



City of Ferndale
 Building Department
 2095 Main Street / P.O. Box 936
 Ferndale, WA 98248
 (360) 685-2369 phone
 (360) 384-5189 fax
 www.cityofferndale.org

**APPOINTMENTS ARE REQUIRED TO
 SUBMIT**

OFFICE USE ONLY	
REPEAT PLAN APPROVAL NUMBER: _____	RECEIVED BY/DATE:
Submitted under: _____ Code	
Plan Expires: _____	

SINGLE FAMILY/DUPLEX/T.H. REPEAT PLAN APPLICATION

CONTACT INFORMATION	
<input type="checkbox"/> PRIMARY PLAN OWNER (If more than one owner, complete additional owner information)	
Name: _____	
Address: _____	
City: _____	State: _____ Zip: _____
Phone: _____	Fax: _____
Cell: _____	E-mail: _____
PLAN NAME: (If applicable) _____	
PROJECT VALUATION: \$ _____	
(COST OF MATERIALS, LABOR & EQUIPMENT USED TO CONSTRUCT)	

BUILDING INFORMATION	
SFR: <input type="checkbox"/>	# BEDROOMS: _____
DUPLEX: <input type="checkbox"/>	# FULL BATHS: _____
TOWNHOUSE: <input type="checkbox"/>	# ¾ BATHS: _____
# UNITS: _____	# ½ BATHS: _____
# STORIES: _____	# FIREPLACES: _____
BUILDING HEIGHT: _____	
MAIN FLOOR SQ FT: _____	DECK SQ FT: _____
ADDITIONAL FLOOR(s) SQ FT: _____	BASEMENT SQ FT: _____
GARAGE SQ FT: _____	
COVERED PORCH SQ FT: _____	TOTAL SQ FT: _____
<input type="checkbox"/> ENGINEERING REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/> SPRINKLER SYSTEM REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO	
<input type="checkbox"/> SPECIAL INSPECTOR PLAN REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO	
~COMPLETE PLUMBING/MECHANICAL SHEET~ PAGE 2	

CONTACT INFORMATION	
<input type="checkbox"/> ARCHITECT	<input type="checkbox"/> DESIGNER <input type="checkbox"/> ENGINEER
Name: _____	
Address: _____	
City: _____	State: _____ Zip: _____
Phone: _____	Fax: _____
Cell: _____	E-mail: _____

~OFFICE USE ONLY~	
OCCUPANCY TYPE: _____	
CONSTRUCTION TYPE: _____	
BUILDING HEIGHT: _____	
FULL BATHS: _____	
¾ BATHS: _____	
½ BATHS: _____	
# OF STORIES: _____	
# OF UNITS: _____	
BASEMENT: <input type="checkbox"/> Yes <input type="checkbox"/> No	
STAFF INITIALS: _____	
DATE APPROVED: _____	

CERTIFICATION		
I CERTIFY UNDER PENALTY OF PERJURY THAT THE INFORMATION AND EXHIBITS SUBMITTED HERewith ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I FURTHER UNDERSTAND I AM THE ONLY PERSON AUTHORIZED TO APPROVE FUTURE USE OF THIS REPEAT PLAN FOR SITE SPECIFIC BUILDING PERMIT SUBMITTALS.		
OWNER SIGNATURE	PRINT NAME	DATE

IDENTIFY PLUMBING FIXTURES & MECHANICAL EQUIPMENT

PLUMBING FIXTURES	NO.	OFFICE USE ONLY
Water Closet		
Bathtub		
Lavatory (Wash Basin)		
Shower		
Sink and/or Disposal		
Dishwasher		
Laundry Tub/Sink/Tray		
Clothes Washer		
Urinal		
Drinking Fountain		
Floor Sink or Floor Drain		
Sewer		
Slop Sink		
Grease Traps		
Install Drain and/or Vent Piping		
Hose Bibs		
Electric Water Heater		
Waste Interceptor		
Water Piping and/or Water Treating Equipment		
Gray Water System		
Rain Water System, per Drain inside building		
Hot Tub		
Sprinkler System		
Vacuum Breakers	1 – 5 Breakers	
	Each Additional Breaker	
Backflow Preventer	2" or smaller	
	Over 2"	
P.E. REVIEW COUNT TOTAL		

