



Clark County Department of Building & Fire Prevention

4701 West Russell Road, Las Vegas, NV 89118 ~ (702) 455-3000

Checklist for Commercial Submittals

Samuel D. Palmer, Acting Director/Building & Fire Official · Girard Page, Fire Marshal

DATE: _____ ASSESSOR'S PARCEL#: _____ APPLICATION# _____

PROJECT NAME: _____ NUMBER OF UNITS: _____

ADDRESS: _____ CITY: _____ ZIP: _____

OWNER: _____ CONTRACTOR: _____

SCOPE OF WORK: _____ COMMISSION APPROVAL: _____

PHASED: FOUNDATION STRUCTURAL ARCHITECTURAL MECHANICAL/PLUMBING/ELECTRICAL

CONTACT PERSON: _____ PHONE: _____ FAX: _____

E-MAIL: _____ CELL: _____

CONTACT'S ADDRESS: _____

SUBMITTAL: ARCH/STRUC (IBC)

- (3) Grading Plans Wet Stamped by a Nevada Professional Civil Engineer
- (3) Geotechnical Reports Wet Stamped (one for ESGI) (3) Update Letters Wet Stamped (if original is over (1) year old)
- (1) CD Electronic Submittal of Geotechnical Information (ESGI)
- (3) Sets Plans Wet Stamped/Signed by a Nevada Professional Engineer or Architect – to include:
 - Site Plan
 - Foundation & Footing Plan (details)
 - Floor Plan
 - Elevations
 - Sections
 - Electrical (NEC)
 - Plumbing (UPC)
 - Mechanical
 - Structural
 - Structural Calculations (2)
 - Energy Calculations (2) (IECC)
 - Lighting Compliance (2) (IECC)
 - Envelope Compliance (2) (IECC)
 - Code Analysis
 - Fire Storage Survey
 - Landscape Plans
 - Truss Calculations Deferred

ITEMS PRIOR TO ISSUE:			
WATER:	<input type="checkbox"/> LVVWD	<input type="checkbox"/> Well	<input type="checkbox"/> Other
SANITATION:	<input type="checkbox"/> CCWRD	<input type="checkbox"/> Septic	<input type="checkbox"/> Other
DUST:	<input type="checkbox"/> Yes	<input type="checkbox"/> Tortoise Mitigation	

FEES:	
_____	Mitigation Fee (\$550/Acre)
_____	Transportation Tax (\$.90/sq. ft. - \$900/DU)
_____	Water Usage If > 1.2 Acres
_____	Res. Const. Tax (park Fee) (\$.36/Liv. Sq. Ft.)

ITEMS PRIOR TO ISSUE:		
<input type="checkbox"/>	HI Rise > 55'	<input type="checkbox"/> Hospital <input type="checkbox"/> Covered Mall
_____	Life Safety Pkg. PAC Number	

	BLDG# / NAME	# OF UNITS	BLDG TYPE	APPLICATION#	VALUATION	PLANS EXAM FEE
1	_____	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____	_____
7	_____	_____	_____	_____	_____	_____
8	_____	_____	_____	_____	_____	_____
9	_____	_____	_____	_____	_____	_____

Submittal will expire if permit is not issued within 180 days of approval or if applicant fails to respond to plan review comment within six (6) weeks of notification.