadways and proposed means of access.
- Location and extent of any streams, wetlands, or landslide hazard areas on or within 100 feet of the underlying property.
- Lot size and lot coverage calculations for the underlying property.

SUPPORTING DOCUMENTS

- Prior Approvals.* PDFs of the approved plans, both building permit and discretionary, photo simulations, staff report/resolution, and/or approval letters from the original discretionary approval along with the most recent discretionary approval affecting the project.
- Photo simulations showing the existing condition and proposed changes. Photos of the existing facility at the time of application, if the modification includes the addition of antennas. Identify all carriers using the facility.
- An assessment of noise that shows compliance with City noise standards if new equipment cabinets, generators, or any other ground equipment components are being proposed.
- Noticing materials subject to Section 2-23-1 of the ZO. Noticing shall be required only in the event an applicant appeals a decision made by the Community Development Department to deny an EFP. In such case, the EFP shall go before the Planning Commission for review and action.

OBJECTIVE STANDARDS

- Add the following notes to the cover sheet of the plan set:
 - Each such repaired, replaced, or modified facility shall demonstrate compliance with the City's applicable building, structural, electrical, and safety codes.
 - Each such repaired, replaced, or modified facility shall demonstrate compliance with the City's Noise Ordinance pursuant to Section 3-8-2.
 - Each such repaired, replaced, or modified facility shall comply with the Federal Communication Commission regulations regarding radio frequency emissions, as they may be amended from time to time.
 - Each such repaired, replaced, or modified facility shall not prevent the City of the Irvine from having adequate spectrum capacity on the 800 MHz radio frequencies used by the City. If notified by the City's Police Department that operation of such repaired, replaced, or modified facility is impeding the City's use of the 800 MHz radio frequencies used by the City, the applicant shall modify the operation of such repaired, replaced, or modified facility to eliminate any material interference.

OBJECTIVE STANDARDS (continued)

- The applicant shall pay all charges related to the processing of the EFP within 30 days of the issuance of the final invoice for this project. Failure to pay all charges shall result in delays in the issuance of required permits or may result in the revocation of the approval of this application.
 - Any EFP may be reconsidered by the original approval authority at the end of a specified time period (to be no less than ten (10) years) from the date of the original permit approval. Items to be reviewed may include, but are not limited to, conformance with all conditions of approval, availability of new technologies, conformance with the concealment elements imposed on the repaired, replaced, or modified facility, operation of the repaired, replaced, or modified facility in its intended manner, conformance with all applicable radio frequency standards and regulations (as they may be amended from time to time), and compliance with the City's Noise Ordinance.
- Each such repaired, replaced, or modified facility shall comply with the conditions of approval applicable to the facility as it existed immediately prior to the proposed repair, replacement, or modification.
- Each such repaired, replaced, or modified facility shall demonstrate compliance with all applicable development standards specified in the zoning district (Chapter 3-37) in which the project is located.

OBJECTIVE CONCEALMENT STANDARDS

- The request demonstrates compliance with all applicable Objective Concealment Standards as specified in Chapter 3-8-5.3 of the ZO. EFP requests processed pursuant to Chapter 2-37.6 of the ZO shall not result in a reclassification of an existing facility to a higher antenna class level (i.e., Class 3 to a Class 6 or Class 6 to a Class 11).
- Notes have been placed on the cover sheet of the EFP plan set listing all concealment elements from Chapter 3-8-5.3 of the ZO that apply to the facility based on its antenna classification.



ELIGIBLE FACILITY PERMIT (EFP) QUESTIONNAIRE SUBSTANTIAL CHANGE CRITERIA

Modifications that do not substantially change the physical dimensions of an existing tower or base station (structure, other than a tower, with wireless facilities in existence at the time of application) will be processed via an application for an Eligible Facilities Permit as laid out in Section 2-37.6 of the City's Zoning Code. In order to determine that the proposed modification does not constitute a substantial change, the project must meet the following criteria:

The existing facility is a (choose one):

- Tower within the public right-of-way (including utility or light pole)
- Tower outside the public right-of-way
- Building-mounted facility
- Other: _____

CRITERIA # 1

- For towers outside of the public right-of-way, the modification does not increase the height of the tower by more than 10%, or by the height of one additional antenna array with separation from the nearest existing antenna not to exceed twenty feet, whichever is greater, OR
- For those towers in the right-of-way and for all base stations, the modification does not increase the height of the tower or base station by more than 10% or 10 feet, whichever is greater.

