



**CITY OF FORT PIERCE, FLORIDA
BUILDING DEPARTMENT
APPLICATION FOR BUILDING PERMIT**
(772) 467-3718 FAX (772) 467-3849
fpbuilding@cityoffortpierces.com

PERMIT # 22-2972
FBC (2020) 7th Edition
PIN # 015104

Building Department Project Manager:
CESAR

*Property Address 809 Delaware Ave *Date 3/23/23
Parcel ID# 2410-709-0013-000-5 *# of plans submitted ___ *# of CD's submitted ___
(Located on your tax bill)
*Owner Name Dean Properties LLC *Owner Address 1005 Kentucky Ave Ft. Pierce, FL
Phone # () - Fax # () - Cell # () -
Email Address _____

***Required Information**

Type of permit Building Permit (Tenant Improvements) *Valuation \$ \$200,000.00
*Description of Work: Interior renovations for a new bistro style restaurant. Improvements to include framing, electric, plumbing, HVAC, addition of a front deck/seating area, & exterior stair access to the second floor

RECEIVED

Architect: _____
Phone() - Fax () - Email Address APR 06 2023
Engineer: _____
Phone() - Fax () - Email Address City of Fort Pierce Building Department

***CONTRACTOR/APPLICANT INFORMATION:**

City License # 20-00030863 State License # CGC1526542
Company Name Treasure Coast General Contractors, LLC Qualifier Devin Wheaton
Address 1720 Copenhaver Road City/State Ft. Pierce, FL Zip 34945
Phone # () - Fax # () - Cell # () -
Email Address treasurecoastgc@gmail.com

Occupancy _____ Construction Type _____ # of Units _____ # of Stories _____
Sq. Ft. Conditioned Space _____ Total Sq. Ft. _____

I understand that no building may be occupied until a Certificate of Occupancy/Certificate of Completion has been issued after final inspection by the Building Department and full compliance with the building code, city ordinances, state statutes and other applicable rules and regulations have been satisfied. I am also verifying that all sets of plans submitted are identical.

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for electrical work, plumbing, signs, wells, pools, furnaces, boilers, heaters, tanks, and air conditioners etc.

Owner's Affidavit: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER:

YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Must be signed by owner/Agent and applicant:

[Signature]
(Signature of contractor)

[Signature]
(Signature of Owner or Agent (including contractor))

State of Florida, County of St. Lucie

State of Florida, County of St. Lucie

Affirmed to and subscribed before me this 27th
March, 2023, by Devin Wheaton
personally known to me or who has produced

Affirmed to and subscribed before me this 27th March
2023, by Devin Wheaton
personally known to me or who has produced

as identification. DL

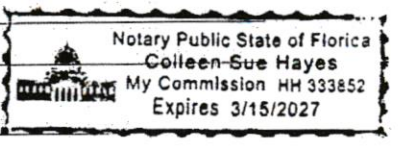
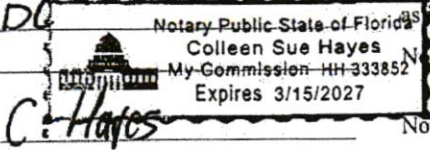
as identification. DL

Notary Signature: [Signature]

Notary Signature: [Signature]

Notary (print name) C. Hayes

Notary (print name) C. Hayes



Construction documents must accompany this application. The Florida energy code submitted becomes an integral part of this plan and must pass final inspection. "Notice: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public record of this county, and there may be additional permits required from other governmental entities such as waste management district, state agencies, or federal agencies. "SIGNATURE OF THE APPLICANT MUST BE NOTARIZED. If owner builder, applicant must sign in person. BUILDING PERMIT includes: Building, Electrical, Plumbing, Mechanical, and Sewer only. All other trades require separate applications.

Asbestos compliance: It is the owner's or operator's responsibility to comply with section 469.003, Florida Statutes, and to notify the Department of Environmental Protection of his or her intentions to remove asbestos, when applicable, in accordance with state and federal law.

FEE SIMPLE TITLEHOLDER, BONDING COMPANY AND MORTGAGE LENDER INFORMATION IS REQUIRED WHEN THE AGGREGATE VALUE (TOTAL COST OF ALL IMPROVEMENTS AND NOT JUST WORK AUTHORIZED BY THE INDIVIDUAL PERMIT) IS \$2500 OR MORE (EXCEPT HVAC REPAIR/REPLACEMENT < \$7500). PLEASE ADDRESS ALL ITEMS.

Fee Simple Titleholder's Same as Owner
Name (if other than owner): _____
Address: _____
City: _____ State: _____ Zip: _____

Bonding Company Not Applicable
Name: _____
Address: _____
City: _____ State: _____ Zip: _____

Mortgage Lender's Not Applicable
Name: _____
Address: _____
City: _____ State: _____ Zip: _____

OFFICE USE ONLY

Is the property located in a Special Flood Hazard Area (floodplain) per the current Flood Insurance Rate Map (FIRM)
 Yes No

Flood Zone: _____ Reviewed by: _____ Determination: _____

Permit Fee \$ _____ Other _____ \$ _____ Plan Review Fee \$ _____
State Surcharge \$ _____ Other _____ \$ _____ Routing Fee \$ _____
Subcontractor \$ _____ Flood Review Fee \$ _____ Other _____ \$ _____

Total Amount Due at Issuance \$ _____

DPCR# _____

Active Code Violation Yes No
Case # _____
Case Type _____



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BUILDING DEPARTMENT
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ftpbuilding@cityoffortpierce.com

PERMIT # 22-2972
FBC (2020) 7th Edition
PIN # 015104

Building Department Project Manager:
PROJECT MANAGER
CESAR

*Property Address 809 Delaware Avenue *Date 7/18/22
Parcel ID# 2410-709-0013-000-5 *# of plans submitted *# of CD's submitted
(Located on your tax bill)
*Owner Name Deen Properties LLC *Owner Address 7005 Kentucky Ave
Phone # (772) 464-2164 Fax # (772) 464-5716 Cell # (772) 979-6176
Email Address dzkrylbe@bellsouth.net

***Required Information**

Type of permit Commercial Renovation Valuation \$ 150,000.00
*Description of Work: HVAC, Electrical Plumbing and
Carpentry

RECEIVED

AUG 03 2022

Architect: Michael Menard Architectonic Inc.
Phone (772) 460-7751 Fax () - Email Address m.menard@architectonic.com
Engineer: FORT PIERCE ENGINEERING
Phone (772) 672-4636 Fax () - Email Address eric.svoboda@comcast.net

City of Fort Pierce
Building Department

***CONTRACTOR/APPLICANT INFORMATION:**

City License # State License #
Company Name TBD Qualifier
Address City/State Zip
Phone # () - Fax # () - Cell # () -
Email Address

Occupancy Comm Construction Type # of Units # of Stories 2
Sq. Ft. Conditioned Space Total Sq. Ft. 2100 sqft.

I understand that no building may be occupied until a Certificate of Occupancy/Certificate of Completion has been issued after final inspection by the Building Department and full compliance with the building code, city ordinances, state statutes and other applicable rules and regulations have been satisfied. I am also verifying that all sets of plans submitted are identical.

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for electrical work, plumbing, signs, wells, pools, furnaces, boilers, heaters, tanks, and air conditioners etc.

Owner's Affidavit: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER:

YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Must be signed by owner/Agent and applicant:

(Signature of contractor)

State of Florida, County of _____

Affirmed to and subscribed before me this _____

_____, 20____, by _____
personally known to me or who has produced
as identification. _____

Notary Signature: _____

Notary (print name) _____

Marryl S. Bey

(Signature of Owner of Agent (including contractor))

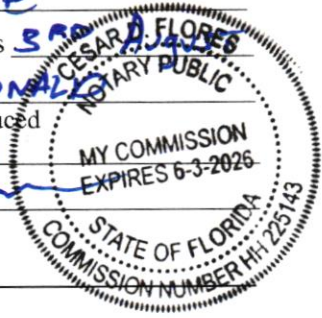
State of Florida, County of ST LUCIE

Affirmed to and subscribed before me this 5/20

2022, by THOMAS BEY RONALDO
personally known to me or who has produced
as identification. FLDL

Notary Signature: *[Signature]*

Notary (print name) _____



Construction documents must accompany this application. The Florida energy code submitted becomes an integral part of this plan and must pass final inspection. "Notice: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public record of this county, and there may be additional permits required from other governmental entities such as waste management district, state agencies, or federal agencies. "SIGNATURE OF THE APPLICANT MUST BE NOTARIZED. If owner builder, applicant must sign in person. BUILDING PERMIT includes: Building, Electrical, Plumbing, Mechanical, and Sewer only. All other trades require separate applications.

Asbestos compliance: It is the owner's or operator's responsibility to comply with section 469.003, Florida Statutes, and to notify the Department of Environmental Protection of his or her intentions to remove asbestos, when applicable, in accordance with state and federal law.

FEE SIMPLE TITLEHOLDER, BONDING COMPANY AND MORTGAGE LENDER INFORMATION IS REQUIRED WHEN THE AGGREGATE VALUE (TOTAL COST OF ALL IMPROVEMENTS AND NOT JUST WORK AUTHORIZED BY THE INDIVIDUAL PERMIT) IS \$2500 OR MORE (EXCEPT HVAC REPAIR/REPLACEMENT < \$7500). PLEASE ADDRESS ALL ITEMS.

Fee Simple Titleholder's Same as Owner
Name (if other than owner): _____
Address: _____
City: _____ State: _____ Zip: _____

Bonding Company Not Applicable
Name: _____
Address: _____
City: _____ State: _____ Zip: _____

Mortgage Lender's Not Applicable
Name: _____
Address: _____
City: _____ State: _____ Zip: _____

OFFICE USE ONLY

Is the property located in a Special Flood Hazard Area (floodplain) per the current Flood Insurance Rate Map (FIRM)

Yes No

Flood Zone: _____ Reviewed by: _____ Determination: _____

Permit Fee \$ 1875 Other change of cont \$ 50 Plan Review Fee \$ 750.00
State Surcharge \$ 26.25/39.38 Other _____ \$ _____ Routing Fee \$ _____
Subcontractor \$ 150 Flood Review Fee \$ _____ Other _____ \$ _____

Total Amount Due at Issuance \$ _____

DPCR# 22-20000613

Active Code Violation Yes No
Case # _____
Case Type _____



Debris Removal and Homeowners Association Affidavit

Owner: Kean Properties LLC
 Property Address: 809 Keelaware Avenue
 Permit # _____ Contractor: pending

As per City Ordinances 30-25, 24-19, 24-20, 24-21 and as a condition of obtaining any permit for construction, repair or renovation:

I understand and accept full responsibility for the prompt removal of all debris and construction materials from the property for which I am seeking to obtain a building permit in accordance with the Code of Ordinances of the City.

[Signature]
 Initials _____

I agree that no debris or construction materials will be placed on any public property or on any public right-of-way except as may be specifically authorized by the Code of Ordinances.

[Signature]
 Initials _____

I further understand that prior to a final inspection for the project completion or issuance of a Certificate of Occupancy (or Certificate of Completion), all debris and construction materials shall be removed from the property or the Inspector will not approve the final inspection. Additional reinspection fees shall apply.

[Signature]
 Initials _____

I understand and accept full responsibility for debris removal at my own expense in accordance with the City Code of Ordinances.

[Signature]
 Initials _____

I hereby acknowledge that I have read and understand the above statements and I further understand that any violation of the terms of this affidavit shall be reported to the City of Fort Pierce Building Department for action and possible stop work order.

[Signature]
 Initials _____

It is the owner and contractor's responsibility to verify approval for any work through the Homeowners Association and/or Condominium Association, if applicable. The City will not be held liable for disputes between the Homeowners Association, Condominium Association, owner and/or contractor.

