

DC Department of Buildings
PLAN SUBMISSION CHECKLIST

This form must be fully completed and submitted with all ProjectDox applications. To help to ensure quick and efficient processing, DOB strongly recommends that this checklist be completed by someone familiar with the design details for the project (e.g. project architect or engineer).

Name of Registered Design Professional Completing this Checklist:
Online Intake Tracking Number:

You must indicate the following information when completing this form:

- Page number of the plan on which the item is shown. If the item is shown on multiple pages, please list all applicable pages; or if the item is shown on an attachment, rather than the plan:
 - For paper submissions indicate the title of the document and the page number in each area
 - For electronic submissions, include the file name (e.g. See attached file "Tub Manufacturer Info on Structural Loading.pdf") and the page number
- If an entire section (e.g. "Foundation") is not applicable to the project, you must mark ALL of the Not Applicable (NA) boxes for that section.

GENERAL REQUIREMENTS	APPLICANT USE		DOB USE ONLY	
	YES	NO	YES	NO
No Pencil Drawings, No White Out or Tape, No Red Ink	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dimensions Given in Feet/Inches and Scale is at Least 1/8 Inch = 1 Foot	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sheet Size is at Least 21 x 30 Inches (Commercial) or 11 x 17 Inches (Residential)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ALL PLANS MUST INCLUDE	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
1. Code Year Used for Design	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Building Designer Name, Address, and Occupation	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Building Contractor's License	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Code Analysis	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Existing Work & Work to be Modified	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Safety Glazing Location	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Proposed Classification for occupancy, type of construction	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Distinction from Existing Construction	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Provide Drawings that reflect the Actual Scope of Work	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Copy of Existing Certificate of Occupancy (if applicable)	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Notes to Include Abbreviations, Symbols, Legend, and Key Reference	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Seal and Signature of Registered Design Professional(s)	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

13. Photos & Videos as Required				
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FOUNDATION	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
14. Foundation Size, Depth & Reinforcement Details	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Foundation Size & Depth	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Pier System Post Size & Spacing	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FLOOR PLANS	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
17. Floor Layout for Each Existing and Proposed Floor	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Door and Window Sizes or Schedule	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. Finish Materials Schedule	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. Roof Plans Including All Existing and Proposed Equipment, Access	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. Manufacturer's Information for any proposed Equipment	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21. Safety Glazing Location and Type	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22. Pre-Fabricated Fireplace Manufacturer Specifications including Installation	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FRAMING	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
23. Floor Framing Plan	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. Wall Bracing Method Shown on Plan or Schedule with Location of Braced Wall Lines identified	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25 I-Joist System Manufacturer/Series/Size	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
26. Roof Framing Plan or Identification of Pre-Engineered Trusses	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. All Components (Posts, Beams, Joists, Rafters, Framing, Trusses, etc.) Labeled	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. Lumber Sizes and Center Spacing if applicable	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. Material Specifications (e.g. Grade and Species of Lumber, Steel Strength, Masonry, Concrete)	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ELEVATIONS	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
30. Front/Back/Side with Roof, Grade, Window Door Dimensions	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

31. Exterior Grade (Pre- & Post- Construction) accurately depicted	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. Location of Building Height Measuring Point (BHMP) for Zoning Review	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

MECHANICAL/PLUMBING	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
33. BTU Rates and Sizing Calculations Shown for HVAC Systems and Grease Interceptors	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
34. Complete (Existing & New) Ductwork and Piping Layout Shown, Including Main and Branch Duct Sizes with Registers, CFM, and Air Balance Schedule	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. Plumbing Equipment, Appliance, and Fixtures Schedules with Sizing Calculations, (DFU).	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. Floor Layout of Plumbing Shown Including: Cold/Hot Water Supply, Sanitary and Storm Sewers, Gas Lines, Pipe Sizes, and Specifications for New Installations/Relocations	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DETAILS	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
37. Section View from Foundation to Roof w/details	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. Partition Schedules with Fire Rating	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. Building Cross- Sections with All Post, Joists, Foundation, Roofs and Beamed Labeled	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ENERGY	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
40. Insulation R-values or U-factors of Walls/Floors/Ceilings	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
41. Window and Door μ Values / SHGC Values	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
42. Lighting Power Density Calculations	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
43. Energy Verification Sheet	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FIRE PROTECTION	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
44. Fire Separation Distance & Fire Resistance Details	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
45. Fire Protection Systems Details (e.g. Fire Alarms, Automatic Sprinklers, and Smoke Control)	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EGRESS & LIFE SAFETY	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO

46. Egress Plans	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
47. Egress Analysis Summary w/ Occupant Load Calculations	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ELECTRICAL	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
48. Floor Plans Showing Location of Service Equipment, Panels, Sub-Panels, Transformers, and Panel Schedules	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
49. Service Riser Diagram Indicating Rating, Over-Current Protection, Feeders, Raceways, Fault Current (AIC), and Grounding Size	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
50. Lighting Layout	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
51. Load Calculation for Service	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ZONING	PAGE #	NOT APPLICABLE	DOB USE ONLY	
			YES	NO
52. Four Copies of DC Surveyors Plat to Scale, Showing Existing and New Construction, and Roof Structures	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
53. Zoning Data Summary Sheet	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
54. Supplemental Applications as Required	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
55. Certification of Inclusionary Zoning (CIZC) Form and Filing Fee Receipt	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
56. Green Area Ratio Exemption Form OR Landscape Checklist	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
57. Parking Waiver with HPRB Approval	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
58. Board of Zoning Adjustment (BZA) or Zoning Commission (ZC) Order with Certified Copies of Exhibits	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
59. Reasonable Accommodation Form and Supporting Documents	Click here to enter text.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>