

Land and Commercial Building Requirements



DEVELOPMENT SERVICES DEPARTMENT

Development Services Customer Service Center | 1 Exchange Plaza, Suite 400 | Raleigh, NC 27601 | 919-996-2495
 Litchford Satellite Office | 8320 – 130 Litchford Road | Raleigh, NC 27615 | 919-996-4200

| Plan Review Type | | | OFFICE USE ONLY | | | |
|--|---|---|---|--------------------|-------------------------|---|
| Building Permitting New Building/Shell Addition Alteration/Pony Express Interior Completion *Change of Use per Building or Zoning Code | Site Permitting New Building/Shell Addition *Change of Use per Building or Zoning Code Concurrent Review Mass Grading Only | ≥12,000 sq. ft. disturbed area with no improvements = A Grading permit and other permits may be required. <12,000 sq. ft. disturbed area with no improvements = No Grading permit required, but other permits may be needed. | <table border="1"> <tr> <td>Transaction Number</td> </tr> <tr> <td>*Site Plan Plot Plan</td> </tr> <tr> <td><i>*Site Plans may require Planning Commission approval</i></td> </tr> </table> | Transaction Number | *Site Plan Plot Plan | <i>*Site Plans may require Planning Commission approval</i> |
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| *Site Plan Plot Plan | | | | | | |
| <i>*Site Plans may require Planning Commission approval</i> | | | | | | |
| If your project has been through Preliminary Review or Administrative Site Review, provide the Development Case Number: | | | | | | |
| Provide all previous transaction numbers for Coordinated Team Reviews, Due Diligence Sessions or Pre-Submittal Conferences: | | | | | | |

| GENERAL INFORMATION | | |
|--|--------------|-----|
| Project Address | Suite Number | |
| Subdivision/Tenant/Shopping Center | Lot Number | |
| Property Owner | Phone | Fax |
| | Email | |
| Project Contact Person | Phone | Fax |
| | Email | |
| Owner/Agent Signature | Email | |
| Provide a detailed description of the project scope: | | |

| TO BE COMPLETED BY APPLICANT | YES | N/A | COMPLETED BY CITY STAFF | | |
|--|-----|-----|-------------------------|----|-----|
| | | | YES | NO | N/A |
| General Requirements – Permitting | | | | | |
| 1. I have referenced the Commercial Building Checklist and by using this as a guide, it will ensure that I receive a complete and thorough first review by the City of Raleigh. | | | | | |
| 2. Approved Concurrent Plans , if required | | | | | |
| 3. Completed City of Raleigh Building Code Summary Sheet must be printed on the plans | | | | | |
| 4. Four (4) sets of bound and rolled proposed plans (minimum size 18"x24" not to exceed 36"x42"), to architectural scale, including date of preparation, all revision dates (for re-submittals only), and sealed by design professional. ONLY Cell towers and co-locates may be submitted on 11" x 17" sheet. | | | | | |
| 5. One (1) extra set of plans, if required by Wake County Health Department. Must include the Wake County Food Service Application and Wake County Environmental Services Review Guide (Appendix S) | | | | | |
| 6. Payment to cover Commercial Plan Review, for all new commercial construction, changes in building occupancy type and additions greater than 4,000 square feet require a non-refundable plan review fee to be paid at the time of plan submittal | | | | | |
| 7. Completed Shell Variable Form for each shell building | | | | | |
| 8. Two (2) copies of proposed suite layout for all new Multi-tenant buildings or approved suite layout for existing multi-tenant building | | | | | |
| 9. Permit from Wake County for Private Utilities | | | | | |
| 10. Copy of letter/email from Pretreatment Coordinator printed on each set of plans approving pretreatment system and sizing calculations (food service establishments & vehicle maintenance facilities only) | | | | | |
| 11. DIGITAL COPY OF PLANS, CALCULATIONS, AND ANY SUPPORT DOCUMENTATION FOR EACH SUBMITTAL | | | | | |
| Building Requirements - FOR NEW BUILDING, SHELL, ADDITION, CHANGE OF USE & ALTERATION | | | | | |
| 1. New and Existing work | | | | | |
| 2. Building Plans: a) Foundation Plan & Details b) Floor Plan c) Roof Plan d) Structural Plan | | | | | |
| 3. Truss Reactions | | | | | |
| 4. Wall Sections | | | | | |
| 5. Fire Rated Walls Legend (s) | | | | | |
| 6. U.L. Designs for Penetrations | | | | | |
| 7. Building Elevations | | | | | |
| 8. Pre-Cast Drawings | | | | | |
| 9. Pre-Cast Engineered Drawings | | | | | |
| 10. Metal Building Certification | | | | | |
| 11. Energy Code: a) Building a) Electrical b) Mechanical | | | | | |
| 12. Accessibility Details | | | | | |
| Electrical Requirements | | | | | |
| 1. Reflected Ceiling Plan | | | | | |
| 2. Power Plan | | | | | |
| 3. Riser Diagrams | | | | | |
| 4. Fire Rated Walls Legend | | | | | |
| 5. U.L. Designs for Penetrations | | | | | |
| 6. Panel Location and Schedules | | | | | |
| 7. Electrical Load Calculations | | | | | |
| 8. Fire Rated Penetrations | | | | | |
| 9. Receptacle Plan | | | | | |
| 10. Fire Alarm/Smoke Detector | | | | | |