[Signature]
 Initials _____

8/3/22
 Date

[Signature]
 Contractor or Owner/Builder's Signature



Affidavit of Plan Review Compliance

Permit # _____

I, Devin Wheaton, acting as owner or agent of the below named contractor, do hereby attest that I have reviewed and accept the applicable building permit procedures and submittal checklists, which are available online at <https://www.cityoffortpierce.com/991/Building-Permit-Procedures-and-Submittal> and at the City of Fort Pierce Building Department. Further, I attest that the submitted permit application, including attachments, drawings, or other requirements of the completed permit application as provided for on the applicable permit submittal checklist(s), accurately reflect the scope of work to be completed at

809 Delaware Ave

(please print street address)

Scope of work submitted:

- Building Electrical Flood Gas Mechanical Plumbing

I acknowledge that failure to submit an accurate scope of work may result in a technical code review rejection, even if the application is initially deemed complete by the Fort Pierce Building Department. Revision fees may apply for such rejections.

[Handwritten Signature]

Contractor Signature

[Handwritten Signature]

Owner or Agent Signature (including contractor)

STATE OF FLORIDA, COUNTY OF St. Lucie

STATE OF FLORIDA, COUNTY OF St. Lucie

C. Hayes

C. Hayes

NOTARY PUBLIC

NOTARY PUBLIC

The foregoing instrument was acknowledged before me

The foregoing instrument was acknowledged before me

this 27 day of March, 2023

this 27 day of March, 2023

by Devin Wheaton

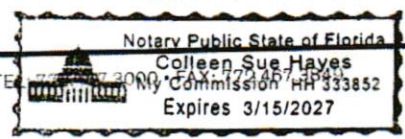
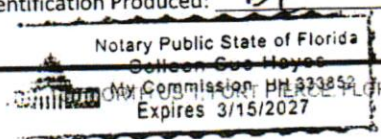
by Devin Wheaton

Personally Known ___ or Produced Identification DL

Personally Known ___ or Produced Identification DL

Type of Identification Produced: DL

Type of Identification Produced: DL





City of Fort Pierce Building Department

100 N. US Hwy. 1 – Fort Pierce, FL

PHONE (772) 467-3718

FAX (772) 467-3849

BUILDING PERMIT

Sub-Contractor Agreement
(\$25-Residential \$50-Commercial)

or

Change of Sub-Contractor Agreement
(\$25 per sub-contractor)

City of Fort Pierce License No: CACA 33571 Permit Number: _____

ALL MAJOR BRANDS CORP has agreed to be the HVAC sub-contractor for
(Name company acting as sub-contractor) (Type of Construction Trade)

Treasure Coast General Contractors for the property located at 809 Delaware Ave
(Name of the Primary Contractor) (Address of job site)

Owner of Property: Dean Properties LLC Job Cost: \$ _____

It is understood that if there is any change of status regarding my participation with the above mentioned project, I will immediately advise the City of Fort Pierce Building Department, and have my permit voided.

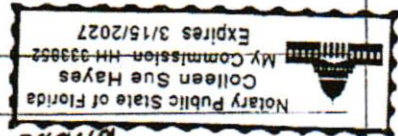
(Company acting as sub-contractor)

I acknowledge that I must carry Longshore Insurance if working on or adjoining navigable waters and that I meet all requirements of the Longshore & Harbor Workers' Compensation Act.

Qualifiers Signature: [Signature] GM Print Name: RICK KUCZYNSKI

State of Florida, County of St Lucie The foregoing instrument was acknowledged before me
This 27th day of March, 2023, by Devin Whenton who is
Personally known to me or who has produced [Signature] as identification.

Notary Signature: [Signature] [Seal]:



Business Name: A ALL BRANDS CORP

Address: 1901 Bio Vista Drive Ft. Pierce, FL 34949

Phone: () _____ Fax: () _____

To be Signed only when change in sub-contractor (along with all other above areas)

Building Contractor Signature: _____ Print Name: _____

Company Name (to be removed) _____

Sub-Contractor (to be removed) Signature: _____ Print Name: _____

Building Official Signature (if applicable): _____



City of Fort Pierce Building Department

100 N. US Hwy. 1 – Fort Pierce, FL

PHONE (772) 467-3718

FAX (772) 467-3849

BUILDING PERMIT

Sub-Contractor Agreement
(**\$25-Residential \$50-Commercial**)

or

Change of Sub-Contractor Agreement
(**\$25 per sub-contractor**)

City of Fort Pierce License No: 22-00031023 Permit Number: _____

Wavelength Electric, Inc Has agreed to be the Electrical sub-contractor for
(Name company acting as sub-contractor) (Type of Construction Trade)

Treasure Coast General Contractors for the property located at 809 Delaware Ave
(Name of the Primary Contractor) (Address of job site)

Owner of Property: Dean Properties LLC Job Cost: \$ _____

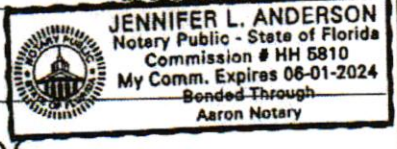
It is understood that if there is any change of status regarding my participation with the above mentioned project, I will immediately advise the City of Fort Pierce Building Department, and have my permit voided.

(Company acting as sub-contractor)

I acknowledge that I must carry Longshore Insurance if working on or adjoining navigable waters and that I meet all requirements of the Longshore & Harbor Workers' Compensation Act.

Qualifiers
Signature: [Signature] Print Name: David Ervin

State of Florida, County of Palm Beach The foregoing instrument was acknowledged before me
This 23 day of March, 2023, by David Ervin who is
Personally known to me or who has produced _____ as identification.

Notary
Signature: Jennifer J Anderson [Seal]: 

Business Name: Wavelength Electric, Inc
Address: 340 86th TER S, Royal Palm Beach, FL 33411
Phone: (561) 722-4553 Fax: () _____

To be Signed only when change in sub-contractor (along with all other above areas)

Building Contractor Signature: _____ Print Name: _____

Company Name (to be removed) _____

Sub-Contractor (to be removed) Signature: _____ Print Name: _____

Building Official Signature (if applicable): _____



City of Fort Pierce Building Department
 100 N. US Hwy. 1 – Fort Pierce, FL
 PHONE (772) 467-3718
 FAX (772) 467-3849

BUILDING PERMIT

Sub-Contractor Agreement (S25-Residential \$50-Commercial) or Change of Sub-Contractor Agreement (\$25 per sub-contractor)

City of Fort Pierce License No: CFC#1428462 Permit Number: _____

COASTAL PLUMBING SERVICES, INC. Has agreed to be the PLUMBING sub-contractor for
(Name of company acting as sub-contractor) (Type of Construction Trade)

Treasure Coast General Contractors for the property located at 809 Delaware Ave
(Name of the Primary Contractor) (Address of job site)

Owner of Property: Dean Properties LLC Job Cost: \$ _____

It is understood that if there is any change of status regarding my participation with the above mentioned project, I will immediately advise the City of Fort Pierce Building Department, and have my permit voided.

(Company acting as sub-contractor)

I acknowledge that I must carry Longshore Insurance if working on or adjoining navigable waters and that I meet all requirements of the Longshore & Harbor Workers' Compensation Act.

Qualifiers
 Signature: Chris Rogers Print Name: CHRIS ROGERS

State of Florida, County of St Lucie The foregoing instrument was acknowledged before me
 This 24th day of March, 2023, by Chris Rogers who is
 Personally known to me or who has produced _____ as identification.

Notary Signature: Tracy Carvalho [Seal]:

Business Name: COASTAL PLUMBING SERVICES, INC.

Address: 271 SW LAKEHURST DR. PSL, FL 34983

Phone: (772) 940-1144 Fax: () _____

To be Signed only when change in sub-contractor (along with all other above areas)

Building Contractor Signature: _____ Print Name: _____

Company Name (to be removed) _____

Sub-Contractor (to be removed) Signature: _____ Print Name: _____

Building Official Signature (if applicable): _____



SAINT LUCIE COUNTY FIRE DISTRICT
PLAN REVIEW FORM
5160 N.W. Milner Drive
Port Saint Lucie, FL 34983
Telephone: 772-621-3322
Fax: 772-621-3604
Web Address: www.slcfcd.com

Building Dept.	Ft Pierce	FMO Permit #	B-23-116
Project Name	Blue Bird Bistro & Gina's Bake Shop	BLDG Permit #	22-2972
Address	809 Delaware Avenue	City	Ft Pierce
Contractor	Treasure Coast General Contractors		
Address	1720 Copenhaver Rd	City	Ft Pierce
State	FL	Zip	34945
		Telephone	772-201-5426
Architect/Engineer	Architectonics Inc	Telephone	(772) 460-7751
Occupancy Type	Assembly	Construction Type	VB
		Square Feet	2267
Occupant Load	114 Per plans	Number of Stories	1
		Access Box	N/A
		Access Key Switch	N/A
AFS Permit	N/A	FA Permit	N/A
		FFP Permit	N/A

General Notes

1. An electronic copy of the construction documents submitted on a CD is required. The file format shall be .pdf only.
2. All revisions, including the electronic copy must be received prior to permitting.
3. The Fire Marshal requires 24 hour notice on all inspections.
4. A Radio coverage Pre-Survey Signal Strength inspection is required before any final inspection is scheduled.
5. The respective General Contractor and their Subcontractor shall schedule all final inspections through the Fire Marshal's Office.
6. Failed inspections require payment of fee prior to rescheduling of further inspections.
7. Penetrations through rated assemblies shall be of the proper UL design. Design criteria shall be submitted with the construction plans.
8. Fire alarm panels shall be located indoors within air conditioned space.
9. Plans and construction are subject to corrections in the field to maintain code compliance.
10. Automatic fan shutdown is required for HVAC system/s that exceed 2,000 cfm design capacity.
11. The Installation or Alteration of Fire Sprinklers, Fire Alarms, and Fixed Fire Protection Systems require a separate review and permit.

THE CURRENTLY ADOPTED EDITION OF THE FLORIDA FIRE PREVENTION CODE AND ST. LUCIE COUNTY FIRE PREVENTION CODE AND FEE SCHEDULE ARE ENFORCED.

BUILDINGS WITH LIGHT-FRAME TRUSS-TYPE CONSTRUCTION SHALL BE MARKED WITH APPROVED FIREFIGHTER SAFETY WARNING SIGNS IN ACCORDANCE WITH FLORIDA ADMINISTRATIVE CODES 69A-3.012 AND 69A-60.0081 PRIOR TO RECEIVING A CERTIFICATE OF OCCUPANCY.

See General Notes Above and Required Revisions Below

-ASSEMBLY OCCUPANCY OVER 100 REQUIRES PANIC HARDWARE ON THE EXIT DOORS
-PORTABLE FIRE EXTINGUISHERS TAGGED FROM A LICENSED CONTRACTOR ARE REQUIRED.
-FIRE EXTINGUISHERS REQUIRED EVERY 75' OF TRAVEL.
-EXIT AND EMERGENCY LIGHTING ARE REQUIRED



SAINT LUCIE COUNTY FIRE DISTRICT
 PLAN REVIEW FORM
 5160 N.W. Milner Drive
 Port Saint Lucie, FL 34983
 Telephone: 772-621-3322
 Fax: 772-621-3604
 Web Address: www.slcfcd.com

Building Dept. FMO Permit #

Project Name BLDG Permit #

Address City

Contractor

Address City

State Zip Telephone

Architect/Engineer Telephone

Occupancy Type Construction Type Square Feet

Occupant Load Number of Stories Access Box Access Key Switch

AFS Permit FA Permit FFP Permit

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8. Fire alarm panels shall be located indoors within air conditioned space.
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See General Notes Above and Required Revisions Below

1. Assembly occupancies with an occupant load greater than 100 persons require panic hardware or fire exit hardware on the required means of egress doors.
2. Portable fire extinguishers from a licensed contractor are required



Fort Pierce Utilities Authority
Water/Wastewater Engineering
1701 South 37th Street (PO Box 3191)
Fort Pierce, FL 34947 (34948)
772.466.1600 x3473

mnelson@fpu.com

July 14, 2022

SUBJECT: DPCR 22-20000613 Bistro Bake Shop-809 Delaware Ave Revised

W/WW Eng: The DPCR revised application for the Bistro Bake Shop is approved as noted.

