

Form K104.1
COVER SHEET FOR PLANS SUBMISSIONS
Page #1 of 2

PROJECT NAME: _____

PROJECT ADDRESS: _____

PROJECT DESCRIPTION (Scope of Work:) _____

PROJECT CONTACT PERSON: (Registered Architect or Engineer in Responsible Charge)

ARCHITECTS/ENGINEERS/LANDSCAPE ARCHITECTS: List all names and pertinent information for each registrant (architect, engineers, and landscape architect) involved in the project. Include each engineering discipline represented in the project (civil, electrical, mechanical, plumbing, and structural).

Name: _____

Company Name _____

Phone _____

Email _____

Tennessee License Number _____

Design Codes/Edition _____

Construction Type _____

Occupancy Group(s) _____

Number of Stories (excluding basement unless educational or assembly occupancy) _____

Building Height (measured from grade plane to average height of highest roof surface) _____

Building Area Per Story Existing _____ Proposed _____

Occupant Load Per Floor _____ Required Exit Width Per Floor _____

Number of Parking Spaces Required _____ Proposed _____ Handicapped _____ Van _____

NOTE: Plans submitted for the following must be stamped by a state registered architect or engineer:
Assembly, Educational, or Institutional Occupancies, Buildings or Spaces 5000 sq. ft or more in total gross area,
Work within buildings 3 or more stories in height.

Form K104.1
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Page #2 of 2

If your permit application includes an educational occupancy, daycare, or institutional occupancy, approved plans from the Tennessee State Fire Marshal Office (TSFMO) are required to be submitted with the permit application. If the TSFMO chooses not to review the project, a no review letter from the TSFMO must be provided.

Fire Protection hourly ratings for all structural components and separation of hazards components required by the applicable building code.

_____ Columns _____ Beams _____ Walls
_____ Floor/Ceiling _____ Roof/Ceiling _____ Roof Covering
_____ Corridors _____ Shaft Enclosures _____ Stair Enclosure
_____ Tenant Separations _____ Occupancy Separations

Sprinkler System Type: _____ Standpipe System: _____

Fire/Smoke Alarm System: _____

WATER SUPPLY DATA (FROM NEAREST HYDRANT TO SITE)

Provide the following flow test data on the plans for hydrant(s) used to meet the 400 feet or less hose lay requirement in accordance with the Knox County Fire Prevention Bureau.

Show flow test data next to the hydrant tested. Flow test must have been conducted within the last six months from start of design process.

Static pressure _____ psi Residual pressure _____ psi (20 psi minimum)

Flow _____ gpm (500 gpm minimum)

TN Department of Environment and Conservation Rules and Regulations 1200-5-1-17 paragraph 18.

Party responsible for hydrant test (name and address) _____

Date test taken: _____

Time test taken: _____ am/pm

Elevation of test hydrant _____

General Notes:

- Identify use of rooms and spaces
- Show area increase calculations
- Show wall ratings on structural, mechanical, plumbing, electrical, and fire protection drawings
- Provide design live load values on plans for wind, snow, roof, floor, stairs, guard and hand railings, and seismic
- Identify any exceptions/appeals/equivalencies and authority granting approval.