DIVISION OF INDUSTRY SERVICES
2331 SAN LUIS PL STE 150
GREEN BAY WI 54304
Contact Through Relay
http://dsps.wi.gov/programs/industry-services
www.wisconsin.gov

Scott Walker, Governor Dave Ross, Secretary

July 06, 2015

CUST ID No. 1322626

RYAN SCHULTZ OPENINGDESIGN 312 W LAKESIDE ST MADISON WI 53715

Review Appointment Confirmation

This letter serves as a confirmation of your review appointment. Please use it in lieu of the traditional plan review application form when submitting your plans. To do so, **complete all missing information, correct any inaccurate pre-printed information with red ink,** and submit with your plans and appropriate fees.

PLEASE NOTE: The Payment Voucher process was suspended on 9/12/2013. Effective immediately, Payment for <u>Paper Plan Review may be made via Invoice or Check attached to this Confirmation Form only.</u> In Addition, Payment for <u>Electronic Plan Review may be made via Invoice only.</u>

Plan reviews may only be invoiced to the designer as an individual. Designer shall sign the block on the first page to authorize invoicing. If you are paying by check for a paper submittal, please send your check along with this confirmation letter directly to the assigned office of the review.

If the plan you submit is not the same as indicated on the following pages, you will be at risk of having your plan appointment rejected and will have to reschedule using the correct information. Plans must be in our office two days prior to your review appointment. If you cancel at least two days prior to your appointment, that time can be utilized by another customer. A \$60 Missed Appointment fee may be charged for plans received late without proper cancelation notice.

If You Need To Contact Us To Cancel, Reschedule, Or Correct Information:

Please let us know via email to <u>DspsSbPlanSchedule@wi.gov</u> as soon as possible

If You Are Requesting A Permission To Start:

Provide the owner's signature at the end of this form.

To Save Shipping Costs:

You are encouraged to submit 1 properly signed and sealed full plan set and 3 appropriately signed and sealed index sheets in lieu of the minimum 4 plan sets.

To Monitor The Continued Status Of Your Plan:

Plans status can be readily checked on our Internet site at http://www.dsps.wi.gov/Plan-Review/Plan-Status. You will need your designer Industry Services customer ID # to retrieve the plan information.

Design Aides:

Our agency offers a number of worksheets and checklists for the Commercial Building Code at http://dsps.wi.gov/Plan-Review that may assist you in preparing your submittal.



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Application For Review - BUILDINGS, HVAC, FIRE, LIGHTING AND COMPONENTS

- Complete all pages -

NOTE: Personal information you provide may be used for secondary purposes [Privacy Law s. 15.04(1)(m), Stats.]

Site	Fill In Any Missing Site Information				
Below		Confirmation Information			
Site ID	813559	T .: T	25/51/2		
Site Name	Xcel Sports Complex	Transaction ID	2565163		
Site Address	Pitzner Pkwy	*Previous Transaction ID			
Site	City of Jefferson , Jefferson County	Appointment Date	7/15/2015		
Municipality			This is based on any plan review		
and County		J	office preference you indicated.		
			Plans must be in our office <u>2</u>		
			business days prior to this date.		
	ou prefer we notify designer for plan		Earlier submittal may allow an		
pick-up (rathe	r than mailing)		earlier review if staff availability occurs.		
		†Estimated Review	7/16/2015		
		Completion Date	7/10/2013		
	u are using this form ONLY for a	Assigned Reviewer	Donald L Diedrick		
	ponent submittal following building	B	don.diedrick@wisconsin.gov		
plan submittal, which you submit to our Madison		Assigned Office	Green Bay		
office only.		File Type	Paper		
D1 4 XC		SharePoint Login ID	Theoryshaw		
	you are able to submit your plans	Project Reference	-		
sooner than the required date, there is a possibility that they can be reviewed sooner if time and schedules permit.		Required Fee: Based on	\$ 425.00		
		your online entries, (Use	- Choose payment option below:		
		the Application Form	☐ Make checks payable to		
		Fee Calculation	DEPT. OF SAFETY &		
Actual approval may be delayed due to incomplete plans or unforeseen service demands.		instructions to verify fee)	PROFESSIONAL SERVICES.		
		 Please check one of the 	OR		
		boxes to the right to	☐ Invoice Designer, who will be		
MTC :	1.1.	indicate desired method	personally responsible for		
*If no previous related transaction number is provided,		of payment.	payment.		
plan review will normally be based on the current code,			Designer Signature:		
except for revisions. If a previous related transaction					
number is entered and the parent building approval ransaction has not expired, you may elect below to use the code in effect at the time of that approval for follow-up					
revision, HVAC and fire protection submittals related to that building. Note that this follow-up submittal's approval					
would then expire no later than the parent building approval.					
would then expir	o no meet man the parent ounting approv				
SPS 303.03 - Pei	mits any person affected by a rule of the	department to petition for a	variance from the rule. The		
	establish equivalency to the rule, be prov				
ccompanying fee and fire department position statement and municipal recommendation if required.					
1 2 2			•		
☐ Please re	view under the code in effect at the time	of the parent building appro	val.		

