

CITY OF SAINT PAUL

DEPARTMENT OF SAFETY AND INSPECTIONS 375 JACKSON STREET, SUITE 220 ST. PAUL, MINNESOTA 55101-1806 Phone: 651-266-8989 Fax: 651-266-9124 Visit our Web Site at www.stpaul.gov/dsi

Building Plan Review Submittal Requirements Commercial New/Addition



Purpose: Establish requirements at the time of plan review submittal to enable accurate and timely reviews.

Scope: All commercial change of use, tenant improvements or remodels

Instructions: This form should be filled out by a licensed design professional. It should be signed and uploaded to the ProjectDox software with plan review submittals. Please check the box next to the applicable items included for review. Incomplete submittals may result in review delays. Plan Review can be reached via email DSI-BuildingPlanReview@ci.stpaul.mn.us, fax at (651) 266-9124 and phone at (651) 266-9007 from 7:30 am - 4:30 pm, Monday through Friday.

Project Name:				
Site Address:				
General Items: ☐ Sewer Availability Charge (SAC) determination application submitted to Metropolitan Council Environmental Services (MCES) MCES	al			
☐ Completed Special Structural Testing and Inspection Schedule and SSTIS Guidelines				
\Box Completed contact list with names, phone numbers, email addresses and physical addresses of building ow contractor, tenants and all design professionals	ner			
☐ Energy code compliance documents				
Plan Requirements:				
☐ Complete set of plans and specifications (Civil, Landscape, Architectural, Structural, MEP, etc.)				
\square All plan sheets are signed by the appropriate design professional (electronic signature is allowed)				
\square Project name and correct building address provided on title sheet, verify address with Public works				
\Box Site Plan showing proposed parking and identifying the accessible route per Minnesota Rules Chapter 1341				
☐ Key plan of the building				
Code Analysis includes:				
☐ Energy code path				
☐ Description of occupancy/use				
☐ Occupancy classification per 2015 MN Building Code				
☐ Construction type per 2015 MN Building Code				
☐ Relevant square footages, stories and allowable area				
☐ Occupant load				
☐ Number of exits required and number of exits provided				
☐ Indicate if building will have a fire protection system				

☐ Common path of	f egress travel, measured at rig	ght (90 degree) angles	
☐ Separated/non-s	separated uses with supporting	g information	
☐ Plumbing fixture	count		
Life Safety Plan:			
\square Exit path and acc	cessible route to the exterior a	nd public way	
☐ Required occupa	ant width and designated occu	pant load for each exit	
☐ Location of spec	ial locking devices (card reader	r, panic hardware, delayed egress, etc.)	
\square Location and rat	ing for fire rated walls and sha	fts (color coded)	
☐ Direction indicat	or (North, South, East, or Wes	t) with arrow	
☐ Occupancy class	ification of all spaces		
Floor plans include:			
☐ Scale on each pla	an and/or detail		
☐ Rooms marked v	with number and room name o	or use	
\square Fire-rated and sr	moke-rated assemblies identifi	ed using 2015 MN Building Code Chapter 7 d	efinitions
Other items:			
\square Reflected ceiling	plan with exit signs and emer	gency lighting located	
☐ Material Specific	cations		
\square Room finish sche	edule		
☐ Door and hardwa	are schedules, including all loc	king arrangements	
☐ Details of all req	uired accessible components i	ncluding data on required 20% accessible upg	grades
☐ Furniture/fixture	e/equipment layout plan		
Comments:			
\square I acknowledge that	the items checked on the list a	above are included on or with the submitted	plans.
Full Name:		Date:	
Work Phone:	Cell Phone:	Email:	
Company Name:		Street Address:	
City:	State:	Zip Code:	