MECHANICAL EQUIPMENT	NO.	OFFICE USE ONLY
Forced Air or Gravity Furnace	≤ 100,000 BTU's	
	≥ 100,000 BTU's	
Floor Furnace		
Suspended/Wall/Floor Heater		
Boiler/Compressor/Absorption Systems ≤ 30 HP or 1,000,000 BTU's		
Boiler/Compressor/Absorption Systems ≥ 30 HP or 1,000,000 BTU's		
Air Handling Unit ≤ 10,000 CFM		
Air Handling Unit ≥ 10,000 CFM		
Evaporative Cooler		
Vent Fan		
Ventilation System		
Exhaust Hood		
Incinerator/Domestic		
Clothes Dryer		
Water Heater (Gas only)		
Range		
Fireplace/Insert		
Woodstove		
Gas Piping System	1-5 Outlets	
	Each Additional Outlet	
P.E. REVIEW COUNT TOTAL		

ADDITIONAL PLAN OWNER(S)

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Cell: _____

E-mail: _____

Owner Signature: _____

Date: _____

Print Owner Name: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Fax: _____

Cell: _____

E-mail: _____

Owner Signature: _____

Date: _____

Print Owner Name: _____

BUILDING PLANS (Two (2) Sets)

PLANS MUST BE ON 24" x 36" SHEETS OF PAPER

****USE THIS CHECKLIST TO ENSURE REQUIRED INFORMATION IS ON EACH TYPE OF PLAN****

COVER SHEET REQUIRED AND TO INCLUDE: CODE SUMMARY (CODE EDITION), BUILDING FEATURES, LIFE SAFETY SYSTEMS, IF APPLICABLE: OCCUPANT LOAD/EGRESS CAPACITY CALCS, GROSS FLOOR AREA IN SQ. FT., TRAVEL DISTANCE, FIRE PROTECTION SYSTEMS EXISTING/TO BE INSTALLED, AND LOCATION AND TYPE OF FIRE EXTINGUISHERS. PROJECT NARRATIVE OR DESCRIPTION, SPECIAL INSPECTOR PLAN FOR THRESHOLD BUILDINGS.

ELEVATION PLAN – 2 Copies

CHECK	ITEM (Map scale – ¼" = 1'0" or ½" = 1'0") SHOW DIMENSIONS
<input type="checkbox"/>	Elevation view of all sides of the structure (minimum 4 sides)
<input type="checkbox"/>	Show exterior materials, roof pitches, grading, chimney termination and attic ventilation.
<input type="checkbox"/>	Show existing and proposed grades. <i>NOTE: Sites with slopes greater than 10% may also require a grading plan – check with staff for details.</i>

FOUNDATION PLAN & DETAILS (INCLUDE DECKS/PATIOS)- 2 Copies

CHECK	ITEM (Map scale – ¼" = 1'0" or ½" = 1'0") SHOW DIMENSIONS
<input type="checkbox"/>	All footing, stem wall, pier sizes, and retaining walls.
<input type="checkbox"/>	Size and placement of all reinforcement.
<input type="checkbox"/>	Depth of footings below grade.
<input type="checkbox"/>	Type and location of all anchorage hardware. Include specific type of hold downs.
<input type="checkbox"/>	Identify method and amount of crawl space ventilation.
<input type="checkbox"/>	Crawl space access location and opening size.
<input type="checkbox"/>	Deck framing and/or concrete patio (Show location on foundation & floor plan).
<input type="checkbox"/>	Provide sectional detail of foundation.

FLOOR PLANS FOR EACH LEVEL WHICH INDICATE: - 2 Copies

CHECK	ITEM (Map scale – ¼" = 1'0" or ½" = 1'0") SHOW DIMENSIONS
<input type="checkbox"/>	Label use of all rooms, room sizes, and water closet clearance & shower dimensions.
<input type="checkbox"/>	Lighting Plan – If applicable, show the 50% required High Efficacy Lighting.
<input type="checkbox"/>	All window and door sizes and type. Indicate all required emergency egress openings.
<input type="checkbox"/>	Indicate the locations of all required smoke and carbon monoxide detectors.
<input type="checkbox"/>	All header sizes and material. Provide design calculations for any header exceeding 6' in length.
<input type="checkbox"/>	Indicate required safety glazing at all hazardous locations in accordance with R308.4.
<input type="checkbox"/>	Location, type, and fuel source of all fuel burning appliances.
<input type="checkbox"/>	Indicate the location and type of vehicle impact protection devices (such as bollards).
<input type="checkbox"/>	Indicate the location and CFM of all required mechanical ventilation.
<input type="checkbox"/>	Show location of all decks and/or concrete patios.
<input type="checkbox"/>	All required fire separation detailed on the plan.