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Customers For This Plan:

Cust ID	Name	Contact	Address	Relationships	If Designer or Supervising Professional, enter WI Designer Registration Number & Exp. Date
1320298	XCEL	TODD GOLDBECK	4860 HIGHWOOD CIRCLE MIDDLETON WI 53562	Owner	
1322626	RYAN SCHULTZ	OPENINGDESIGN	312 W LAKESIDE ST MADISON WI 53715	Designer	

To check the status of your project go to our website, <u>Plan Status</u> page and using your designer/customer ID# you can perform a search of your current projects.

OBJECTS:

Facility: 751266 XCEL SPORTS COMPLEX

PITZNER PKWY

Object Type: Building ICC Regulated Object ID No.: 1543519 Code Applies Date: 06/25/15 Combined Footing & Foundation Review only & Permission to Start; Major Occupancy: Assembly; Type IIB Metal Frame Unprotected class of construction; New plan; 50,800 project sq ft; Completely Sprinklered; Occupancy: A-3 Other Assembly Uses; Sprinkler Design: NFPA-13 Sprinkler

If you are submitting any other objects with the building submittal, besides the ones listed above, indicate below (any other additional objects besides the types listed below will require re-scheduling of your submittal – please email DspsSbPlanSchedule@wi.gov as soon as possible):

letal Bldg
re Escape
ecast Plank
recast Wall

Fire Protection Information

Provide the following information on any fire alarm or fire suppression system. If not part of this submittal, fire plans will be scheduled to the office with the first available review date and not necessarily to the office that reviewed the building plans, unless requested. The Holmen office does not review fire protection plans; for building plans reviewed there, submit the fire alarm/suppression plans to Green Bay, Waukesha or Madison. Submit plans for multi-purpose piping (MPP) systems as part of your plumbing plan submittal using the plumbing plan application, SBD-6154.

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Fire Alarm:	Fire Suppression:
Coverage: () Complete () Partial () None	Coverage: () Complete () Partial () None
Type: () Automatic Detection () Manual Alarm	Type: () Wet () Dry () Pre-action/Deluge () Anti-Freeze () Manual Wet
Monitoring Type:	NFPA Fire Suppression Standards Used:
() Central Station () Proprietary Supervision	()11 ()11A ()12 ()13 ()13R
() Remote Supervision () Protected Premises	() 13D () 14 () 15 () 16 () 17
	() 17R () 17A () 20 () 22 () 24
	() 750 () 2001 () 13D Multi-purpose Piping () Other:
	() Other.
Statements of Owners and Designer:	
Owner's Statement: The owner indicated on page 1 requerequirements set forth in Chapters SPS 361 to 365 of the de	sts that plans be reviewed for compliance with the code partment. The owner recognizes responsibility for compliance
*	al. If a building is 50,000 cubic feet in total volume or greater,
Signatures and seals affixed to the plans shall be original.	by a Wisconsin registered engineer or architect (SPS 361-365).
Designer's Statement: (SPS 361) The designer indicated supervising the preparation of the plans to the best of his/he	
	g, following construction of this project, contains more than
50,000 cubic feet in volume, plans are required to be prepar	
engineer, architect, or designer (SPS 361). Signatures and s	eals affixed to the plans shall be original.
Required Signatures:	
Supervising Professionals: If building will be 50,000 cu f supervising professional per SPS 361 for the performance of	t or greater (SPS 361) I have been retained by the owner as the f the supervision of reasonable on-the-site observations to
	ith the approved plans and specifications. Upon completion of
construction, I will file a written statement with the Department	
	ormed in substantial compliance with the approved plans and ith this project I will file a compliance statement (SBD-9720)
notifying the Department as such and indicating the current	1
	Print Name
	() Building () HVAC
	() Building () HVAC
Ontional Service - Permission To Start Requested: ()	As the owner, I request to begin footing and foundation work
<u> </u>	es required after plans have been reviewed, and to remove or
replace any non-code complying construction. I understand	
-	activities that involve more than one acre in area. The owner
shall not permit construction above the foundation until app	•
(Additional \$75.00 fee per building) Request is for the following	owing buildings:

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Deferred Structural Component Submittals after Building Approval: Check components submitted:				
. ,	() Steel Girder() Laminated Wood	() Precast Plank () Precast Wall		
() Floor Truss () Fire Escape () Laminated Wood () Precast Wall The Department requires that the project designer review individual structural component submittals for compliance with the general design concept. The project designer, and department, will rely on the seal of the component designers for compliance with the codes as they apply to their designs.				
ng Designer	Print	Date		
	() Metal Bldg) Fire Escape at the project designer re The project designer, ar	() Metal Bldg () Steel Girder () Laminated Wood at the project designer review individual structural The project designer, and department, will rely on as they apply to their designs.		

Madison	Hayward	La Crosse/Holmen	Green Bay	Waukesha
1400 E Washington Ave	10541N Ranch Rd	3824 N Creekside Ln	2331 San Luis Pl	141 NW Barstow St, 4 th Floor
Madison, WI	Hayward, WI	Holmen, WI	Green Bay, WI	Waukesha, WI
53703	54843	54636	54304	53188