EXISTING HEIGHT OF FACILITY	
PROPOSED HEIGHT OF FACILITY	

FOR STAFF USE ONLY: Substantial change? YES NO

CRITERIA # 2

- For towers outside of the public right-of-way, the modification does not protrude from the edge of the tower more than 20 feet, or more than the width of the tower structure at the level of the appurtenance, whichever is greater;
- For those towers in the right-of-way and for all base stations, the modification does not protrude from the edge of the structure more than six feet.

IF TOWER, EXISTING WIDTH OF TOWER AT LEVEL OF ANTENNA MOUNT	
GREATEST DISTANCE (IN FEET) BETWEEN EXISTING STRUCTURE (TOWER, UTILITY POLE, BUILDING, ETC.) AND PROPOSED ANTENNAS	

FOR STAFF USE ONLY: Substantial change? YES NO

EFP QUESTIONNAIRE SUBSTANTIAL CHANGE CRITERIA

CRITERIA #3

If the installation includes new equipment cabinets, the modification does not include the installation of more than four equipment cabinets.

NUMBER OF EQUIPMENT CABINETS	
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FOR STAFF USE ONLY: Substantial change? YES NO

CRITERIA #4

For all existing facilities, the modification does not include excavation or equipment installation outside of the current site of the tower or base station.

WILL THERE BE ANY EXCAVATION OR EQUIPMENT INSTALLATION OUTSIDE THE CURRENT SITE?	
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FOR STAFF USE ONLY: Substantial change? YES NO

CRITERIA #5

For all existing facilities, the modification does not defeat the existing concealment elements of the tower or base station as laid out in Sections 3-8-5.2 and 3-8-5.3 of the City's Zoning Code.

PLEASE DESCRIBE ANY EXISTING AND PROPOSED CONCEALMENT ELEMENTS:	
-----------------------------------------------------------------	--

FOR STAFF USE ONLY: Substantial change? YES NO

CRITERIA #6

For all existing facilities, the modification does not violate any of the conditions of approval (besides modification allowed under criteria #1-4) associated with prior approval(s).

PLEASE DESCRIBE HOW THE MODIFICATION WILL NOT VIOLATE ANY CONDITIONS OF APPROVAL ASSOCIATED WITH THE PRIOR APPROVAL:	
----------------------------------------------------------------------------------------------------------------------	--

FOR STAFF USE ONLY: Substantial change? YES NO



COMMERCIAL TAKE-OFF SHEET

FOR OFFICE USE ONLY	
SUBMITTAL DATE:	_____
DATE: CHECK#:	_____
TEMPLATE#:	_____

PROJECT ADDRESS	SUITE NUMBER

ELECTRICAL ITEMS

CODE	TYPE OF FIXTURE OR ITEM	QUANTITY
E4	Lighting Fixtures	
E4	New Branch Circuit	
E4.2	Pole Mounted Fixture With Footing	
E5.7	Motor, Transformer, Heating/Cooling Appliances and Miscellaneous Equipment (KW, HP or KVA):	0-1
E5.7		2-10
E5.7		11-50
E5.7		51-100
E5.7		101-500
E5.7		Over 500
E6.5	Service/Meter:	0-400 Amps
E6.5		401-1200 Amps
E6.5		Over 1200 Amps
E6.5		Substation Over 600 Volts

CODE	TYPE OF FIXTURE OR ITEM	QUANTITY
E7	Outlets and Switches	
E7.1	Multi-Outlet Assembly	
E8	New Illuminated Signs	
E9.3	Temporary Power Poles	
E9.4	Distribution Poles	
E8.2	Time Clock	
E15	Busway/Cable Tray (Amp/Feet)	
E20	Switchboard/Panelboard: 0-400 Amps	
E20		401-1200 Amps
E20		Over 1200 Amps
E19		Switchboard Over 600 Volts
E33	Solar System (KW)	



