BUILDINGS, HVAC, COMPLIANCE STATEMENT SBD-9720

This form is required to be submitted by the supervising professional (architect, engineer, HVAC designer or electrical designer) observing construction of projects within buildings with total volume of 50,000 cubic feet or greater and bleachers (SPS 361.40). Failure to submit this form may result in penalties as specified in SPS 361.23 and/or local ordinances. This form must be submitted prior to the plan approval expiration date or another submittal may be required.

General Instructions: Prior to the initial occupancy of new buildings or additions and the final occupancy of altered existing buildings, submit this completed and signed form to:

- The municipal building inspection office (refer to the plan approval letter for agency address) and
- Industry Services Division, the office of the original plan review.

Note: If the review was done by the municipality, the compliance statement goes only to the municipal building inspector. A copy is not needed by Industry Services.

Trar	saction ID Number	Project Name	
Site	Number		
Site	location (number & stree	t)	
	City □ Village	☐ Town of	County of
		FATEMENT: (Check Box A, B, ormation. Attach additional pages	C, or D to indicate purpose and complete any other if necessary.)
	Check those which apply	: ☐ Building Object ID #	□ HVAC Object ID #
	☐ Partial Completion _	Description of Portion Completed	
	items applicable to specifications. BUILDING/LIGH 1. Structural system in (trusses, precast, m 2. Fire protection system in the installed, and tested appropriately registed. 3. Shaft and stairway of the specific spe	this project have been completed in FING ITEMS cluding submittal and erection of all building etal building, etc.) ems (sprinklers, alarms, smoke detectors) in (including forward flow on back flow deviced professionals enclosure	11. Interior lighting & control requirementsdesigned,12. All conditions of lighting plan approval
	of construction, fire 6. Sanitation system (7. Barrier-free includin 8. Energy envelope re 9. All conditions of bui	uction, enclosure of hazards, fire walls, la stopped penetrations collets, sinks, drinking facilities) g SPS 318 elevators and lifts quirements lding plan approval and applicable variand	HVAC system including final test All conditions of HVAC plan approval and applicable variances ces
	The following items a	re not in compliance and must be	addressed:
	B) Statement of Nor Due to the following listed		cupancy:
	C) ☐ Supervising Pro D) ☐ Project Abandor		ect (Use A or B above to indicate project status as of this date.)
3. §	SUPERVISING PROFE	SSIONAL SIGNATURE FOR	:
	☐ Building ☐ HVAC	Name (please print or t	Date
	Phone number	Customer ID #	Signature