



# WHAT TO EXPECT

WHEN APPLYING FOR A PERMIT ON OUR APPLICATION PORTAL

# **DEVELOPMENT SERVICES DIVISION**

# **COMMERCIAL EXTERIOR ALTERATIONS**

## Application Help... before you apply:

Documents for all new structures and additions are required to be sealed, signed and dated by the appropriate design professional.

A Separate Permit Application is Required for Fire Suppression Systems. Stamped Design Documents for the fire sprinkler, fire alarm systems & hood suppression systems are required. Required design documents shall be submitted within 30 days of issuance of building permit for review and approval PRIOR to installation of any system.

Projects with any food service, commercial kitchen or food preparation areas must be reviewed & approved by the Kansas Department of Agriculture (KDA), Division of Food Safety and Lodging. Submit applications directly to KDA; submit documentation of KDA approval to Development Services. The KDA application & process can be found **here**.

### The following questions will be asked through our portal application

### Section 1 Questions: Basic Info about the application

Project Name:

This would be the proposed project name. This is not a required question.

#### Address:

You can enter the project address or locate it on the map. This can be left blank. You will be required to input Parcel ID numbers later in the application process.

## Section 2 Questions: People

#### Please provide as much information as possible.

(Required) Applicant: Required questions are name/address/daytime and other phone/email

Owner: Who is the property owner?

Architect Civil Design Professional Structural Design Professional Electrical Design Professional Mechanical Design Professional Plumbing Design Professional Fire Suppression Design Professional

# Section 3 Question: Contractor

From the pop-up, choose as many options as applicable. If you don't have a contractor yet, you can skip to the next section

### Section 4 Questions: Data Section

<u>All questions should be answered</u>, but some questions are "required" so you cannot move forward with the application with answering them. If you finish this section and cannot move forward when you click "next", review your answers to make sure all required questions have been answered.

#### Project Name: \_\_\_\_

Common Address or location description: \_\_\_\_

Type of work being done: Choose from dropdown box: Exterior Alterations / Tower Modification

### Estimated Construction Costs: \_\_\_\_\_\_ Fees are estimated based on your answer to this question. It is

helpful to be as accurate as possible.

Total Area: Total square footage of construction area

Construction Description: Please describe the scope of work that will be conducted for this project

Occupancy Classification: Choose from dropdown list. Options are:

A-1 Assembly with Fixed Seating A-2 Assembly Eating Drinking Est A-3 Assembly Worship Recreational Amusement A-4 Assembly – Indoor Sport Activities and Spectator Seating A-5 Assembly – Outdoor Activities – Participation **B** Business or Service B<50 Assembly <50 People – Accessory to Primary Occupancy E – Day Care Day Care >5 Children 2 <sup>1</sup>/<sub>2</sub> Years and Direct Exits E – Thru 12th Educational Thru 12th Grade > 6 People F-1 Factory – Industrial Moderate Hazard F-2 Factory – Industrial H-1 High Hazard – High Explosion H-2 High Hazard – High Flammability or High Combustibility H-3 High Hazard – High Fire or High Physical H-4 High Hazard – Production or Fabrication Design Occupant Load: Total Impervious Area: \_\_\_\_\_ Type of Construction: Choose from dropdown list. Options are:

I-A Type I-1 Fire Resist – Rated – Noncombustible I-B Type I-B Fire Resist – Rated – Noncombus II-A Type II Rated – Noncombus II-B Type II Non-Rated – Noncombus III-A Type III One Hour Rated – Ext Walls Noncombus

#### Basement (Y/N)

Number of Structures: \_\_\_\_\_

Sprinkler Exists (Y/N)

Sprinklers Required (Y/N)

Sprinkler Coverage: Chooser from Partial / Throughout / N/A

Number of Structures: \_\_\_\_\_

CO Conditions: \_\_\_\_\_

- I-1 Institutional Supervised Resident Care > 16 People
- I-2 Institutional Assistance Req'd Medical or Custodial Care > 5 People
- I-3 Institutional Security Facility >5 People
- I-4 Adult Institutional Adult Care Facility >5 Adults <24 Hrs
- M Mercantile Display, Stock and Sale
- **R-1 Residential Transient**
- R-2 Residential Non-Transient
- R-3 Residential <20DU Care
- R-4 Residential Care >5 <16 Residents
- S-1 Storage–Moderate Hazard Not S-2 or H
- S-2 Storage Low Hazard
- **U Utility Accessory and Misc Structure**

III-B Type III Non-Rated – Ext Walls Noncombus IV-H.T. Type IV Heavy Timber MEMB Membrane Construction V-A Type V One Hour Rated V-B Type V Non-Rated Is the property a designated local landmark or on the state or national register of historic places? (Y/N)

Is the property in a designated floodplain? (Y/N)

#### The following questions must be checked "Yes" or your application will not be processed:

I understand the location of the structure is the responsibility of the contractor and/or owner and that said structure shall be placed in accordance with the approved plan and Topeka zoning regs.

I certify the information provided to be true and correct and agree to comply with all pertinent City of Topeka codes, ordinances and regulations.

I understand that I/the contractor am/is responsible to call for all required inspections

I consent to have City of Topeka personnel enter the premises legally described herein for purpose of inspecting the premises for compliance with all applicable City codes, during business hours.

I understand that all inspections must be completed and approved. If a certificate of occupancy is required, said certificate must be issued PRIOR to occupancy.

The applicant acknowledges I/we have reviewed the application procedures.

I am authorized to file this application and submit the attached documents associated with this Project consisting of plans, specifications, drawings, opinions, reports, and calculations.

#### Attachments (Document Upload)

In the Attachment section, click on Add and choose your first document to upload.

Document Type: Label - you must choose a label for your document. Available labels are specific to permit type.

In the Document Type Label dropdown, some labels will have a red \* indicating you must upload this document and provide this label before you can move forward with your application.

If you have difficulty uploading a document, please contact us or send via email to DSDPermits@topeka.org.

#### **Terms and Conditions**

I (we) hereby acknowledge that all application procedures have been reviewed and understood as part of this submittal.

#### Fees / Payment

A notification will be emailed with payment and issuance options once your permit is approved.

#### To make payment

From the portal, click the Review tab and locate the permit application you're wanting to pay.

From the Actions... dropdown, choose Pay Fees.

You will be re-directed to our online payment portal where you can pay by credit card or e-check.

		Create Application		
Back  Application				
Commercial Building Interior Alteration T202109276363	No Location Specified TEST ONLY		Review Actions Actions	Created:09/27/2021 Expires:03/28/2022
GIS Information		Attachments	Actions Check Case Status Pay Fees	

For assistance making a Planning payment using the online payment portal, contact Development Services at 785-368-3704