Please contact Rob Eschmann FPUA's IPP FOG Specialist @ 772-466-1600 Ext: 5511 to complete the specification form, provide shop drawings and coordinate the inspection and installation of the grease trap.

The existing water meter to this location is currently in a meter box and is required to be moved above ground. An invoice for the cost of this new meter is attached; Please request this meter installation before opening the establishment.



[Meter Invoice.pdf](#)

Electric & Gas Eng: N/A

Solar: N/A



THE SUNRISE CITY

FORT PIERCE
BUILDING DEPARTMENT
Florida

Permit Conditions

THE ABOVE REFERENCED PERMIT HAS BEEN ISSUED WITH THE FOLLOWING CONDITIONS:

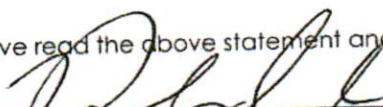
This building permit includes the main building, Electric, Plumbing, and Mechanical. All others require a separate permit:

1. Signs
2. Fences
3. Dumpster enclosure
4. Fire sprinklers
5. Fire alarms
6. Low voltage
7. Exhaust hoods
8. Irrigation
9. Fire suppression
10. Generators
11. Fuel tanks
12. Separate structures
13. Temporary trailers for office or construction
14. Temporary fence
15. Shutters if required (on repair permits only)
16. Site work
17. Parking lot paving/restriping
18. Refrigeration
19. Awnings
20. Gas
21. All tie in or replacement/modification of existing roof system, including roof mounted equipment.
22. Grease Trap
23. Tree Removal
24. Site Lighting
25. Retaining Walls
26. Work in the Right of Way (Engineering Department)

- **There may be others not on this list**

- **Please check with the City of Ft. Pierce Building Department to determine if a permit is needed**

I have read the above statement and will abide by same:



Contractor or Owner/Builder's Signature

3/23/23

Date



REVISION/RESUBMITTAL FORM

DPCR #: 22-0000613

or

Permit #: 22-2972

Date of Revision: _____

Project Manager: Mike Menard

Number of Plans: _____

Change in Valuation: _____

Revisions on plans must be clouded!

Commercial: (3 Sets of Signed & Sealed Plans w/CD)

Residential: (2 Sets Signed & Sealed Plans)

Project Name: Bistro Bake Shop

Project Address: 809 Kellawage Avenue

Contractor's Name: Treasure Coast Construction

Contact Person to Call/Email: Darryl Bey

Phone #: (772) 979-6176 Email: darrylbey@bellsouth.net

Detailed Description of Revision/Resubmittal: The revision is addressing the plan review comment for secondary means of egress from the second floor. Exterior stair added

RECEIVED

MAR 07 2023

City of Fort Pierce
Building Department

FEES:

- For DPCR projects, a \$15.00 routing fee will be charged for each department requiring review.
- For building permit projects, the following fees apply:

1ST REVISION:	JOB VALUE UNDER \$5,000	\$ 25.00 PER PAGE
	JOB VALUE OVER \$5,000	\$ 50.00 PER PAGE
2ND REVISION:	JOB VALUE UNDER \$5,000	\$ 50.00 PER PAGE
	JOB VALUE OVER \$5,000	\$ 100.00 PER PAGE
3RD OR MORE REVISION:	JOB VALUE UNDER \$5,000	\$ 100.00 PER PAGE
	JOB VALUE OVER \$5,000	\$ 200.00 PER PAGE

3rd REVISION OR MORE*: 4 TIMES THE PLAN REVIEW FEE ASSESSED
***IF ADDRESSING THE SAME DEFICIENCY/VIOLATION**



BUILDING DEPARTMENT
 P.O. BOX 1480, FORT PIERCE, FLORIDA 34954
 772-467-3718 FAX: 772-467-3849

PLAN REVIEW COMMENTS

DATE: 9/7/2022
 PERMIT #: 22-2972
 OWNER: DEAB PROPERTIES LLC
 CONTRACTOR: OWNER
 PROJECT ADDRESS: 809 DELAWARE AVE

Revisions: A Narrative and /or Cover Letter from the Architect/Engineer addressing each revision shall accompany all revisions submitted for plan review. The Narrative and/or Cover letter must:

- Answer each plan review comment.
- Indicate the sheet that the revision is on.
- The revised sheets that are re-submitted for plan review must have the revisions clouded



Please provide interior stair information per 1023. Fbc 2020
 Please provide exit access stairway 1019 fbc 2020
 Please provide means of egress for second floor per 1001 fbc 2020.

REVISION FEES ARE REQUIRED AT THE TIME OF SUBMISSION AS FOLLOWS:

1ST REVISION	JOB VALUE UNDER \$5,000	\$ 25.00 PER PAGE
	JOB VALUE OVER \$5,000	\$ 50.00 PER PAGE
2ND REVISION	JOB VALUE UNDER \$5,000	\$ 50.00 PER PAGE
	JOB VALUE OVER \$5,000	\$100.00 PER PAGE
3RD REVISION	JOB VALUE UNDER \$5,000	\$100.00 PER PAGE
	JOB VALUE OVER \$5,000	\$200.00 PER PAGE
3rd REVISION OR MORE (IF ADDRESSING SAME DEFICIENCY/VIOLATION)		4 TIMES PLAN REVIEW FEE ASSESSED

Reviewed/Signed By: Anthony Jetmore # 467-3453

Architectonic Inc

City of Fort Pierce
100 N. US #1
Fort Pierce, FL 34954

August 22, 2022

RE: Dean Properties LLC.
809 Delaware Ave.

Permit # 22-2972

To Whom It My Concern

Please accept the following responses to the comments dated 8/11/22 from your agency. Response shown on plans corresponding (if required) to these comments are noted.

COMMENT: Please provide manual J for new unit to be installed. FBC 107.2

Response: See attached

COMMENT: Please provide details on cooking equipment to be installed. FBC 107.2

Response: All kitchen equipment is electric

COMMENTS DATED 08-10-22

COMMENT: Please designate use / occupancy for entire building. 107.2

Response: See updated building information

COMMENT: Please change design loads 1607 fbc

Response: See revised loading sheet A-4

COMMENT: Please designate restaurant area to be a A2 107.2

Response: Already classified as A-2. See building information

Respectfully Submitted,

Michael Seal
Architectonic Inc.



Digitally signed
by Michael Seal

Date:

2022.08.22

16:12:02-04'00'



806 Delaware Ave, Fort Pierce FL 34950 | 772-460-7751
1790 A1A Ste 209, Satellite Beach FL 32937 | 321-732-4077



www.architectonicinc.com
AR96898

**Blue Bird Bistro - Gina's Bake Shop
HVAC Load Analysis**

for

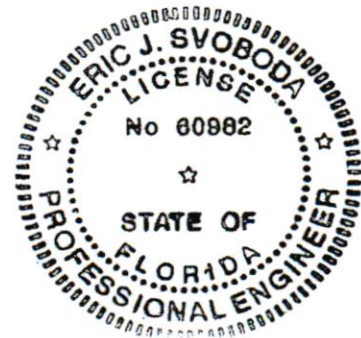
Blue Bird Bistro - Gina's Bake Shop
809 Delaware Ave.
Fort Pierce, Florida



CHVAC COMMERCIAL
HVAC LOADS

This item has been electronically signed and sealed by Eric J Svoboda, PE, using a SHA-1 authentication code. Printed copies of this document are not considered signed and sealed and the SHA-1 authentication code must be verified on any electronic copies.

Digitally signed
by Eric Svoboda
Date: 2022.05.11
09:36:18 -04'00'
Adobe Acrobat
version:
2022.001.20117



Prepared By:

Eric J. Svoboda, PE
Fort Pierce Engineering, Inc.
315 South 7th Street
Fort Pierce, FL 34950
772-672-4636
Tuesday, March 8, 2022



General Project Data Input

General Project Information

Project file name: Blue Bird Bistro Heat Load.CH8
 Project title: Blue Bird Bistro - Gina's Bake Shop
 Designed by: Eric J. Svoboda, PE
 Project date: Monday, July 07, 2008
 Weather reference city: FORT PIERCE, FLORIDA, USA
 Client name: Blue Bird Bistro - Gina's Bake Shop
 Client address: 809 Delaware Ave.
 Client city: Fort Pierce, Florida
 Company name: Fort Pierce Engineering, Inc.
 Company representative: Eric J. Svoboda, PE
 Company address: 315 South 7th Street
 Company city: Fort Pierce, FL 34950
 Company phone: 772-672-4636
 Company fax: 772-672-4637

Barometric pressure: 29.894 in.Hg.
 Altitude: 25 feet
 Latitude: 27 Degrees
 Mean daily temperature range: 15 Degrees
 Starting & ending time for HVAC load calculations: 7am - 10pm
 Number of unique rooms in this project: 5

Building Default Values

Calculations performed: Both heating and cooling loads
 Lighting requirements: 1.00 Watts per square foot
 Equipment requirements: 0.50 Watts per square foot
 People sensible load multiplier: 245 Btuh per person
 People latent load multiplier: 105 Btuh per person
 Room sensible safety factor: 0 %
 Room latent safety factor: 0 %
 Room heating safety factor: 0 %
 People diversity factor: 100 %
 Lighting profile number: 0
 Equipment profile number: 0
 People profile number: 0
 Building default ceiling height: 8.00 feet
 Building default wall height: 8.00 feet

Internal Operating Load Profiles (C = 100)

	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr	hr
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24		
1	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
2	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
3	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
4	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
5	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
6	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
7	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
8	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
9	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
10	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C



General Project Data Input (cont'd)

Building-Level Design Conditions

Design Month	Outdoor Dry Bulb	Outdoor Wet Bulb	Indoor Rel.Hum	Indoor Dry Bulb	Grains Diff	In/Outdoor Correction
August	90	78	50%	75	61.09	1
Winter	42			75		

Master Roofs

Roof No.	ASHRAE Roof#	Roof U-Fac	Dark Color	Susp. Ceil
1	1	0.033	No	No
Roof #1 Description: Metal Roof, R-30				

Master Walls

Wall No.	ASHRAE Group	Wall U-Fac	Wall Color
1	D	0.068	D
Wall #1 Description: Frame wall, wood/insulated metal framing, siding exterior, interior finish, R-13 batt insulation			

Master Glass

Glass No.	Summer U-Factor	Winter U-Factor	Glass Shd.Coef.	Interior Shading	Interior Shd.Coef
1	0.810	0.830	1.000	1	0.550
Glass #1 Description: Default Glass					

Master Shading Devices

Shade No.	Dist Horiz Overh Projects	Dist Beyond Right W.Edge	Dist Beyond Left W.Edge	Dist Overh Above Wind	Dist Right Fin Proj	Dist R-Fin Beyond W.Edge	Ht Of Right Fin	Dist Left Fin Proj	Dist L-Fin Beyond W.Edge	Ht Of Left Fin
1	30.00	5.00	5.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00



Building Summary Loads

Building peaks in August at 4pm.