COMMERCIAL TAKE-OFF SHEET

FOR OFFICE USE ONLY	
SUBMITTAL DATE:	_____
DATE: CHECK#:	_____
TEMPLATE#:	_____

PROJECT ADDRESS	SUITE NUMBER

PLUMBING ITEMS

CODE	TYPE OF FIXTURE OR ITEM	QUANTITY	CODE	TYPE OF FIXTURE OR ITEM	QUANTITY
P2	Plumbing Fixtures: Water Closet		P15	Storm Drainage: Rainwater Drain	
P2	Urinal		P15	Subsurface Drainage System	
P2	Shower, Per Head		P15	Sump Pump	
P2	Bathtub or Combo Bathtub/Shower		P16	Interceptor/Clarifier/Separator	
P2	Kitchen Sink		P17	Repair/Alter to Water Piping	
P2	Lavatory or Other Sink		P18	Repair/Alter to Sewer or Waste/Vent Piping	
P2	Drinking Fountain		P20	Lawn Sprinkler System Connection	
P2	Hose Bibb		P21	Water System: Booster Pump	
P2	Floor Drain		P21	Backflow Device	
P2	Floor Sink		P21	Pressure Regulating Valve	
P2	Trap Primer		P21	Other Water Using Device	
P2	Other: (Specify)		P21	Sewer and Waste: Building Drain	
P3	Dishwasher		P21	Sewage Ejector	
P3	Clothes Washer		P21	Backwater Valve	
P4	Garbage Disposal		P21	Manhole	
P5	Building Sewer Connection		P6	Cesspool/Holding Tank	
P12	Water Heater and/or Vent		P7	Private Sewage Disposal System	
P12	Thermal Expansion Tank		P26	Yard Potable Water Dist. (Linear Feet)	
P33	Solar Water Heating		P26	Yard Recycled Water Dist. (Linear Feet)	
P13	Fuel Gas: Gas Outlets		P27	Yard Gas Dist. (Linear Feet)	
P31	Gas Pressure Regulator		P28	Yard Sewer (Linear Feet)	



COMMERCIAL TAKE-OFF SHEET

FOR OFFICE USE ONLY	
SUBMITTAL DATE:	_____
DATE: CHECK#:	_____
TEMPLATE#:	_____

PROJECT ADDRESS	SUITE NUMBER

MECHANICAL ITEMS

CODE	TYPE OF FIXTURE OR ITEM	QUANTITY	CODE	TYPE OF FIXTURE OR ITEM	QUANTITY
M2a	Furnaces: Up to 100,000 BTU/h		M8	Each Register/Outlet/Grill	
M2a	Over 100,000-500,000 BTU/h		M8	Repair/Alter Ducts	
M2a	Over 500,000-1,000,000 BTU/h		M10	Install/Relocate Cooling Coil	
M2a	Over 1,000,000-2,000,000 BTU/h		M11	Install/Relocate Reheat Coil	
M2a	Over 2,000,000 BTU/h		M12	Install/Relocate Electric Strip Heater	
M3	Evaporative Cooler		M14	Incidental Gas Piping	
M4	Environmental Vent System: Bathroom		M15	Install/Relocate Suspended Wall/Unit Heater	
M4	Clothes Dryer		M16	Heating Appliance: Fireplace	
M4	Kitchen, Residential		M16	Appliance Vent or Chimney, Listed	
M4	Other: (Specify)		M16	Metal Chimney, Unlisted	
M5	Product Conveying Vent System: Garage		M17	AC/Refrigerator Compressor hp	
M5	Refrigeration Machinery Room		M18a	Air Handling Unit: Up to 2,000 CFM	
M5	Class H Occupancy		M18a	Over 2,000-10,000 CFM	
M5	Fume Hood		M18a	Over 10,000 CFM	
M5	Smoke Control System		M20	Fire Protection Devices: Fire Damper	
M5	Stair Pressurization System		M20	Smoke Damper	
M5	Other: (Specify)		M20	Combo Smoke/Fire Damper	
M6	Commercial Kitchen: Type 1 Hood		M20	Ceiling Radiation Damper	
M6	Type 1 Grease Exhaust Duct		M20	Corridor Damper	
M6	Type 1 Grease Exhaust Fan		M20	Smoke Detector, Duct-Type	
M6	Type 2 Hood		M20	Smoke Detector, Area-Type	
M6	Type 2 Exhaust Duct				
M6	Type 2 Exhaust Fan				



RECYCLING AND DIVERSION OF CONSTRUCTION AND DEMOLITION WASTE ASSESSMENT 2.0

The City of Irvine Municipal Code (Section 6-7-900) and the California Green Building Standards Code (Sections 4.408, 5.408, and 5.713.8) require that most projects recycle and/or divert construction and demolition waste. The purpose for this is to promote the reuse of resources and to help extend the longevity of the local landfills pursuant to the California State law AB 939 (Sher), SB1374 (Kuehl) et al. Complete the questions below to determine if your project is subject to recycle/diversion requirements.