| TO BE COMPLETED BY APPLICANT | YES | N/A | COMPLETED BY CITY STAFF | | |
|---|-----|-----|-------------------------|----|-----|
| | | | YES | NO | N/A |
| Plumbing Requirements | | | | | |
| 1. Fixture and Equipment Plan | | | | | |
| 2. Hot and Cold Water Riser | | | | | |
| 3. Waste and Vent Riser | | | | | |
| 4. Plumbing Load Calculations | | | | | |
| 5. Fire Rated Walls Legend | | | | | |
| 6. U.L. Designs for Penetrations | | | | | |
| 7. Fire Rated Penetrations | | | | | |
| 8. Minimum Facility Calculations | | | | | |
| Mechanical Requirements | | | | | |
| 1. Mechanical Equipment type | | | | | |
| 2. Equipment location | | | | | |
| 3. Dampers and Detail | | | | | |
| 4. Fire Rated Penetrations | | | | | |
| 5. Fire Rated Walls Legend | | | | | |
| 6. U.L. Designs for Penetrations | | | | | |
| 7. Gas Riser Diagram | | | | | |
| 8. Refrigerator Calculations | | | | | |
| Fire Protection Requirements | | | | | |
| 1. CD required for sprinkler calculations, cutsheets and fire alarm | | | | | |
| 2. Sprinkler Plans | | | | | |
| 3. Fire Alarm Plans for all new sprinkler systems and all elevators and if required by code for all other occupancies | | | | | |
| 4. Does business store or use Hazardous Materials? If yes, submit Hazardous Materials Permit Application | | | | | |
| 5. Fuel Tanks? If yes, submit Hazardous Materials Permit Application | | | | | |

| General Requirements – Mass Grading | | | | | |
|--|--|--|--|--|--|
| 1. I have referenced the Mass Grading Checklist and by using this as a guide, it will ensure that I receive a complete and thorough first review by the City of Raleigh | | | | | |
| 2. Land disturbing activity plans review fee (see Development Fee Schedule for rate) | | | | | |
| 3. Four (4) sets of bound and rolled proposed plans (minimum size 18"x24" not to exceed 36"x42"), to engineering scale (1"=20', 1"=100', etc.), including date of preparation, all revision dates (for re-submittals only), sealed by a Design Professional, and one (1) electronic copy on CD. | | | | | |
| 4. Vicinity Map no smaller than 1"=500' and no larger than 1"=1000', showing the position of the site, it's relation to surrounding streets and properties, with true North arrow | | | | | |
| 5. Existing Conditions Plan | | | | | |
| 6. Proposed Grading | | | | | |
| 7. Proposed Sediment and Erosion Control Plan | | | | | |
| 8. NPDES Stabilization Plan (required if disturbing 1.0 acre or more) | | | | | |
| 9. Proposed Tree Conservation Plan | | | | | |
| 10. Detail Sheets | | | | | |
| 11. Sediment & Erosion Control Calculations | | | | | |
| 12. Plan sheets should have a legend defining all symbols, and north arrow printed on the plans | | | | | |
| 13. For secondary tree conservation areas include two (2) copies of the Tree Cover Report completed by a certified arborist, North Carolina licensed landscape architect, or North Carolina registered forester | | | | | |
| 14. A Financial Responsibility Form , if grading more than 12,000 sq. feet | | | | | |
| 15. Are there any retaining walls greater than 5' in height on the site? If yes, please print special inspections statement on the plans | | | | | |