Bldg Load Descriptions	Area Quan	Sen Loss	%Tot Loss	Lat Gain	Sen Gain	Net Gain	%Net Gain
Roof	1,094	1,191	5.35	0	1,275	1,275	2.11
Wall	939	2,107	9.46	0	1,420	1,420	2.35
Glass	173	4,738	21.27	0	13,318	13,318	22.06
Floor Slab	0	0	0.00	0	0	0	0.00
Skin Loads		8,037	36.07	0	16,014	16,014	26.52
Lighting	1,094	0	0.00	0	3,733	3,733	6.18
Equipment	2,352	0	0.00	0	8,025	8,025	13.29
Pool Latent	0	0	0.00	0	0	0	0.00
People	25	0	0.00	2,910	6,140	9,050	14.99
Partition	0	0	0.00	0	0	0	0.00
Cool. Pret.	0	0	0.00	0	0	0	0.00
Heat. Pret.	0	0	0.00	0	0	0	0.00
Cool. Vent.	400	0	0.00	16,604	6,594	23,198	38.42
Heat. Vent.	400	14,243	63.93	0	0	0	0.00
Cool. Infil.	0	0	0.00	0	0	0	0.00
Heat. Infil.	0	0	0.00	0	0	0	0.00
Draw-Thru Fan	0	0	0.00	0	355	355	0.59
Blow-Thru Fan	0	0	0.00	0	0	0	0.00
Reserve Cap.	0	0	0.00	0	0	0	0.00
Reheat Cap.	0	0	0.00	0	0	0	0.00
Supply Duct	0	0	0.00	0	0	0	0.00
Return Duct	0	0	0.00	0	0	0	0.00
Misc. Supply	0	0	0.00	0	0	0	0.00
Misc. Return	0	0	0.00	0	0	0	0.00
Building Totals		22,280	100.00	19,514	40,861	60,376	100.00

Building Summary	Sen Loss	%Tot Loss	Lat Gain	Sen Gain	Net Gain	%Net Gain
Ventilation	14,243	63.93	16,604	6,594	23,198	38.42
Infiltration	0	0.00	0	0	0	0.00
Pretreated Air	0	0.00	0	0	0	0.00
Room Loads	8,037	36.07	2,910	33,912	36,822	60.99
Plenum Loads	0	0.00	0	0	0	0.00
Fan/Duct/Misc Loads	0	0.00	0	355	355	0.59
Building Totals	22,280	100.00	19,514	40,861	60,376	100.00

Check Figures

Total Building Supply Air (based on a 21° TD):	1,485 CFM
Total Building Vent. Air (26.94% of Supply):	400 CFM
Total Conditioned Air Space:	1,094 Sq.ft
Supply Air Per Unit Area:	1.3572 CFM/Sq.ft
Area Per Cooling Capacity:	217.4 Sq.ft/Ton
Cooling Capacity Per Area:	0.0046 Tons/Sq.ft
Heating Capacity Per Area:	20.37 Btuh/Sq.ft
Total Heating Required With Outside Air:	22,280 Btuh
Total Cooling Required With Outside Air:	5.03 Tons



Air Handler #1 - PKG 1 - Summary Loads

Rm No	Description Room Peak Time	Area People Volume	Htg.Loss Htg.CFM CFM/Sqft	Sen.Gain Clg.CFM CFM/Sqft	Lat.Gain S.Exh W.Exh	Htg.O.A. Req.CFM Act.CFM	Clg.O.A. Req.CFM Act.CFM
1	Kitchen Utility 6pm August	120 1 960	544 27 0.23	2,814 120 1.00	200 0 0	Direct 44 27	Direct 44 32
2	Kitchen Prep 4pm August	270 2 2,160	1,605 80 0.30	10,571 451 1.67	400 0 0	Direct 99 80	Direct 99 121
3	Dining 4pm August	620 20 4,960	5,294 263 0.42	18,976 809 1.30	2,100 0 0	Direct 227 263	Direct 227 218
4	East RR 8am August	42 1 336	549 27 0.65	1,956 83 1.99	105 0 0	Direct 15 27	Direct 15 22
5	West RR 2pm August	42 1 336	46 2 0.05	515 22 0.52	105 0 0	Direct 15 2	Direct 15 6
	Room Peak Totals:	1,094	8,037	34,833	2,910		
	Total Rooms: 5	25	400	1,485	0	400	400
	Unique Rooms: 5	8,752	0.37	1.36	0	400	400



Air Handler #1 - PKG 1 - Total Load Summary

Air Handler Description: PKG 1 Constant Volume - Proportion
 Supply Air Fan: Draw-Thru with program estimated horsepower of 0.14 HP
 Fan Input: 0% motor and fan efficiency with 0 in. water across the fan
 Sensible Heat Ratio: 0.92 --- This system occurs 1 time(s) in the building. ---

Air System Peak Time: 4pm in August.
 Outdoor Conditions: Clg: 90° DB, 78° WB, 126.54 grains, Htg: 42° DB
 Indoor Conditions: Clg: 75° DB, 50% RH, Htg: 75° DB

Summer: Ventilation controls outside air, ---- Winter: Ventilation controls outside air.

Room Space sensible loss:	8,037 Btuh	
Infiltration sensible loss:	0 Btuh	0 CFM
Outside Air sensible loss:	14,243 Btuh	400 CFM
Supply Duct sensible loss:	0 Btuh	
Return Duct sensible loss:	0 Btuh	
Return Plenum sensible loss:	0 Btuh	
Total System sensible loss:		22,280 Btuh

Heating Supply Air: $8,037 / (.999 \times 1.08 \times 19) =$	400 CFM
Winter Vent Outside Air (100.0% of supply) =	400 CFM

Room space sensible gain:	33,912 Btuh	
Infiltration sensible gain:	0 Btuh	
Draw-thru fan sensible gain:	355 Btuh	
Supply duct sensible gain:	0 Btuh	
Reserve sensible gain:	0 Btuh	
Total sensible gain on supply side of coil:		34,267 Btuh

Cooling Supply Air: $34,267 / (.999 \times 1.1 \times 21) =$	1,485 CFM
Summer Vent Outside Air (26.9% of supply) =	400 CFM

Return duct sensible gain:	0 Btuh	
Return plenum sensible gain:	0 Btuh	
Outside air sensible gain:	6,594 Btuh	400 CFM
Blow-thru fan sensible gain:	0 Btuh	
Total sensible gain on return side of coil:		6,594 Btuh
Total sensible gain on air handling system:		40,861 Btuh

Room space latent gain:	2,910 Btuh	
Infiltration latent gain:	0 Btuh	
Outside air latent gain:	16,604 Btuh	
Total latent gain on air handling system:		19,514 Btuh
Total system sensible and latent gain:		60,376 Btuh

Check Figures

Total Air Handler Supply Air (based on a 21° TD):	1,485 CFM
Total Air Handler Vent. Air (26.94% of Supply):	400 CFM
Total Conditioned Air Space:	1,094 Sq.ft
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Total Heating Required With Outside Air:	22,280 Btuh
Total Cooling Required With Outside Air:	5.03 Tons

Florida Building Code, Seventh Edition (2020) - Energy Conservation

EnergyGauge Summit® Fla/Com-2020, Effective Date: Dec 31, 2020

C401.2.3: FBC Total Building Performance Compliance Option

Compliance applying the requirements of Sections C402.5, C403.2, C404, C405.2, C405.4, C405.5, C407 and C408. The building energy cost shall be equal to or less than 85 percent of the standard reference design building.

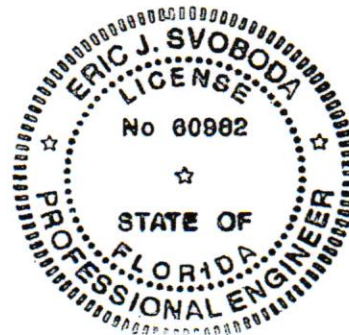
Check List

Applications for compliance with the Florida Building Code, Energy Conservation shall include:

- This Checklist
- The full compliance report generated by the software that contains the project summary, compliance summary, certifications and detailed component compliance reports.
- The compliance report must include the full input report generated by the software as contiguous part of the compliance report.
- Boxes appropriately checked in the Mandatory Section of the compliance report.

This item has been electronically signed and sealed by Eric J Svoboda, PE, using a SHA-1 authentication code. Printed copies of this document are not considered signed and sealed and the SHA-1 authentication code must be verified on any electronic copies.

Digitally signed
by Eric Svoboda
Date: 2022.05.11
09:35:28 -04'00'
Adobe Acrobat
version:
2022.001.20117



PROJECT SUMMARY

Short Desc: Blue Bird Bistro

Description: Blue Bird Bistro

Owner: Blue Bird Bistro

Address1: 809 Delaware Ave.

City: Fort Pierce

Address2:

State: FL

Zip: 34950

Type: Dining: Bar Lounge/Leisure

Class: Renovation to existing building

Jurisdiction: FORT PIERCE, ST LUCIE COUNTY, FL (661100)

Conditioned Area: 1094 SF

Conditioned & UnConditioned Area: 1094 SF

No of Stories: 1

Area entered from Plans 0 SF

Permit No: 0

Max Tonnage 5

If different, write in: _____

Compliance Summary

Component	Design	Criteria	Result
Gross Energy Cost (in \$)	1,045.0	1,165.0	PASSED
LIGHTING CONTROLS			PASSES
EXTERNAL LIGHTING			PASSES
HVAC SYSTEM			PASSES
PLANT			No Entry
WATER HEATING SYSTEMS			Not Checked
PIPING SYSTEMS			No Entry
Met all required compliance from Check List?			Yes/No/NA
 IMPORTANT MESSAGE			
Info 5009 -- -- -- An input report of this design building must be submitted along with this Compliance Report			

Project: Blue Bird Bistro
 Title: Blue Bird Bistro
 Type: Dining: Bar Lounge/Leisure
 (WEA File: FL_ST_LUCIE_CO_INTL.tm3)

Building End Uses

	1) Proposed	2) Baseline
Total	<i>65.10</i>	<i>85.60</i>
	<i>\$1,045</i>	<i>\$1,370</i>
ELECTRICITY(MBtu/kWh/\$)	<i>65.10</i>	<i>85.60</i>
	<i>19103</i>	<i>25095</i>
	<i>\$1,045</i>	<i>\$1,370</i>
AREA LIGHTS	<i>8.30</i>	<i>10.60</i>
	<i>2432</i>	<i>3116</i>
	<i>\$133</i>	<i>\$170</i>
MISC EQUIPMT	<i>10.90</i>	<i>10.90</i>
	<i>3206</i>	<i>3206</i>
	<i>\$175</i>	<i>\$175</i>
PUMPS & MISC	<i>0.10</i>	<i>0.10</i>
	<i>25</i>	<i>21</i>
	<i>\$1</i>	<i>\$1</i>
SPACE COOL	<i>28.50</i>	<i>38.70</i>
	<i>8360</i>	<i>11353</i>
	<i>\$457</i>	<i>\$620</i>
SPACE HEAT	<i>6.40</i>	<i>4.80</i>
	<i>1874</i>	<i>1396</i>
	<i>\$103</i>	<i>\$76</i>
VENT FANS	<i>10.90</i>	<i>20.50</i>
	<i>3206</i>	<i>6003</i>
	<i>\$175</i>	<i>\$328</i>

Credits Applied: None

Passing Criteria = 1165

Design (including any credits) = 1045

Passing requires Proposed Building cost to be at most 85% of Baseline cost. This Proposed Building is at 76.3%

PASSES

Project: Blue Bird Bistro
 Title: Blue Bird Bistro
 Type: Dining: Bar Lounge/Leisure
 (WEA File: FL_ST_LUCIE_CO_INTL.tm3)

External Lighting Compliance

Description	Category	Tradable?	Allowance (W/Unit)	Area or Length or No. of Units (Sqft or ft)	ELPA (W)	CLP (W)
Ext Light 1	Entry Canopies	Yes	0.40	1,050.0	420	480
Ext Light 2	Other (doors) than main entries	Yes	21.00	3.0	63	30

Tradable Surfaces: 510 (W) Allowance for Tradable: 983 (W)

PASSES

All External Lighting: 510 (W)

Compliance check includes a excess/Base allowance of 500.00(W)

Project: Blue Bird Bistro
 Title: Blue Bird Bistro
 Type: Dining: Bar Lounge/Leisure
 (WEA File: FL_ST_LUCIE_CO_INTL.tm3)

Lighting Controls Compliance

Acronym	Ashrae ID	Description	Area (sq.ft)	Design CP	Min CP	Compliance
Pr0ZolSp1	9	Food Service - Bar/Lounge	1,094	5	1	PASSES

PASSES

Project: Blue Bird Bistro
 Title: Blue Bird Bistro
 Type: Dining: Bar Lounge/Leisure
 (WEA File: FL_ST_LUCIE_CO_INTL.tm3)

Water Heater Compliance

Description	Type	Category	Design Eff	Min Eff	Design Loss	Max Loss	Compliance
Water Heater 1	Electric Storage water heater	Unknown	0.95				Not Checked
Not Checked							

Piping System Compliance

Category	Pipe Dia [inches]	Is Runout?	Operating Temp [F]	Ins Cond [Btu-in/hr .SF.F]	Ins Thick [in]	Req Ins Thick [in]	Compliance
None							

