

## PLAN REVIEW APPLICATION

An ADOH checklist is required with each application, visit our website for the most recent version available prior to applying.

LICENSED MANUFACTURERS: (Factory Built Buildings - FBB)			
Manufacturer License No.: _____		License Type: _____	
Dealer License No.: _____		License Type: _____	
<b>Pick one per application:</b> Compliance Control Manual    FBB - New Construction    FBB - Reconstruction    Supplemental Plan			
Model No.: _____	<small>Pick one:</small> Model Stock Unit    Site-Specific		Original ADOH Plan Number: _____
<b>Manufacturer Address, Phone, &amp; Email:</b>			
OTHER ADOH APPLICATION TYPES:			
Accessory Structure <small>(Includes skirting and foundation systems)</small>			
Foundation System apart from 24CFR-3285: _____		Floodplain	Freezing Climate
Skirting: _____		Site-Specific	Pit-set Foundation
		Typical	Other: _____
Flood Plain <small>(Foundation located within designated flood plain but rest 24CFR-3285 compliant)</small>			
Factory Built Building - Installation			
IBC Occupancy Classification: _____		Use Designation: _____	
		IRC Use _____	
Total number of Modules: _____	Overall Building Size (LxW): _____	Utilities: <small>(Check all that apply)</small>	Water    Sewer    Electric    Gas
<b>ADOH LICENSE REQUIRED FOR FBB INSTALLATION -</b>		<b>Installer License No.:</b> _____ <b>License Type:</b> _____	
Supplement Plan			
Original ADOH Plan Number: _____			
<b>Owner/Owner's Agent Name &amp; Email:</b> <small>(This will be our single point of contact to receive emails and correspondence)</small>			
<b>Address for Site-Specific</b>		<b>Additional details for the review team or where cells are too small:</b>	
2018-IBC Section 105.3(1): Identify and describe the work for which this application is made. <span style="color: red;">(REQUIRED)</span>			
SECTION BELOW FOR OFFICE USE			
		Log/Application No.	
Submittal Fee	<b>APPROVAL STAMP</b>		
Fee Received			
Payment No.			
Additional Hours (    ) X \$125.00 Per Hour			
Balance Fees Owed			