FLOOR FRAMING PLAN FOR EACH FLOOR – 2 Copies

CHECK	ITEM (Map scale – ¼" = 1'0" or ½" = 1'0") SHOW DIMENSIONS
<input type="checkbox"/>	Floor joist size, spacing, species, grade, or manufacturer and series if engineered wood.
<input type="checkbox"/>	All beam sizes on the plan (include design calculations if more than 6').
<input type="checkbox"/>	Deck framing including ledger attachment, flashing detail, and specific hardware.
<input type="checkbox"/>	Methods of support and all connecting hardware.

ROOF PLAN - 2 Copies

CHECK	ITEM (Map scale – ¼" = 1'0" or ½" = 1'0") SHOW DIMENSIONS
<input type="checkbox"/>	Rafter size, spacing, species, grade, or manufacturer and series if engineered wood.
<input type="checkbox"/>	Truss layout diagram and specification details for each truss (if applicable).
<input type="checkbox"/>	All beam sizes on the plan (include design calculations).
<input type="checkbox"/>	Layout of submitted roof trusses is required to match plan layout.
<input type="checkbox"/>	Complete details of over-framing support and connections.
<input type="checkbox"/>	Methods of support and all connecting hardware.
<input type="checkbox"/>	All methods of uplift restraint indicate specific hardware to be used.

BUILDING PLANS (Two (2) Sets)
PLANS MUST BE ON 24" x 36" SHEETS OF PAPER

****USE THIS CHECKLIST TO ENSURE REQUIRED INFORMATION IS ON EACH TYPE OF PLAN****

BUILDING BRACING PLAN (Any approved method is allowed for each braced wall) – 2 Copies

CHECK	ITEM (Map scale – ¼" = 1'0" or ½" = 1'0") SHOW DIMENSIONS
<input type="checkbox"/>	Methods and locations of all wall bracing: braced wall panels, alternate panel or narrow portal, continuously sheathed or engineered shear design. Include required interior braced wall lines.
<input type="checkbox"/>	All hold-down locations. Indicate the specific hardware, which is to be used.
<input type="checkbox"/>	Provide complete details, including standard exterior and interior, alternate, narrow portal, or engineered.
<input type="checkbox"/>	If the benefits of continuous sheathing provisions are to be used, provide the percentage of countable panels.

CROSS SECTION DETAILED PLANS – 2 Copies

CHECK	ITEM (Map scale – ¼" = 1'0" or ½" = 1'0") SHOW DIMENSIONS
<input type="checkbox"/>	Typical structural cross sections showing size of footing, thickness of foundation walls, type of basement floors, size of floor joists and spacing, size and spacing of studs, ceiling joists, rafters and spacing of same, headers over large openings, insulation, and type of size of sill and anchor bolts. Stairs; show rise and run, headroom, width, handrails, guardrails and landings. Sections will show interior and exterior finish, type of roofing, joist bearing and ceiling height. Provide list of all required special inspections (Verify with Engineer of Record, if applicable, i.e., concrete, welding, etc.)

IRC ENERGY CODE COMPLIANCE FORM - 2 Copies

CHECK	ITEM (Map scale – ¼" = 1'0" or ½" = 1'0") SHOW DIMENSIONS
<input type="checkbox"/>	WSEC Prescriptive Worksheet Energy Code Compliance Form for Zone 1 (SFR/Duplex – International Residential Code only) Completed WSEC Energy Code Compliance Form, which is found on-line at: http://www.energy.wsu.edu/BuildingEfficiency/EnergyCode.aspx

IBC NON-RESIDENTIAL GROUP ENERGY CODE COMPLIANCE

	No forms are submitted; however, this Occupancy must comply with IBC & WSEC Non-Residential Energy Code for Commercial structures including Multi-Family.
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ENGINEERING - 2 Copies

CHECK	WE ARE UNABLE TO ACCEPT SINGLE-SIDED ENGINEERING REPORTS
<input type="checkbox"/>	2 copies (1 wet-stamped) of structural engineering, where applicable

NOTE: OTHER PLANS MAY BE REQUIRED – CHECK WITH APPLICABLE DEPARTMENTS



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Ferndale WA 98248
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COMMUNITY DEVELOPMENT DEPARTMENT BUILDING DIVISION

REPEAT PLAN APPLICATION GUIDELINES AND PROCEDURES FOR RESIDENTIAL PROJECTS: ONE & TWO FAMILY, APARTMENTS, TOWNHOUSES, AND CONDOMINIUMS.

The purpose of the Repeat Plan Program (**FMC § 15.12.030**) is to streamline the permit process by issuing multiple building permits based on the review of a single set of documents that represent the same building type. This program is appropriate for single and multi-family residential developments with identical structures. Mirrored plans will be accepted into this program; however, they must be submitted at the same time as the initial plan and must otherwise be identical. Projects with unusual design or multiple configurations are not suitable for this program. If there are questions related to the suitability of your proposal, please consult with City staff.