Mandatory Requirements (as applicable)

Requirements compiled by US Department of Energy and Pacific Northwest National Laboratory. Adopted for FBC with permission. Not all may be applicable

Topic	Section	Component	Description	Yes	N/A	Exempt
1. To be checked by Designer or Engineer						
Insulation	C303.2	Envelope	Below-grade wall insulation installed per manufacturer's instructions.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Insulation	C303.2	Envelope	Slab edge insulation installed per manufacturer's instructions.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Insulation	C303.2	Envelope	Above-grade wall insulation installed per manufacturer's instructions.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C402.3	Envelope	High-albedo roofs satisfy one of the following: 3-year-aged solar reflectance ≥ 0.55 and thermal emittance ≥ 0.75 or 3-year-aged solar reflectance index ≥ 64.0 .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fenestration	C402.4.4	Envelope	U-factor of opaque doors associated with the building thermal envelope meets requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.7	Mechanical	Exhaust air energy recovery on systems meeting Table C403.2.7(1) and C403.2.7(2).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.4.8	Mechanical	HVAC systems serving guestrooms in Group R-1 buildings with > 50 guestrooms: Each guestroom is provided with controls that automatically manage temperature setpoint and ventilation (see sections C403.2.4.8.1 and C403.2.4.8.2).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.3, C403.3.1, C403.3.2	Mechanical	Air economizers provided where required, meet the requirements for design capacity, control signal, ventilation controls, high-limit shut-off, integrated economizer control, and provide a means to relieve excess outside air during operation.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.3.2	Mechanical	Economizer operation will not increase heating energy use during normal operation.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.3.3.3	Mechanical	Air economizers automatically reduce outdoor air intake to the design minimum outdoor air quantity when outdoor air intake will not reduce cooling energy usage. See Table C403.3.3.3 for applicable device types and climate zones.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.3.3.4	Mechanical	System capable of relieving excess outdoor air during air economizer operation to prevent overpressurizing the building. The relief air outlet located to avoid recirculation into the building.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.3.3.5	Mechanical	Return, exhaust/relief and outdoor air dampers used in economizers have motorized dampers that automatically shut when not in use and meet maximum leakage rates. Reference section C403.2.4.3 for details.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.3.4, C403.3.4.1, C403.3.4.2, C403.3.1	Mechanical	Water economizers provided where required, meet the requirements for design capacity, maximum pressure drop and integrated economizer control.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.2.1	Mechanical	Three-pipe hydronic systems using a common return for hot and chilled water are not used.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.2.3.1	Mechanical	Hydronic heat pump systems connected to a common water loop meet heat rejection and heat addition requirements.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.3.2	Mechanical	Multiple-cell heat rejection equipment with variable speed fan drives are controlled to operate the maximum number of fans allowed and so that all fans operate at the same fan speed required for the instantaneous cooling duty. The minimum fan speed will be the minimum allowable speed of the fan drive system in accordance with the manufacturer's recommendations.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

SYSTEM_SPECIFIC	C403.4.3.4	Mechanical	Open-circuit cooling towers having water cooled chiller systems and multiple or variable speed condenser pumps, are designed so that tower cells can run in parallel with larger of flow criteria.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.4	Mechanical	Supply air systems serving multiple zones have VAV systems with controls configured to reduce the volume of air that is reheated, recooled or mixed in each zone. See section for details.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.4.1	Mechanical	Single-duct VAV systems use terminal devices configured to reduce the supply of primary supply air before reheating or recooling takes place.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.4.2	Mechanical	Systems that have 1 warm air duct and 1 cool air duct use terminal devices configured to reduce the flow from one duct to a minimum before mixing of air from the other duct takes place.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.4.3	Mechanical	Individual dual-duct or mixing heating and cooling systems with a single fan and with total capacities > 90,000 Btu/h not equipped with air economizers.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.2	Mechanical	Service water heating equipment meets efficiency requirements.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	Table_C403.3.2(8)a	Mechanical	Heat Rejection Equipment: Minimum Efficiency Requirement >=40.2 gpm/hp .	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	Table_C403.3.2(8)b	Mechanical	Heat Rejection Equipment: Minimum Efficiency Requirement >=20.0 gpm/hp.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	Table_C403.3.2(8)c	Mechanical	Heat Rejection Equipment: Minimum Efficiency Requirement >=16.1 gpm/hp.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	Table_C403.3.2(8)d	Mechanical	Heat Rejection Equipment: Minimum Efficiency Requirement >=7.0 gpm/hp	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	Table_C403.3.2(8)e	Mechanical	Heat Rejection Equipment: Minimum Efficiency Requirement >=134 kBtu/h-hp w/ Ammonia test fluid.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	Table_C403.3.2(8)f	Mechanical	Heat Rejection Equipment: Minimum Efficiency Requirement >=110 kBtu/h-hp w/ Ammonia test fluid.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	Table_C403.3.2(8)g	Mechanical	Heat Rejection Equipment: Minimum Efficiency Requirement >=157 kBtu/h-hp w/ R-507A test fluid.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	Table_C403.3.2(8)h	Mechanical	Heat Rejection Equipment: Minimum Efficiency Requirement >=135 kBtu/h-hp w/ R-507A test fluid.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	Table_C403.3.2(8)i	Mechanical	Heat Rejection Equipment: Minimum Efficiency Requirement >=176 kBtu/h-hp.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.12.1	Mechanical	HVAC fan systems at design conditions do not exceed allowable fan system motor nameplate hp or fan system bhp.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.12.2	Mechanical	HVAC fan motors not oversized beyond allowable limits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.12.3	Mechanical	Fans have efficiency grade (FEG) >= 67. The total efficiency of the fan at the design point of operation <= 15% of maximum total efficiency of the fan.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.12.4	Mechanical	Motors for fans that are not less than 1/12 hp and less than 1 hp are electronically commutated motors or have a minimum motor efficiency of 70 percent. These motors have the means to adjust motor speed.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.12.5	Mechanical	Each DX cooling system > 65 kBtu and chiller water/evaporative cooling system with fans > 1/4 hp are designed to vary the indoor fan airflow as a function of load and comply with detailed requirements of this section.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. To be checked by Plan Reviewer						
Plan Review	C103.2	Envelope	Plans and/or specifications provide all information with which compliance can be determined for the building envelope and document where exceptions to the standard are claimed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Plan Review	C103.2	Mechanical	Plans, specifications, and/or calculations provide all information with which compliance can be determined for the mechanical systems and equipment and document where exceptions to the standard are claimed. Load calculations per acceptable engineering standards and handbooks.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan Review	C103.2	Mechanical	Plans, specifications, and/or calculations provide all information with which compliance can be determined for the service water heating systems and equipment and document where exceptions to the standard are claimed. Hot water system sized per manufacturer's sizing guide.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan Review	C103.2	Interior Lighting	Plans, specifications, and/or calculations provide all information with which compliance can be determined for the interior lighting and electrical systems and equipment and document where exceptions to the standard are claimed. Information provided should include interior lighting power calculations, wattage of bulbs and ballasts, transformers and control devices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan Review	C103.2	Exterior Lighting	Plans, specifications, and/or calculations provide all information with which compliance can be determined for the exterior lighting and electrical systems and equipment and document where exceptions to the standard are claimed. Information provided should include exterior lighting power calculations, wattage of bulbs and ballasts, transformers and control devices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C402.2.5	Envelope	Slab edge insulation depth/length. Slab insulation extending away from building is covered by pavement or >= 10 inches of soil.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C402.2.4	Envelope	Installed floor insulation type and R-value consistent with insulation specifications reported in plans and COMcheck reports.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C402.2.6	Project	Radiant heating systems panels insulated to >=R-3.5 on face opposite space being heated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C402.2.6	Mechanical	Thermally ineffective panel surfaces of sensible heating panels have insulation >= R-3.5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C402.2.6	Envelope	Radiant panels and associated components, designed for heat transfer from the panel surfaces to the occupants or indoor space are insulated with a minimum of R-3.5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5.7	Envelope	Vestibules are installed on all building entrances. Doors have self-closing devices.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.13	Mechanical	Systems that heat outside the building envelope are radiant heat systems controlled by an occupancy sensing device or timer switch.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.4.2	Mechanical	Each zone equipped with setback controls using automatic time clock or programmable control system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.4.2	Mechanical	Each zone equipped with setback controls using automatic time clock or programmable control system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.4.2	Mechanical	Each zone equipped with setback controls using automatic time clock or programmable control system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.4.4	Mechanical	Zone isolation devices and controls installed where applicable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.4.4	Mechanical	Zone isolation devices and controls installed where applicable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.4.7	Mechanical	Fault detection and diagnostics installed with air-cooled unitary DX units having economizers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.5	Mechanical	Hot water boilers supplying heat via one- or two-pipe systems include outdoor setback control.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.6	Mechanical	Natural or mechanical ventilation is provided in accordance with International Mechanical Code Chapter 4. Mechanical ventilation has capability to reduce outdoor air supply to minimum per IMC Chapter 4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

HVAC	C403.2.6.1	Mechanical	Demand control ventilation provided for spaces >500 ft ² and >25 people/1000 ft ² occupant density and served by systems with air side economizer, auto modulating outside air damper control, or design airflow >3,000 cfm.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.12.5.1	Mechanical	Hydronic and multizone HVAC system controls are VAV fans driven by mechanical or electrical variable speed drive per Table C403.2.12.5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.12.5.3	Mechanical	Reset static pressure setpoint for DDC controlled VAV boxes reporting to central controller based on the zones requiring the most pressure.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.2	Mechanical	The heating of fluids in hydronic systems that have been previously mechanically cooled, and the cooling of fluids that have been previously mechanically heated are limited in accordance with Sections C403.4.2.1-C403.4.2.3. Single boiler systems >500,000 Btu/h have multistaged or modulating burner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.2.3.2	Mechanical	Closed-circuit cooling tower within heat pump loop have either automatic bypass valve or lower leakage positive closure dampers. Open-circuit tower within heat pump loop have automatic valve to bypass all heat pump water flow around the tower. Open- or closed-circuit cooling towers used in conjunction with a separate heat exchanger have heat loss by shutting down the circulation pump on the cooling tower loop. Open- or closed circuit cooling towers have a separate heat exchanger to isolate the cooling tower from the heat pump loop, and heat loss is controlled by shutting down the circulation pump on the cooling tower loop.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.2.4	Mechanical	Hydronic systems greater than 500,000 Btu/h designed for variable fluid flow. See section language for full details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.2.5	Mechanical	System turndown requirement met through multiple single-input boilers, one or more modulating boilers, or a combination of single-input and modulating boilers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.2.6	Mechanical	Boiler input between 1.0 MBtu/h and 5 MBtu/h has 3:1 turndown ratio, boiler input between 5.0 MBtu/h and 10 MBtu/h has 4:1 turndown ratio, boiler input > 10.0 MBtu/h has 5:1 turndown ratio. Chilled water plants with multiple chillers have capability to reduce flow automatically through the chiller plant when a chiller is shut down.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.3.1	Mechanical	Boiler plants with multiple boilers have the capability to reduce flow automatically through the boiler plant when a boiler is shut down. Fan systems with total system motor capacity >=5 hp associated with heat rejection equipment configured to automatically modulate the fan speed to control the leaving fluid temperature or condensing temp/pressure of heat rejection device.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.3.3	Mechanical	Centrifugal fan open-circuit cooling towers having combined rated capacity >= 1100 gpm meets minimum efficiency requirement: >=40.2 gpm/hp.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.4.5	Mechanical	Multiple zone HVAC systems have supply air temperature reset controls.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.4.6	Mechanical	Multiple zone VAV systems with DDC of individual zone boxes have static pressure setpoint reset controls.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SYSTEM_SPECIFIC	C404.2.1	Mechanical	Gas-fired water-heating equipment installed in new buildings: where a singular piece of water-heating equipment $\geq 1,000$ kBtu/h serves the entire building, thermal efficiency ≥ 90 Et. Where multiple pieces of water-heating equipment serve the building with combined rating $\geq 1,000$ kBtu/h, the combined input-capacity-weighted-average thermal efficiency ≥ 90 Et. Exclude input rating of equipment in individual dwelling units and equipment ≤ 100 kBtu/h.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.2.1	Mechanical	Gas-fired water-heating equipment installed in new buildings: where a singular piece of water-heating equipment $\geq 1,000$ kBtu/h serves the entire building, thermal efficiency ≥ 90 Et. Where multiple pieces of water-heating equipment serve the building with combined rating $\geq 1,000$ kBtu/h, the combined input-capacity-weighted-average thermal efficiency ≥ 90 Et. Exclude input rating of equipment in individual dwelling units and equipment ≤ 100 kBtu/h.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.4	Mechanical	All piping insulated in accordance with section details and Table C403.2.10.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.5, C404.5.1, C404.5.2	Mechanical	Heated water supply piping conforms to pipe length and volume requirements. Refer to section details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.6.3	Mechanical	Pumps that circulate water between a heater and storage tank have controls that limit operation from startup to ≤ 5 minutes after end of heating cycle.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.7	Mechanical	Demand recirculation water systems have controls that start the pump upon receiving a signal from the action of a user of a fixture or appliance and limits the temperature of the water entering the cold-water piping to 104°F .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wattage	C405.4.1	Exterior Lighting	Exterior lighting power is consistent with what is shown on the approved lighting plans, demonstrating proposed watts are less than or equal to allowed watts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan Review	C405.5.2	Project	Group R-2 dwelling units have separate electrical meters.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plan Review	C406	Project	Plans, specifications, and/or calculations provide all information with which compliance can be determined for the additional energy efficiency package options.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C408.2.2.2	Mechanical	HVAC hydronic heating and cooling coils have means to balance and have pressure test connections.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. To be checked by Inspector