For projects required to comply with these provisions, percentages of materials subject to recycling have increased under the 2016 California Green Building Standards Code and the City of Irvine Municipal Code. The new percentages are as follows:

Residential Projects -

- 75 percent of non-hazardous concrete and asphalt construction and demolition debris.
- 65 percent of all other construction, demolition, excavated soil and land clearing debris.

Non-residential Projects -

- 100 percent of all non-hazardous excavated soil and land clearing debris.
- 75 percent of all non-hazardous concrete and asphalt construction and demolition debris.
- 65 percent of all other non-hazardous construction, demolition debris.

CHECK THE BOXES BELOW AS APPLICABLE - DOES YOUR PROJECT INCLUDE:

YES	NO	
<input type="checkbox"/>	<input type="checkbox"/>	A new single family or multi-family residential main building or accessory building?
<input type="checkbox"/>	<input type="checkbox"/>	The remodel or renovation of an existing single or multi-family residential building that adds conditioned area or volume?
<input type="checkbox"/>	<input type="checkbox"/>	A non-residential project subject to a building permit?

If you answered YES to any question, your project is subject to the recycling/diversion requirement which includes the approval of a waste management plan and posting of a bond at permit issuance. Bond must be paid by check or surety bond. You may initiate this process at any time by contacting the City's Environmental Programs at 949-724-7669 or visit cityofirvine.org/c&d. [Note: projects with demonstrably small volumes of anticipated debris may be exempted.]

PROJECT ADDRESS

NAME OF INDIVIDUAL COMPLETING ASSESSMENT

COMPANY

SIGNATURE

DATE

IMPORTANT NOTES: (1) The assessment will be verified during plan review. Mistakes in this initial assessment may result in project delays; (2) Some project proponents choose to award the construction contract prior to posting a bond and/or getting the waste management plan approved. While this is completely acceptable, the processing time does become a critical path item. It is therefore important that this step be appropriately included in the overall project schedule.



ORANGE COUNTY FIRE AUTHORITY

COM

Plan Submittal Criteria COMMERCIAL projects, MULTIFAMILY RESIDENTIAL projects and RESIDENTIAL TRACT developments

INSTRUCTIONS:

- Fill in the project/business address and provide a brief description of the scope of work and type of business operation that will take place.
- Answer questions 1 through 10, read and initial items 11 and 12, then complete and sign the certification section.
- If you answer: - "YES" to *any part* of questions 1 through 10, submit the type of plan indicated in italics to OCFA.
- In some cases, other plan types not indicated herein may also be necessary depending on specific conditions or operations.
- Visit www.ocfa.org for submittal information and locations. If you need assistance in filling out this form or have questions regarding requirements for review, please contact OCFA at 714-573-6108 or visit us at 1 Fire Authority Road, Irvine, CA 92602.

