



City of Mobile • Permitting
Building Code Summary
For All Commercial Projects

Information to be copied and placed on drawings

General Information

Name of Project

Address

Proposed Use

Architects Letter of Supervision Provided? Yes No

Codes used in design (Check all that apply)

- 2021 International Building Code 2020 National Electrical Code
- 2021 International Existing Building Code 2021 International Mechanical Code
- 2021 International Fire Code 2021 International Plumbing Code
- 2015 International Energy Conservation Code 2021 International Fuel Gas Code

Construction Description

- Addition Alteration New Construction Renovation of Existing Building Tenant Build-Out Shell

Scope of Work - Building:

Scope of Work - Electrical:

Scope of Work – Mechanical / Refrigeration:

Scope of Work – Plumbing

Total Lot Area (sf) _____ **Total Building Footprint** (sf)** _____

***to include all buildings on the site, including detached garages, storage sheds, etc.*

Build Mobile, PO Box 1827, Mobile, Alabama 36633

For more information: www.BuildMobile.org | permitting@cityofmobile.org | 251.208.7198
Visit our help window: Mobile Government Plaza, 205 Government Street, Third Floor South Tower

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Existing Buildings

The building will remain in operation during construction Yes No

If yes, add provisions for rigid safety barriers and dust barriers to protect the public during construction in accordance with the applicable provisions of IBC Chapter 33. Yellow safety tape is not acceptable.

Provide Level of Alterations per IEBC 1 2 3

Renovations (Change of Occupancy)

Is the work in this building or space changing the occupancy type? Yes No

Historic Buildings

Is this building a Historic Building? Yes No

Construction Type IA IB IIA IIB IIIA IIIB
 IVA IVB IVC IVHT VA VB

Occupancy Classification

						Occupant Loads
<input type="checkbox"/> Assembly 303	<input type="checkbox"/> A-1	<input type="checkbox"/> A-2	<input type="checkbox"/> A-3	<input type="checkbox"/> A-4	<input type="checkbox"/> A-5	_____
<input type="checkbox"/> Business 304						_____
<input type="checkbox"/> Education 305						_____
<input type="checkbox"/> Factory Industrial 306	<input type="checkbox"/> F-1	<input type="checkbox"/> F-1				_____
<input type="checkbox"/> High-Hazard 307	<input type="checkbox"/> H-1	<input type="checkbox"/> H-2	<input type="checkbox"/> H-3	<input type="checkbox"/> H-4	<input type="checkbox"/> H-5	_____
<input type="checkbox"/> Institutional 308	<input type="checkbox"/> I-1	<input type="checkbox"/> I-2	<input type="checkbox"/> I-3	<input type="checkbox"/> I-4	<input type="checkbox"/> Condition	_____
<input type="checkbox"/> Mercantile 309						_____
<input type="checkbox"/> Residential 310	<input type="checkbox"/> R-1	<input type="checkbox"/> R-2	<input type="checkbox"/> R-3	<input type="checkbox"/> R-4		_____
<input type="checkbox"/> Storage 311	<input type="checkbox"/> S-1	<input type="checkbox"/> S-2		<input type="checkbox"/> High-piled		_____
<input type="checkbox"/> Utility & Miscellaneous 312						_____
TOTAL OCCUPANT LOAD						_____

Building Element

Building Element	Required Rating	UL No. *		
Structural frame; columns, girders, trusses	_____	_____		
Bearing walls exterior	_____	_____		
Bearing walls interior	_____	_____		
Non-bearing walls & partitions exterior	_____	_____		
Non-bearing walls & partitions interior	_____	_____		
Floor construction; supporting beams and joists	_____	_____		
Roof construction; supporting beams and joists	_____	_____		
Sprinklers system	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Partial	
Sprinkler type	<input type="checkbox"/> 13	<input type="checkbox"/> 13R	<input type="checkbox"/> 13D	
Standpipes	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Wet	<input type="checkbox"/> Dry Class
Fire / Smoke Alarm	<input type="radio"/> Yes	<input type="radio"/> No		

Fire Rated Elements

Fire Rated Elements	Required Rating	Hourly Rating	UL No. *
Ceiling-Floors	_____	_____	_____
Beams	_____	_____	_____
Columns	_____	_____	_____
Ceiling-Roofs	_____	_____	_____

Shafts-Exit _____

Shafts-Other _____

Corridor separation _____

Occupancy separation _____

Party/Fire wall separation _____

Smoke barrier separation _____

Tenant separations _____

* Or other approved agencies

- All fire rated walls shall be identified on plans by hatching, shading, etc.; show legend.
- Identify code section when using any special exceptions, etc.
- Reproduce full UL. Or other approved agencies details or reproductions of rated assemblies/penetrations on the drawings.

Draft Stopping (IBC 718.3 & 718.4) Draft stopping in floor Yes No Draft stopping in attic Yes No

Accessibility (IBC 11) Design conforms to IBC Chapter 11 and ICC A117.1-2017 Yes No

If no, explain below condition that will not allow building to be accessible

Design Loads (City Ordinance 1609.3)

Ultimate Design Wind Speed (IBC 1609 or ASCE 7)

Risk Cat. I-145MPH Risk Cat. II-159MPH Risk Cat. III-169MPH Risk Cat. IV-179MPH

Live Loads (IBC 1607)

Roof _____ PSF Attic _____ PSF Floor _____ PSF Mezzanine _____ PSF

Wind-Borne Debris Region (IBC 1609)

This building will use impact resistant glass per (IBC 1609.2) Yes No

This building will use engineered shutters or other approved method Yes No

Flood Requirements (IBC 1612) All projects located in a Special Flood Hazard Area shall comply with the City of Mobile Storm Water Management and Flood Control Ordinance. Yes No

Special Inspections and Tests (IBC 17)

I have reviewed the requirements of IBC Section 17, specifically 1705; the design incorporates the requirements and is reflected on the drawings and in the specifications. Below are the requirements to be included:

The Contractor has been notified of his responsibility under Section 1704. Yes No

Safety Glazing for Hazardous (IBC 2406) I have identified on drawings where tempered glass is required in hazardous locations (2406.4) Yes No

IPC TABLE 403.1 – TOTAL NUMBER OF REQUIRED FIXTURES									
	OCCUPANCY	OCCUPANT LOAD	WATER CLOSETS				LAVATORIES		
			Ratio	Men	Ratio	Women	Ratio	Men	Women
Required									
Total									
	DRINKING FOUNTAIN	SERVICE SINK	MISC	MISC					
Required									
Total									