Insulation	C303.1	Envelope	Roof insulation installed per manufacturer's instructions. Blown or poured loose-fill insulation is installed only where the roof slope is ≤ 3 in 12.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C303.1	Envelope	Building envelope insulation is labeled with R-value or insulation certificate providing R-value and other relevant data.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C402.2.2	Envelope	Insulation installed on a suspended ceiling having ceiling tiles is not being specified for roof/ceiling assemblies. Continuous insulation board installed in 2 or more layers with edge joints offset between layers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C402.2.2	Envelope	Skylight curbs are insulated to the level of roofs with insulation above deck or R-5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fenestration	C303.1.3	Envelope	Fenestration products rated in accordance with NFRC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C303.2, C402.2.5	Envelope	Floor insulation installed per manufacturer's instructions. Cavity or structural slab insulation installed in permanent contact with underside of decking or structural slabs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Insulation	C303.2.1	Envelope	Exterior insulation protected against damage, sunlight, moisture, wind, landscaping and equipment maintenance activities.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C303.2.1	Envelope	Exterior insulation is protected from damage with a protective material. Verification for exposed foundation insulation may need to occur during Foundation Inspection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C402.1.3	Envelope	Non-swinging opaque doors have R-4.75 insulation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C104	Envelope	Installed above-grade wall insulation type and R-value consistent with insulation specifications reported in plans and COMcheck reports.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C104	Envelope	Installed slab-on-grade insulation type and R-value consistent with insulation specifications reported in plans and COMcheck reports.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Insulation	C104	Envelope	Installed roof insulation type and R-value consistent with insulation specifications reported in plans and COMcheck reports. For some ceiling systems, verification may need to occur during Framing Inspection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5	Envelope	Building envelope contains a continuous air barrier that has been tested and deemed to limit air leakage ≤ 0.40 cfm/ft ² .	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5.1	Envelope	The building envelope contains a continuous air barrier that is sealed in an approved manner and either constructed or tested in an approved manner. Air barrier penetrations are sealed in an approved manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5.1.1	Envelope	All sources of air leakage in the building thermal envelope are sealed, caulked, gasketed, weather stripped or wrapped with moisture vapor-permeable wrapping material to minimize air leakage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5.1.2.1	Envelope	The building envelope contains a continuous air barrier that is sealed in an approved manner and material permeability ≤ 0.004 dfm/ft ² . Air barrier penetrations are sealed in an approved manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5.1.2.2	Envelope	The building envelope contains a continuous air barrier that is sealed in an approved manner and average assembly air leakage ≤ 0.04 cfm/ft ² . Air barrier penetrations are sealed in an approved manner.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5.2, C402.5.4	Envelope	Factory-built fenestration and doors are labeled as meeting air leakage requirements.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5.5, C403.2.4.3	Envelope	Stair and elevator shaft vents have motorized dampers that automatically close. Refer to section C403.2.4.3 for operational details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5.6	Envelope	Weatherseals installed on all loading dock cargo door openings and provide direct contact along the top and sides of vehicles parked in the doorway.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5.6	Envelope	Weatherseals installed on all loading dock cargo door openings and provide direct contact along the top and sides of vehicles parked in the doorway.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C402.5.8	Envelope	Recessed luminaires in thermal envelope to limit infiltration and be IC rated and labeled. Seal between interior finish and luminaire housing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.1	Mechanical	HVAC systems and equipment design loads calculated in accordance with ANSI/ASHRAE/ACCA Standard 183 or by an approved equivalent computational procedure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.10	Mechanical	HVAC piping insulation insulated in accordance with Table C403.2.10. Insulation exposed to weather is protected from damage and is provided with shielding from solar radiation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.3	Mechanical	HVAC equipment efficiency verified.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.3	Mechanical	PTAC and PTHP with sleeves 16 in. by 42 in. labeled for replacement only as per Footnote b to Table C403.2.3(3).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SYSTEM_SPECIFIC	C403.2.3	Mechanical	Centrifugal fan open-circuit cooling towers having combined rated capacity \geq 1100 gpm meets minimum efficiency requirement: \geq 38.2 gpm/hp.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.4.1	Mechanical	Heating and cooling to each zone is controlled by a thermostat control. Minimum one humidity control device per installed humidification/dehumidification system.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.4.1.1	Mechanical	Heat pump controls prevent supplemental electric resistance heat from coming on when not needed.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.4.1.2	Mechanical	Thermostatic controls have a 5 °F deadband.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.4.1.2	Mechanical	Thermostatic controls have a 5 °F deadband.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.4.1.3	Mechanical	Temperature controls have setpoint overlap restrictions.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.4.2.1, C403.2.4.2.2	Mechanical	Automatic Controls: Setback to 55°F (heat) and 85°F (cool); 7-day clock, 2-hour occupant override, 10-hour backup	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.4.2.3	Mechanical	Systems include optimum start controls.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.4.5, C403.2.4.6	Mechanical	Snow/ice melting system and freeze protection systems have sensors and controls configured to limit service for pavement temperature and outdoor temperature. future connection to controls.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.6.2	Mechanical	Enclosed parking garage ventilation has automatic contaminant detection and capacity to stage or modulate fans to 50% or less of design capacity.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Air Leakage	C403.2.4.3	Mechanical	Outdoor air and exhaust systems have motorized dampers that automatically shut when not in use and meet maximum leakage rates. Check gravity dampers where allowed. Reference section language for operational details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.9.1, C403.2.9.2	Mechanical	HVAC ducts and plenums insulated in accordance with C403.2.9.1 and constructed in accordance with C403.2.9.2, verification may need to occur during Foundation Inspection.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.12.5.2	Mechanical	VAV fans have static pressure sensors located so controller setpoint \leq 1.2 w.c..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.2.2	Mechanical	Two-pipe hydronic systems using a common distribution system have controls to allow a deadband \geq 15 °F, allow operation in one mode for at least 4 hrs before changeover, and have rest controls to limit heating and cooling supply temperature to \leq 30 °F.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.2.3.3	Mechanical	Two-position automatic valve interlocked to shut off water flow when hydronic heat pump with pumping system $>$ 10 hp is off.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.4.7	Mechanical	Parallel-flow fan-powered VAV air terminals have automatic controls configured to 1) turn off the terminal fan except when space heating is required or where required for ventilation, 2) turn on the terminal fan as the first stage of heating before the heating coil is activated, and 3) during heating for warmup or setback temperature control, either operate the terminal fan and heating coil without primary air or, reverse the terminal damper logic and provide heating from the central air handler by primary air.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.2.12.5.3	Mechanical	Systems with DDC of individual zones reporting to the central control panel configured to reset the static pressure setpoint based on zone requiring the most pressure. The DDC is capable of monitoring zone damper positions or have an alternative method of indicating the need for static pressure. See section for details.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SYSTEM_SPECIFIC	C403.2.12.5.2	Mechanical	Static pressure sensors used to control VAV fans located such that the controller setpoint is <= 1.2 inches w.c.. Where this results in one or more sensors being located downstream of major duct splits, not less than one sensor located on each major branch.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.5	Mechanical	Condenser heat recovery system that can heat water to 85 °F or provide 60% of peak heat rejection is installed for preheating of service hot water.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C403.4.6	Mechanical	Hot gas bypass limited to: <=240 kBtu/h – 50% >240 kBtu/h – 25%	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.3	Mechanical	Heat traps installed on supply and discharge piping of non-circulating systems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.6.1	Mechanical	Controls are installed that limit the operation of a recirculation pump installed to maintain temperature of a storage tank. System return pipe is a dedicated return pipe or a cold water supply pipe.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.6.1, C404.6.2	Mechanical	Automatic time switches installed to automatically switch off the recirculating hot-water system or heat trace.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.9.1	Mechanical	Pool heaters are equipped with on/off switch and no continuously burning pilot light.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.9.2	Mechanical	Time switches are installed on all pool heaters and pumps.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SYSTEM_SPECIFIC	C404.9.3	Mechanical	Vapor retardant pool covers are provided for heated pools and permanently installed spas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controls	C405.2.1, C405.2.1.1	Interior Lighting	Occupancy sensors installed in classrooms/lecture/training rooms, conference/meeting/multipurpose rooms, copy/print rooms, lounges/breakrooms, enclosed offices, open plan office areas, restrooms, storage rooms, locker rooms, warehouse storage areas, and other spaces <= 300 sqft that are enclosed by floor-to-ceiling height partitions. Reference section language C405.2.1.2 for control function in warehouses and section C405.2.1.3 for open plan office spaces.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controls	C405.2.1.2	Interior Lighting	Occupancy sensors control function in warehouses: In warehouses, the lighting in aiseways and open areas is controlled with occupant sensors that automatically reduce lighting power by 50% or more when the areas are unoccupied. The occupant sensors control lighting in each aisleway independently and do not control lighting beyond the aisleway being controlled by the sensor.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controls	C405.2.1.3	Interior Lighting	Occupant sensor control function in open plan office areas: Occupant sensor controls in open office spaces >= 300 sq.ft. have controls 1) configured so that general lighting can be controlled separately in control zones with floor areas <= 600 sq.ft. within the space, 2) automatically turn off general lighting in all control zones within 20 minutes after all occupants have left the space, 3) are configured so that general lighting power in each control zone is reduced by >= 80% of the full zone general lighting power within 20 minutes of all occupants leaving that control zone, and 4) are configured such that any daylight responsive control will activate space general lighting or control zone general lighting only when occupancy for the same area is detected.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controls	C405.2.2, C405.2.2.1, C405.2.2.2	Interior Lighting	Each area not served by occupancy sensors (per C405.2.1) have time-switch controls and functions detailed in sections C405.2.2.1 and C405.2.2.2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Controls	C405.2.2.2	Interior Lighting	Spaces required to have light-reduction controls have a manual control that allows the occupant to reduce the connected lighting load in a reasonably uniform illumination pattern >= 50 percent.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controls	C405.2.3, C405.2.3.1, C405.2.3.2	Interior Lighting	Daylight zones provided with individual controls that control the lights independent of general area lighting. See code section C405.2.3 Daylight-responsive controls for applicable spaces, C405.2.3.1 Daylight responsive control function and section C405.2.3.2 Sidelit zone.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controls	C405.2.4	Interior Lighting	Separate lighting control devices for specific uses installed per approved lighting plans.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wattage	C405.2.4	Interior Lighting	Additional interior lighting power allowed for special functions per the approved lighting plans and is automatically controlled and separated from general lighting.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Controls	C405.2.6	Exterior Lighting	Exterior lighting systems shall be provided with controls that comply with Sections C405.2.6.1 through C405.2.6.4. Decorative lighting systems shall comply with Sections C405.2.6.1, C405.2.6.2, and C405.2.6.4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wattage	C405.3.1	Interior Lighting	Interior installed lamp and fixture lighting power is consistent with what is shown on the approved lighting plans, demonstrating proposed watts are less than or equal to allowed watts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mandatory Additional	C406.4	Project	Enhanced digital lighting controls efficiency package: Interior lighting has following enhanced lighting controls in accordance with Section C405.2.2: Luminaires capable of continuous dimming and being addressed individually, <= 8 luminaires controlled in combination in a daylight zone, digital control system for fixtures, "Sequence of Operations" documentation, and functional testing per Section C408.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mandatory Additional	C406.6	Project	Dedicate outdoor air system efficiency package: Buildings with hydronic and/or multiple-zone HVAC systems are equipped with an independent ventilation system designed to provide >= 100-percent outdoor air to each individual occupied space, as specified by the IMC. The ventilation system is capable of total energy recovery and includes HVAC system controls that manage temperature resets >= 25 percent of delta design supply-air / room-air temp. Reference section C406.6 for qualifying systems/equipment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mandatory Additional	C406.7, C406.7.1	Project	Enhanced Service Water Heat System efficiency package. One of the following SWH system enhancements must satisfy 60 percent of buildings annual hot water requirements, or 100 percent if the building requirements otherwise complies with heat recovery per Section C403.9.5: Waste heat recovery (from SWH, process equipment, OR on-site renewable water-heating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C408.2.2.1	Mechanical	Air outlets and zone terminal devices have means for air balancing.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Testing	C408.2.3.2	Mechanical	HVAC control systems have been tested to ensure proper operation, calibration and adjustment of controls.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HVAC	C403.2.14, C403.2.14.1, C403.2.14.2	Mechanical	Commercial refrigerators, freezers, refrigerator-freezers and refrigeration equipment, defined in U.S. 10 CFR part 431.62, shall have an energy use in kWh/day not greater than the values of Table C403.2.14.1(1) when tested and rated in accordance with AHRI Standard 1200. Walk-in cooler and walk-in freezer refrigeration systems, except for walk-in process cooling refrigeration systems as defined in U.S. 10 CFR 431.302, shall meet the requirements of Tables C403.2.14.2(1), C403.2.14.2(2) and C403.2.14.2(3).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. To be checked by Inspector at Project Completion and Prior to Issuance of Certificate of Occupancy

