



COMMERCIAL COOKING HOOD SUPPRESSION SYSTEM CONSTRUCTION PERMIT

806 WEST MAIN STREET • MONROE, WA 98272
City Hall 360.794.7400 • building@monroewa.gov
www.monroewa.gov



SUBMITTAL REQUIREMENTS PER IFC 105.7.1

THE PURPOSE OF THIS CHECKLIST IS TO DETERMINE COMPLETENESS OF A SUBMITTAL. THE CHECKLIST DOES NOT VERIFY THE ACCURACY OF MATERIALS RECEIVED.

INSTRUCTIONS:

Below is a checklist of items that must be submitted as part of your application for a Commercial Cooking Hood Suppression System Construction Permit. If you have any questions about what is required, or if you would like to schedule an intake appointment, please call the Permit Division at (360) 863-4501.

This application requires full plan review and is not available as an over-the-counter permit.

SCOPE OF WORK

- Installation of a commercial cooking hood suppression system
- Modification of a commercial cooking hood suppression system (maintenance exempt)

REQUIRED DOCUMENTS CHECKLIST

- Combined Permit Application
- Copy of factory training certificate for system designer
- Copy of manufacturer's instructions (to be issued with permit)
- Copies of a scaled floor plan showing compliance with IFC 2015 904
 - System location
 - Cooking appliances
 - Exhaust hood
 - Manual pull station
 - Class K fire extinguisher
 - Note indicating deferred submittal for fire alarm permit if building is so equipped
 - Note stating that system shall be installed, serviced, and maintained in accordance with NFPA 17/17A, NFPA 96, and manufacturer's instructions
 - Note stating that only factory trained personnel are permitted to install the system
 - Sequence of operation including fuel/electricity/exhaust/makeup air interlocks
- Copies of equipment technical data sheets
- Copies of isometric plans showing location and type of nozzles, pipe lengths, extinguishing agent tanks, and fusible links

The city may require additional information not specified in the submittal requirements in order to ensure compliance with the Monroe Municipal Code.



COMMERCIAL COOKING HOOD SUPPRESSION SYSTEM CONSTRUCTION PERMIT

806 WEST MAIN STREET • MONROE, WA 98272
City Hall 360.794.7400 • building@monroewa.gov
www.monroewa.gov



Adopted State Codes - Effective July 1st, 2016

The City of Monroe enforces the following Washington State Building Codes and amendments; the Washington Administrative Code (WAC) Title 51 and as amended by the Monroe Municipal Code Title 15:

2015 International Building Code (IBC)
2015 International Existing Building Code (IEBC)
2015 International Residential Code (IRC)
2015 International Fire Code (IFC)
2015 International Mechanical Code (IMC)
2015 International Fuel Gas Code (IFGC)
2015 Uniform Plumbing Code (UPC)
2015 ICC Energy Conservation Code with State amendments

Structural Design Criteria

Seismic Design Category: IRC D1/D2 / IBC - D

Basic Wind Speed: 85 mph

Exposure Category: B

Frost Depth: 18"

Snow load: 25 lbs. / sq. ft.

*A soils investigation is required for commercial projects; residential short plats and subdivisions; and, in some instances, residential lots.



Community Development
Permit Division

806 West Main Street, Monroe, WA 98272
Phone (360) 794-7400 Fax (360) 794-4007
www.monroewa.gov

FOR OFFICE USE ONLY
PERMIT FILE #
APPLICATION #
SEPA #

COMBINED PERMIT APPLICATION

PERMIT SUBMITTAL HOURS
MONDAY - FRIDAY 8:00 - 12:00 / 1:00 - 5:00

Building Operations Fire Land Use
[] Basic SFR [] Engineering Review [] Fire Alarm [] Type I Permit
[] Commercial T/I [] Fencing [] Fire Sprinkler [] Type II Permit
[] Demolition [] Grading [] High Piled Storage [] Type III Permit
[] Garage/Carport [] Retaining wall [] Hood Suppression [] Type IV Permit
[] Mechanical [] Rockery [] Operational [] See permit types listed on
[] New Construction (Commercial/Residential) [] Right-of-Way Disturbance [] Spray Booth attached form
[] Plumbing [] Utility Service [] Tents & Canopies [] Other
[] Racking [] Other [] Other
[] Residential Remodel
[] Other

NOTE: All required Electrical Permits will be issued by the Dept. of Labor & Industries.

THIS APPLICATION WILL NOT BE ACCEPTED WITHOUT COMPLETED SUBMITTAL REQUIREMENTS

Site Address or Property Location:
Size of site (acre/square feet):
Assessor's Tax Parcel Number (14 digits):

Applicant: Phone # ()
*Signature: Printed Name:
Mailing Address: Fax # ()
City State Zip E-mail

Property Owner: Phone # ()
**Signature: Printed Name:
Mailing Address: Fax # ()
City State Zip E-mail

Attach a separate sheet for additional property owners/additional addresses

*Applicant: By your signature above, you hereby certify that the information submitted is true and correct and that you are authorized by the property owner(s) to act on their behalf.

**Property Owners: by your signature above, you hereby certify that you have authorized the above applicant to make application on your behalf for this application.

COMBINED PERMIT APPLICATION - PAGE 2

Contractor: _____ Phone # _____

Contractor's License # _____ Exp Date _____

Mailing Address _____

Email _____

Contractor's Bond Company: _____

Contractor's Bid Amount or Project Cost (labor and materials): \$ _____

DETAILED DESCRIPTION OF PROPOSAL/WORK:

FOR OFFICE USE ONLY

Plan Check Fee (if applicable): \$ _____

Permit Fee: \$ _____

Technology Fee: \$ _____