Include the following information on the project drawings. See DCSM sections 2.3 and 2.6 for additional details on drawings.

**Instructions**:

Indicate your response to each item in the checklist. Select ‘Yes’ if the checklist item has been completed in full. Select ‘No’ or ‘N/A’ if that item is not included or not required for the specific project. Explain why that item has not been included in the submittal.

| **RESPONSE** | **REQUIREMENTS** |
| --- | --- |
|  | **Title Sheets and Building Code Data** |
| Choose an item. | Provide project identification including project name, project code number, and appropriation act title. |
| Choose an item. | Describe activity or function(s) to be performed in the facility. |
| Choose an item. | List applicable building code (Part I or II, and which edition of the VUSBC) and any other major codes (including referenced documents) on which the design is based. |
| Choose an item. | List applicable Accessibility standards. |
| Choose an item. | Provide VCC Construction Type. |
| Choose an item. | Provide Use Group(s) per the VCC. For mixed-use occupancies, indicate which Use Groups are separated and non-separated. |
| Choose an item. | Provide a statement of compliance with VT CAC including the applicable version of the LEED checklist. |
| Choose an item. | State the maximum VCC occupancy for each level and the total for the building. |
| Choose an item. | Provide location and vicinity maps noted to show project location. |
| Choose an item. | State the building height and area and number of stories. |
| Choose an item. | Provide a tabulation of GSF per floor (new and renovated), total GSF (all floors — new and renovated), and total building volume. |
| Choose an item. | Provide a tabulation of the building area per the VCC definition (per story). |
| Choose an item. | Provide a tabulation of units. Provide the number of parking spaces including accessible units by type, auditorium seats, bedrooms, sleeping units, fixed assembly seats, etc. |
| Choose an item. | Provide a tabulation of the minimum required number of plumbing fixtures. Itemize by use group and gender. |
| Choose an item. | Provide design occupant load for each level and the total for the building. |
| Choose an item. | Provide design occupant loads in accord with the VCC for each room and space. |
| Choose an item. | Provide an index of drawings. |
| Choose an item. | Provide the uniform date of the completed design documents. |
| Choose an item. | State design live loads for all floors. |
| Choose an item. | State type of fire suppression system. |
| Choose an item. | State type of fire alarm system. |
| Choose an item. | State type of smoke control or smoke removal system. |
| Choose an item. | State if building is a designated Emergency Shelter per VCC requirements. |
| Choose an item. | State the seismic design category. |
| Choose an item. | Provide an Asbestos Disclosure Statement and a Lead Disclosure Statement. |
| Choose an item. | Add utilities marking statement to Dig Notices. Add “Contact Virginia 811 at 811, 1-800-552-7001, or http://www.va811.com no less than 72 hours prior to excavation and do not disturb the soil until dig ticket has been processed.” |
| Choose an item. | Provide a list of points of contact. Include university representatives, construction managers, utilities, and communications contractors as appropriate. |
| Choose an item. | Provide the professional seal(s) of the architect(s) and engineer(s) responsible for the design. |