Post Construction	C408.1.1, C408.2.5.2	Interior Lighting	Furnished O&M instructions for systems and equipment to the building owner or designated representative.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C408.1.1, C408.2.5.3	Mechanical	Furnished O&M manuals for HVAC systems within 90 days of system acceptance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fenestration	C402.4.2.2	Envelope	Skylights in office, storage, automotive service, manufacturing, non-refrigerated warehouse, retail store, and distribution/sorting area have a measured haze value > 90 percent unless designed to exclude direct sunlight.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C408.1.1	Project	Building operations and maintenance documents will be provided to the owner. Documents will cover manufacturers' information, specifications, programming procedures and means of illustrating to owner how building, equipment and systems are intended to be installed, maintained, and operated.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C408.2.1	Mechanical	Commissioning plan developed by registered design professional or approved agency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C408.2.3.1	Mechanical	HVAC equipment has been tested to ensure proper operation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C408.2.3.3	Mechanical	Economizers have been tested to ensure proper operation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C408.2.4	Mechanical	Preliminary commissioning report completed and certified by registered design professional or approved agency.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C408.2.5.1	Mechanical	Furnished HVAC as-built drawings submitted within 90 days of system acceptance.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C408.2.5.3	Mechanical	An air and/or hydronic system balancing report is provided for HVAC systems.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C408.2.5.4	Mechanical	Final commissioning report due to building owner within 90 days of receipt of certificate of occupancy.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C408.3	Interior Lighting	Lighting systems have been tested to ensure proper calibration, adjustment, programming, and operation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C405.6	Project	Low-voltage dry-type distribution electric transformers meet the minimum efficiency requirements of Table C405.6.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C405.7	Project	Electric motors meet the minimum efficiency requirements of Tables C405.7(1) through C405.7(4). Efficiency verified through certification under an approved certification program or the equipment efficiency ratings shall be provided by motor manufacturer (where certification programs do not exist).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C405.8.2, C405.8.2.1	Project	Escalators and moving walks comply with ASME A17.1/CSA B44 and have automatic controls configured to reduce speed to the minimum permitted speed in accordance with ASME A17.1/CSA B44 or applicable local code when not conveying passengers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Post Construction	C405.5.3	Project	Total voltage drop across the combination of feeders and branch circuits <= 5%.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Input Data Report

Project Information

Project Name: Blue Bird Bistro **Project Title:** Blue Bird Bistro
Address: 809 Delaware Ave. **State:** FL **Zip:** 34950
Owner: Blue Bird Bistro
Building Type: Dining: Bar Lounge/Leisure **Building Classification:** Renovation to existing building
No. of Stories: 1 **Gross Area (SF):** 1,094
Bldg. Rotation: None

Zones

No	Acronym	Description	Type	Area [sf]	Multi	Total Area [sf]	<input type="checkbox"/>
1	Pr0Zo1	Zone 1	CONDITIONED	1094.0	1	1094.0	<input type="checkbox"/>

Spaces

No	Acronym	Description	Type	Depth [ft]	Width [ft]	Height [ft]	Mult	Total Area [sf]	Total Vol[cf]	<input type="checkbox"/>
In Zone: Pr0Zo1										
1	Pr0Zo1Sp1	Zo0Sp1	Food Service - Bar/Lounge	40.00	27.35	8.00	1	1094.0	8752.0	<input type="checkbox"/>

Lighting

No	Type	Category	No. of Luminaires	Watts per Luminaire	Power [W]	Control Type	No. of Ctrl pts	<input type="checkbox"/>
In Zone: Pr0Zo1								
In Space: Pr0Zo1Sp1								
1	LED	General Lighting	1	794	794	Occupancy sensor without Daylighting	5	<input type="checkbox"/>

Walls (Walls will be rotated clockwise by building rotation value)

No	Description	Type	Width [ft]	H (Effec) [ft]	Multi plier	Area [sf]	Orient ation	Cond- uctance [Btu/h.sf.F]	Heat Capacity [Btu/sf.F]	Dens. [lb/cf]	R-Value [h.sf.F/Btu]	<input type="checkbox"/>
In Zone: Pr0Zo1												
1	Pr0Zo1Wa1	0.5 Ply/3 5/8"std@24"oc/R11/ 0.5" Gyp	28.00	8.00	1	224.0	North	0.0889	1.031	12.67	11.2	<input type="checkbox"/>
2	Pr0Zo1Wa2	0.5 Ply/3 5/8"std@24"oc/R11/ 0.5" Gyp	28.00	8.00	1	224.0	South	0.0889	1.031	12.67	11.2	<input type="checkbox"/>
3	Pr0Zo1Wa3	0.5 Ply/3 5/8"std@24"oc/R11/ 0.5" Gyp	40.00	8.00	1	320.0	East	0.0889	1.031	12.67	11.2	<input type="checkbox"/>
4	Pr0Zo1Wa4	0.5 Ply/3 5/8"std@24"oc/R11/ 0.5" Gyp	40.00	8.00	1	320.0	West	0.0889	1.031	12.67	11.2	<input type="checkbox"/>

Windows (Windows will be rotated clockwise by building rotation value)

No	Description	Orientation	Shaded	U [Btu/hr sf F]	SHGC	Vis.Tra	W [ft]	H (Effec) [ft]	Multi plier	Total Area [sf]	<input type="checkbox"/>
In Zone: Pr0Zo1											
In Wall: East											
1	Pr0Zo1Wa3Wi1	East	No	1.2500	0.82	0.76	3.00	5.00	3	45.0	<input type="checkbox"/>
In Wall: North											
1	Pr0Zo1Wa1Wi1	North	No	1.2500	0.82	0.76	4.00	3.50	1	14.0	<input type="checkbox"/>
In Wall: West											
1	Pr0Zo1Wa4Wi1	West	No	1.2500	0.82	0.76	6.00	5.00	2	60.0	<input type="checkbox"/>
2	Pr0Zo1Wa4Wi2	West	No	1.2500	0.82	0.76	8.00	5.00	1	40.0	<input type="checkbox"/>

Doors

No	Description	Type	Shade?	Width [ft]	H (Effec) [ft]	Multi plier	Area [sf]	Cond. [Btu/h.sf.F]	Dens. [lb/cf]	Ht Cap. [Btu/sf. F]	R [h.sf.F/ Btu]
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In Zone: Pr0Zo1

In Wall: North

1	Pr0Zo1Wa1Dr1	Solid core flush (1.75")	No	3.00	7.00	1	21.0	0.6061	0.00	0.00	1.65	<input type="checkbox"/>
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In Wall: South

1	Pr0Zo1Wa2Dr1	Solid core flush (1.75")	No	3.00	7.00	1	21.0	0.6061	0.00	0.00	1.65	<input type="checkbox"/>
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Roofs

No	Description	Type	Width [ft]	H (Effec) [ft]	Multi plier	Area [sf]	Tilt [deg]	Cond. [Btu/h.Sf. F]	Heat Cap [Btu/sf. F]	Dens. [lb/cf]	R-Value [h.sf.F/Btu]
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In Zone: Pr0Zo1

1	Pr0Zo1Rf1	Mtl Bldg Roof/R-30	27.35	40.00	1	1094.0	0.00	0.0330	1.44	7.09	30.3	<input type="checkbox"/>
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Skylights

No	Description	Type	U [Btu/hr sf F]	SHGC	Vis.Trans	W [ft]	H (Effec) [ft]	Multi- plier	Area [Sf]	Total Area [Sf]
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In Zone:

In Roof:

Floors

No	Description	Type	Width [ft]	H (Effec) [ft]	Multi plier	Area [sf]	Cond. [Btu/h.sf.F]	Heat Cap. [Btu/sf. F]	Dens. [lb/cf]	R-Value [h.sf.F/Btu]	<input type="checkbox"/>
In Zone: Pr0Zo1											
1	Pr0Zo1F11	1 ft. soil, concrete floor, carpet and rubber pad	27.35	40.00	1	1094.0	0.2681	34.00	113.33	3.73	<input type="checkbox"/>

Systems

Pr0Sy1	System 1	Constant Volume Packaged System	No. Of Units		
			1		
Component	Category	Capacity	Efficiency	IPLV	<input type="checkbox"/>
1	Cooling System	60000.00	17.10	8.00	<input type="checkbox"/>
2	Heating System	51000.00	1.00		<input type="checkbox"/>
3	Air Handling System -Supply	1800.00	0.41		<input type="checkbox"/>
4	Air Distribution System (Sup)		6.00		<input type="checkbox"/>
5	Air Distribution System (Ret)		6.00		<input type="checkbox"/>

Plant

Equipment	Category	Size	Inst.NEff.	IPLV

Water Heaters

W-Heater Description	Capacity	Cap.Unit	I/P Rt.	Efficiency	Loss	<input type="checkbox"/>
1 Electric Storage water heater (1 units)	30 [Gal]		5 [kW]	0.9500 [Ef]	[Btu/h]	<input type="checkbox"/>

Ext-Lighting

No.	Description	Category	No. of Luminaires	Watts per Lumin-	Area/Len/No [sf/ft/No]	Control Type	Wattage [W]
1	Ext Light 1	Entry Canopies	24	20	1050.00	Photo Sensor contr	##### <input type="checkbox"/>
2	Ext Light 2	Other (doors) than main entries	1	30	3.00	Photo Sensor contr	30.00 <input type="checkbox"/>

Piping

No	Type	Operating Temp [F]	Insulation Conductivity [Btu-in/h.sf.F]	Nomonal pipe Diameter [in]	Insulation Thickness [in]	Is Runout?
						<input type="checkbox"/>

