

# Plan Review – Plan Submittal Checklist

(This Form shall be filled out and submitted with Plans for Review)

## Greenville County

Greenville County Square

301 University Ridge, Suite 4100

Greenville, SC 29601 - 3660

864/ 467 - 7060

Initial  
Blanks

1.

**Tax Map Number:** \_\_\_\_\_

**Tenant Business Name/Physical Address and Unit Number**

### Description of Project: (must Check one)

- |   |   |
|---|---|
| <input type="checkbox"/> Commercial Addition w/ no site work, | <input type="checkbox"/> Mechanical stand-alone |
| <input type="checkbox"/> Commercial w/ Site work              | <input type="checkbox"/> Electrical stand-alone |
| <input type="checkbox"/> Commercial New Construction          | <input type="checkbox"/> Plumbing stand-alone   |
| <input type="checkbox"/> Commercial Alteration                | <input type="checkbox"/> Townhouse / Condo      |
|   | <input type="checkbox"/> Swimming Pool          |

2. **Commercial Building Application** and **Commercial Zoning Application** have been completed and signed and I have referenced and included all pertinent information listed on the **Basic Drawing Requirements Sheet**.

3. **Submittal Type:** (must Check one – See 4. For referenced plans)

- |   |   |
|---|---|
| <input type="checkbox"/> Foundation: 1-5,12 & 15                      | <input type="checkbox"/> Full: 1-12 & 15                  |
| <input type="checkbox"/> Shell: 1-6,8,12 & 15                         | <input type="checkbox"/> Mechanical (HVAC) stand-alone: 9 |
| <input type="checkbox"/> Vanilla Box: 1-12 & 15                       | <input type="checkbox"/> Electrical stand-alone: 10       |
| <input type="checkbox"/> Interior Alteration Up-Fits: 1,2,5,7,9-11,13 | <input type="checkbox"/> Plumbing stand-alone: 11         |
| <input type="checkbox"/> Addition to Existing Structure: 1-15         |   |

4. **Required Plans:** (Must check plans submitted – See 3. for references. Omissions will result in delays)

**A Code Analysis** is required for each discipline, see **Basic Drawing Requirements Sheet**

- |   |  |
|---|--|
| <input type="checkbox"/> 1 Code Analysis                  | <input type="checkbox"/> 8 Structural plans                        |
| <input type="checkbox"/> 2 Sealed plans as required       | <input type="checkbox"/> 9 Mechanical (HVAC) plans                 |
| <input type="checkbox"/> 3 Site / Landscape plans         | <input type="checkbox"/> 10 Electrical plans                       |
| <input type="checkbox"/> 4 Foundation plans               | <input type="checkbox"/> 11 Plumbing plans                         |
| <input type="checkbox"/> 5 Floor plans                    | <input type="checkbox"/> 12 Under Slab – Mech., Elec., Plum. plans |
| <input type="checkbox"/> 6 Elevations                     | <input type="checkbox"/> 13 Existing Building Floor plans          |
| <input type="checkbox"/> 7 Schedules (door, finish, etc.) | <input type="checkbox"/> 14 Special Inspection Documents           |
|   | <input type="checkbox"/> 15 Comcheck, Building, Elect, Mech        |

5. **Specific Information / Plans:** (Must Check all that Apply)

- 1 Sprinkler Spec sheet must submit if building is Sprinkled.
- 2 Storage Occupancy Submittal Supplement form if required (ie. Storage, or Accessory Storage uses).
- 3 Sewer / Septic Tank permit must be approved and presented at time of permitting.
- 4 Applied to Board of Zoning Appeals if required by the Greenville County Zoning Ordinance.
- 5 Flood Plain development applications have been submitted if required.

The applicant hereby certifies and agrees as follows: 1.) That he/she has read the above information and it is true and correct; 2.) If any information supplied by the owner and/ or owner's agent is incorrect or missing, the permit review time will be delayed. 3.) It is the responsibility of the applicant to obtain and distribute the Plan Review Tracking Number to all parties involved with this project. (The **Automated Line 864-467-5660** can be used to check plan review status – The Contact person will be notified when permit is ready).

Date: \_\_\_\_\_ By Owner or Authorized Agent \_\_\_\_\_