Most delays in this program are a result of re-submittal requirements for incomplete, inaccurate, conflicting or unclear documents.

Repeat Plan fees shall be as follows:

- A. Initial plan checking fees for this program shall be established at 65 percent of the building permit fee.
- B. Mirrored plan checking fees, when submitted with the initial plan (A, above) shall be established at 50 percent of the building permit fee.
- C. All future building permits submitted based on this program shall have an established plan checking fee of 32.5 percent of the building permit fee, regardless of whether the plans are repeats of (A) or (B), above.

The following procedures are designed to expedite your process in the program:

1. Applicants are required to submit a complete Repeat Plan Application prior to submitting site-specific building permits. Applicants must schedule an appointment with the Permit Specialist prior to initial intake. Please review the checklist provided with this application and be sure to include all necessary documentation for your project when submitting.
2. Only the owner of the building plans may submit for Repeat Plan Review. It is the responsibility of the building plan owner (or owners) to identify the person or persons who are considered the owner of the building plans at the time of repeat plan submittal. In some cases, the owner of the building *plans* may be different from the owner of the individual building *sites*. In such cases, written, site-specific authorization from the owner of the building plans must accompany all building *site* plan submittals.
3. The building plan owner may, at their option, identify a plan name for the building plans. The City will establish a Repeat Plan Approval Number, which shall be used for reference by both the City and the applicant on all site-specific proposals.
4. Building Codes require construction documents to be of sufficient clarity to show in detail that the proposed construction will conform to the provisions of all adopted codes, ordinances, rules and regulations in effect at time of submittal. They must be clear enough that a qualified 3rd party is able to understand the proposed project without any prior knowledge. All construction requirements must be clearly and accurately indicated in the plans. Building plans that reflect previous code requirements, approval stamps, notes, etc. will be rejected by the City.
5. A statement must be submitted by the Architect and/or Engineer of Record, authorizing the building plans to be Mastered Permitted and allowing its reuse by the owner for future buildings to be permitted under the Repeat Plan Approval with the City.
6. Once approved, the repeat plan will be in effect until the next building code change, at which time the approved plan will expire. A new submittal will be required should the applicant wish to continue the plan in the program. The City will not provide discounts for the re-review of expired repeat plans beyond the repeat plan review fees described above.
7. Following repeat plan submittal, the Permit Specialist will create a Repeat Plan file and file number. The Plans Examiner will then review the repeat plan in the order it was received. Once the repeat plans have been reviewed, the Permit Specialist shall notify the applicant that the plan review has been completed and will schedule an appointment with the applicant to release one set of stamped plans and documents. The remaining plan check fee balance, if any, shall be paid at the time the stamped plans are released. The Plans Examiner shall retain a second stamped plan and documents within the Repeat Plan file.

SITE-SPECIFIC SUBMITTALS WITH REPEAT PLAN APPROVAL

1. Following review and approval of repeat plans by the City, the applicant may schedule a site-specific building permit intake with the Permit Specialist. Building permit intake shall follow all standard requirements, with the following potential variation:
 - a. The applicant shall be required to submit one full-size, full-color copy of the stamped approved repeat plans, and all other documents approved for repeat of said plan to the City, and must indicate to the City at the time of submittal that they are re-using a previously-reviewed/approved repeat plan.
 - b. The applicant, if different from the building plan owner, must provide a written authorization from the building plan owner stating "I, (NAME OF BUILDING PLAN OWNER), the owner of repeat building plans numbered (REPEAT PLAN NUMBER), do hereby authorize (SITE-SPECIFIC APPLICANT) to utilize said building plans for the development of (PROPERTY ADDRESS). If application submittal does not occur within sixty days of the date of this letter, re-authorization will be required. Any subsequent use of the plans on this or any other property shall also require specific authorization. I understand that by signing my name, I may be relinquishing control of the building plan for this site. (SIGNATURE OF BUILDING PLAN OWNER, DATE).
 - c. Variations in roof pitch (the only structural change allowed in this program) may be submitted at time of individual building permit submittal and must be reflected in elevation drawings (two sets). Such variations shall be accompanied by engineered truss systems. Depending on the pitch variation, the City may require re-review of the building or a statement from a Washington State Licensed Engineer certifying that the roof pitch will not exert additional forces on the structure. The burden shall be placed on the applicant to demonstrate, via a qualified engineer, that changes to roof pitches or truss layouts can be sustained by the structure as originally reviewed. **NOTE: Minimum roof pitch variation allowed in this program is 4:12; maximum roof pitch is 8:12.**