Fenestration Used

Name	Glass Type	No. of Panes	Glass Conductance [Btu/h.sf.F]	SHGC	VLT
ASHULSglClrAl lFrm	User Defined	1	1.2500	0.8200	0.7600

Materials Used

Mat No	Acronym	Description	Only R-Value Used	RValue [h.sf.F/Btu]	Thick [ft]	Cond-uctivity [Btu/h.ft.F]	Density [lb/cf]	Sp. Heat [Btu/lb.F]	
187	Matl187	GYP OR PLAS BOARD,1/2IN	No	0.4533	0.0417	0.0920	50.00	0.2000	<input type="checkbox"/>
178	Matl178	CARPET W/RUBBER PAD	Yes	1.2300					<input type="checkbox"/>
265	Matl265	Soil, 1 ft	No	2.0000	1.0000	0.5000	100.00	0.2000	<input type="checkbox"/>
48	Matl48	6 in. Heavyweight concrete	No	0.5000	0.5000	1.0000	140.00	0.2000	<input type="checkbox"/>
12	Matl12	3 in. Insulation	No	10.0000	0.2500	0.0250	2.00	0.2000	<input type="checkbox"/>
23	Matl23	6 in. Insulation	No	20.0000	0.5000	0.0250	5.70	0.2000	<input type="checkbox"/>
278	Matl278	Solid core flush (1.75")	Yes	1.6500					<input type="checkbox"/>
94	Matl94	BUILT-UP ROOFING, 3/8IN	No	0.3366	0.0313	0.0930	70.00	0.3500	<input type="checkbox"/>
245	Matl245	PLYWOOD, 5/8IN	No	0.7894	0.0521	0.0660	34.00	0.2900	<input type="checkbox"/>

Constructs Used

No	Name	Simple Construct	Massless Construct	Conductance [Btu/h.sf.F]	Heat Cap [Btu/sf.F]	Density [lb/cf]	RValue [h.sf.F/Btu]	<input type="checkbox"/>
1015	0.5 Ply/3 5/8"std@24"oc/R11/0.5" Gyp	No	No	0.09	1.03	12.67	11.2	<input type="checkbox"/>
	Layer	Material No.	Material	Thickness [ft]	Framing Factor			<input type="checkbox"/>
	1	245	PLYWOOD, 5/8IN	0.0521	0.000			<input type="checkbox"/>
	2	12	3 in. Insulation	0.2500	0.000			<input type="checkbox"/>
	3	187	GYP OR PLAS BOARD,1/2IN	0.0417	0.000			<input type="checkbox"/>
No	Name	Simple Construct	Massless Construct	Conductance [Btu/h.sf.F]	Heat Cap [Btu/sf.F]	Density [lb/cf]	RValue [h.sf.F/Btu]	<input type="checkbox"/>
1027	Solid core flush (1.75")	No	Yes	0.61			1.7	<input type="checkbox"/>
	Layer	Material No.	Material	Thickness [ft]	Framing Factor			<input type="checkbox"/>
	1	278	Solid core flush (1.75")		0.000			<input type="checkbox"/>
No	Name	Simple Construct	Massless Construct	Conductance [Btu/h.sf.F]	Heat Cap [Btu/sf.F]	Density [lb/cf]	RValue [h.sf.F/Btu]	<input type="checkbox"/>
1056	Mtl Bldg Roof/R-30	No	No	0.03	1.44	7.09	30.3	<input type="checkbox"/>
	Layer	Material No.	Material	Thickness [ft]	Framing Factor			<input type="checkbox"/>
	1	94	BUILT-UP ROOFING, 3/8IN	0.0313	0.000			<input type="checkbox"/>
	2	23	6 in. Insulation	0.5000	0.000			<input type="checkbox"/>
	3	12	3 in. Insulation	0.2500	0.000			<input type="checkbox"/>
No	Name	Simple Construct	Massless Construct	Conductance [Btu/h.sf.F]	Heat Cap [Btu/sf.F]	Density [lb/cf]	RValue [h.sf.F/Btu]	<input type="checkbox"/>
1057	1 ft. soil, concrete floor, carpet and rubber pad	No	No	0.27	34.00	113.33	3.7	<input type="checkbox"/>
	Layer	Material No.	Material	Thickness [ft]	Framing Factor			<input type="checkbox"/>
	1	265	Soil, 1 ft	1.0000	0.000			<input type="checkbox"/>
	2	48	6 in. Heavyweight concrete	0.5000	0.000			<input type="checkbox"/>
	3	178	CARPET W/RUBBER PAD		0.000			<input type="checkbox"/>



BUILDING DEPARTMENT
 P.O. BOX 1480, FORT PIERCE, FLORIDA 34954
 772-467-3000 FAX: 772-467-3849

PLAN REVIEW COMMENTS

DATE: 8/11/22
 PERMIT #: 22-2972
 OWNER: DEAN PROPERTIES LLC.
 CONTRACTOR: TBD
 PROJECT ADDRESS: 809 DELAWARE AVE.

Revisions: A Narrative and /or Cover Letter from the Architect/Engineer addressing each revision shall accompany all revisions submitted for plan review. The Narrative and/or Cover letter must:

- Answer each plan review comment.
- Indicate the sheet that the revision is on.
- The revised sheets that are re-submitted for plan review must have the revisions clouded



1. Please provide manual J for new unit to be installed. FBC 107.2
2. Please provide details on cooking equipment to be installed. FBC 107.2

REVISION FEES ARE REQUIRED AT THE TIME OF SUBMISSION AS FOLLOWS:

1 ST REVISION	JOB VALUE UNDER \$5,000	\$ 25.00 PER PAGE
	JOB VALUE OVER \$5,000	\$ 50.00 PER PAGE
2 ND REVISION	JOB VALUE UNDER \$5,000	\$ 50.00 PER PAGE
	JOB VALUE OVER \$5,000	\$100.00 PER PAGE
3 RD REVISION	JOB VALUE UNDER \$5,000	\$100.00 PER PAGE
	JOB VALUE OVER \$5,000	\$200.00 PER PAGE
3 rd REVISION OR MORE (IF ADDRESSING SAME DEFICIENCY/VIOLATION)		4 TIMES PLAN REVIEW FEE ASSESSED

Reviewed/Signed By: Logan Winn 772-263-1053



PLAN REVIEW COMMENTS

REVIEW FOR COMPLETENESS APPROVED REJECTED

TECHNICAL CODE REVIEW APPROVED REJECTED

DPCR REVISION APPROVAL IS REQUIRED PRIOR TO SUBMITTING A REVISION TO THE BUILDING PERMIT: YES NO

DATE: 08-10-22

PERMIT #: 22-2972

OWNER: DEAN PROPERTIES LLC

CONTRACTOR: OWNER

PROJECT ADDRESS: 809 DELAWARE AVE

Effective October 1, 2021:

If your project went through Development Permit Compliance Review (DPCR), all revision shall be submitted for DPCR review prior to being re-submitted under the building permit. Do not submit revisions until all review comments are addressed (No piecemeal will be accepted).

Revisions: A Narrative and /or Cover Letter from the Architect/Engineer addressing each revision shall accompany all revisions submitted for plan review. The Narrative and/or Cover letter must:

- Answer each plan review comment.
- Indicate the sheet that the revision is on.
- The revised sheets that are re-submitted for plan review must have the revisions clouded

1. Please designate use / occupancy for entire building. 107.2 fbc
2. Please change design loads 1607 fbc
3. Please designate restaurant area to be a A2 107.2
- 4.

Reviewed/Signed By: _____Anthony Jetmore_____772-882-5078

REVISION FEES ARE REQUIRED AT THE TIME OF SUBMISSION AS FOLLOWS:

	JOB VALUE UNDER \$5000	JOB VALUE OVER \$5000
1 ST Revision	\$25.00 per page	\$50.00 per page
2 nd Revision	\$50.00 per page	\$100.00 per page
3 rd Revision	\$100.00 per page	\$200.00 per page

3rd Revision or More 4 times the plan review fee assessed if addressing the same deficiency/violation



Miami-Dade (Corporate) Office
 343 Almeria Avenue
 Coral Gables, FL 33134
 Phone: 305.448.1711

Broward Office
 100 SE 12th Street
 Fort Lauderdale, FL 33316
 Phone: 954.888.9882

Palm Beach Office
 1910 North Florida Mango Road
 West Palm Beach, FL 33409
 Phone: 561.508.0615

809 DELAWARE AVE
 Electronic Plan Review Results

Project Information

Phase 100% Construction Documents **A/E:** ARCHITECTONIC INC
Submittal:
Facility Name: BLUE BIRD BISTRO & GINA'S BAKE **Plans Dated:** 05/11/2022
 SHOP
Project Name: 809 DELAWARE AVE **Plans Received:** 8/11/22
Project No: 22-2972 **Review:** 8/17/22
Building Code: FBC2020 **Completed:**
Review Status: Review Cycle Closed Out - Awaiting administrative approval
Project Description: ELECTRICAL REVIEW ONLY

Plan Review Summary

Discipline	Status	Reviewer	Email	Phone	License
00) Structural	Not Applicable				
01) Building	Not Applicable				
02) Mechanical	Not Applicable				
03) Electrical	Approved	Greg Hustad	ghustad@capfla.com	3054481711	
04) Plumbing	Not Applicable				
05) Gas	Not Applicable				
06) Engineering/Civil	Not Applicable				
07) Fire	Not Applicable				
08) Roofing	Not Applicable				
09) Planning/Zoning	Not Applicable				
10) Landscape	Not Applicable				
11) Flood Plain	Not Applicable				
12) CRA	Not Applicable				
Admin-Stamp	Not Applicable				

Plans and specifications review is performed in accordance with the Florida Building Code, Florida Statutes and all applicable codes.

Open Issues: 0

No open Issues Found

Closed Issues: 0

No closed Issues Found

RE: 809 DEALWARE AVE - 22-20000613

Maria Lewicka <mlewicka@cityoffortpierce.com>

Mon 6/13/2022 11:03 AM

To: Cesar Flores <cflores@cityoffortpierce.com>; **Planning Department**
<planning@cityoffortpierce.com>; Deborah Savrda <savrda@fpua.com>; Melody Nelson <mnelson@fpua.com>
Cc: darrylbey <darrylbey@bellsouth.net>

Good morning,
The referenced application is approved.

From: Cesar Flores <cflores@cityoffortpierce.com>

Sent: Monday, June 13, 2022 10:36 AM

To: Planning Department <planning@cityoffortpierce.com>; Deborah Savrda <savrda@fpua.com>;
Melody Nelson <mnelson@fpua.com>

Cc: darrylbey <darrylbey@bellsouth.net>

Subject: 809 DEALWARE AVE - 22-20000613

Good morning,

Link to CoreShare: <https://core.opentext.com/views/folder/public/viewFolder.html?shortLink=118de1a774132abf16123bc3c4fd6c80946612933c0b5cfb>

Reviewers: The attached application/plan(s) have been submitted for your review. Paper plans, if applicable, have been routed via inter-office mail. Upon completion of your review, enter your approval, approval with conditions, or rejection with comments into Naviline. Also, "Reply All" to this email with your approval, approval with condition(s), or rejection with comments. Please do not return any paper plans to the Building Department.

Applicant: This email is being provided for your information and tracking purposes. All the review agencies above will reply to this email with their approval, approval with conditions, or rejection with comments. Upon approval from all required departments, you'll receive a final approval email from the Building Department advising of the status of your review and ability to apply for the building permit. In the event of a rejection, please wait until you receive all review comments before submitting revisions.

Thank you!

Tell us how we are doing! Customer Service is a Priority for the City of Fort Pierce. Please take a moment to complete our customer service survey by following this link: <http://www.cityoffortpierce.com/FormCenter/Building-6/Building-Department-Customer-Service-Fee-73>

Cesar Flores | Permit Specialist | City of Fort Pierce

Phone: 772.467.3724 Fax: 772.467-3849 100 North U.S. 1 Fort Pierce, FL 34950

[Website](#) | [Facebook](#) | [Survey](#)