Address	Suite	City	Irvine
Project Scope/Business Description			

- YES NO
- Construction of a new building, a new story, or increase the footprint of an existing building? Changes to roadways, curbs, or drive aisles? Addition, relocation, or modification of fire hydrants or fences/gates? Construction within 300 feet of an active or proposed oil well? *Fire Master Plan (PR145)*
 - Property is adjacent to a wildland area or non-irrigated native vegetation? *Fire Master Plan (PR145); a Fuel Modification Plan may also be required. (PR120, PR124)*
 - Located in or < 100' from a Division of Oil, Gas, and Geothermal Resources (DOGGR) field boundary, < 300' from an oil/gas seep, or < 1000' from a landfill? *Methane Work Plan. (PR170)*
 - Installation/modification/repair of underground piping, backflow preventers, or fire department connections serving private fire hydrant/sprinkler/standpipe systems? *Underground Plan. (PR470, PR475)*
 - Drinking/dining/recreation/meetings/training/religious functions or other gatherings in a room > 750 sq.ft. (> 1,000 sq.ft. for training/adult education) or > 49 people? Healthcare/outpatient services for > 5 people who may be unable to immediately evacuate without assistance? Education for children (*academic tutoring for ages 5+ is exempt unless classified as an E occupancy by the Building Official*)? Adult/child daycare? 24-hour care/supervision? Incarceration or restraint? Hotel/apartment or residential facility with 3+ units and 3+ stories (*3-story townhouses/rowhouses where an independent direct exit to grade is provided for dwelling are exempt*)? Congregate housing/dormitories with 17+ people? High-rise structure (55+ feet to highest occupied floor level)? *Architectural Plan (PR200-PR285)*
 - Installation/modification of locks delaying or preventing occupants from leaving a space or requiring use of a card, button, or similar action to open a door in the direction of exit travel? *Architectural, Sprinkler, and/or Alarm Plan depending on the occupancy and type of device installed (PR200-PR280, PR420-PR425, PR500-PR520)*
 - Installation/modification/use of spray booths; dust collection; dry cleaning; industrial ovens/drying equipment; industrial/commercial refrigeration systems; compressed gasses; tanks for cryogenic or flammable/combustible liquids; vapor recovery; smoke control; battery back-up/charging systems (> 50 gal. electrolyte, > 1,000 lb. lithium ion); welding/brazing/soldering, open flame torches, cutting/grinding; or other similar operations? *Special Equipment Plan (PR315, PR340-PR382)*
 - Storage/use/research with flammable/combustible liquids or other chemicals? Motor vehicle/aircraft maintenance/repair? Cabinetry/woodworking/finishing facility? *Chem Class & floor plan (full architectural plan if H occupancy); Special Equipment Plans may be necessary. (PR315-PR360, PR232-PR240)*
 - Storage or merchandizing areas in excess of 500 sq. ft. where items are located higher than 12' (6' for high-hazard commodities, plastic, rubber, foam, etc.)? *High-piled Storage Plan (PR330)*
 - Cooking under a Type I commercial hood; installation or modification of a fire extinguishing system located in a commercial cooking hood? *Hood & Duct Extinguishing System, not just the hood mechanical plan. (PR335)*

Initial each of the following two items indicating that you have read and understand the statement:

- Initials *Sprinklers/Alarms: Consult Building/Fire Codes and ordinances to determine sprinkler/alarm requirements; if a system is required, plans shall be submitted for OCFA review. Existing buildings undergoing remodel must be evaluated by a licensed contractor to determine if modification is needed; if so, contractor shall submit plans prior to making modifications.
- Initials Fire Hazard Severity Zone: Consult maps available at building department or on OCFA website to determine if your site is located in a FHSZ. Buildings in a FHSZ may be subject to special construction requirements detailed in CBC Chapter 7A or CRC R327—the building department will determine specific requirements.

I certify under penalty of perjury under the laws of the State of California that the above is true:

Print Name	Signature
Phone Number	Date

Building Department: If you have verified that all of the questions have been answered accurately as "NO", and the project does not otherwise require OCFA review of sprinkler or alarm plans*, then you may accept this signed form as a written release that OCFA review is not required. Should you still require that the applicant have plans approved by OCFA, please initial here _____ or attach an OCFA referral form and have the applicant submit the form along with the appropriate plans and fees for OCFA review.



COMMUNITY DEVELOPMENT / PUBLIC WORKS

ELECTRONIC/DIGITAL SIGNATURE DISCLOSURE

I understand and agree that (i) electronically signing and submitting any document(s) to the City of Irvine legally binds me in the same manner as if I had signed in a non-electronic or non-digital form, and (ii) the electronically stored copy of my signature, any written instruction or authorization and any other document provided to me by the City of Irvine, is considered to be the true, accurate, and legally enforceable record in any proceeding to the same extent as if such documents were originally generated and maintained in printed form. I agree not to contest the admissibility or enforceability of the City of Irvine's electronically stored copy of any other documents.

By using the system to electronically sign and submit any document, I agree to the terms and conditions of this Electronic/ Digital Signature Disclosure.

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DATE