

INTERIOR CODES CHECKLIST

PROJECT NAME: _____

| PUBLICATION | YEAR OF EDITION | YEAR OF AMENDMENT (if required) | RESEARCH DATE |
|---|-----------------|------------------------------------|----------------|
| CODES AND REGULATIONS: | | | |
| BUILDING CODE - Circle One: NBC SBC UBC IBC OTHER Structural Engineer Required? YES NO | _____ | _____ | ____/____/____ |
| PLUMBING CODE - Circle One: NPC SPC UPC IPC OTHER Plumbing Engineer Required? YES NO | _____ | _____ | ____/____/____ |
| MECHANICAL CODE - Circle One: NMC SMC UMC IMC OTHER Mechanical Engineer Required? YES NO | _____ | _____ | ____/____/____ |
| ELECTRIC CODE - Circle One: NEC(NFPA 70) IEC OTHER Electrical Engineer Required? YES NO | _____ | _____ | ____/____/____ |
| LIFE SAFETY CODE (NFPA 101) | _____ | _____ | ____/____/____ |
| RESIDENTIAL CODE - Circle One: OTFDC IOTFDC IRC OTHER | _____ | _____ | ____/____/____ |
| ACCESSIBILITY REGULATIONS/STANDARDS | | | |
| Americans with Disability Act Accessibility Guidelines (ADAAG) * | _____ | _____ | ____/____/____ |
| ANSI A117.1 Accessible and Usable Buildings and Facilities | _____ | _____ | ____/____/____ |
| Other: _____ | _____ | _____ | ____/____/____ |
| OTHER: ** _____ | _____ | _____ | ____/____/____ |
| _____ | _____ | _____ | ____/____/____ |
| _____ | _____ | _____ | ____/____/____ |
| _____ | _____ | _____ | ____/____/____ |
| STANDARDS: *** | | | |
| NATIONAL FIRE PROTECTION ASSOCIATION (NFPA): | | | |
| NFPA ____: _____ | _____ | _____ | ____/____/____ |
| NFPA ____: _____ | _____ | _____ | ____/____/____ |
| NFPA ____: _____ | _____ | _____ | ____/____/____ |
| NFPA ____: _____ | _____ | _____ | ____/____/____ |
| AMERICAN SOCIETY OF TESTING & MATERIALS (ASTM) | | | |
| ASTM ____: _____ | _____ | _____ | ____/____/____ |
| ASTM ____: _____ | _____ | _____ | ____/____/____ |
| UNDERWRITERS LABORATORIES (UL) | | | |
| UL ____: _____ | _____ | _____ | ____/____/____ |
| UL ____: _____ | _____ | _____ | ____/____/____ |
| AMERICAN SOCIETY OF HEATING, REFRIGERATION, AND AIR CONDITIONING ENGINEERS (ASHRAE) | _____ | _____ | ____/____/____ |
| OTHER: _____ | _____ | _____ | ____/____/____ |
| _____ | _____ | _____ | ____/____/____ |
| _____ | _____ | _____ | ____/____/____ |
| _____ | _____ | _____ | ____/____/____ |

* All projects should be reviewed for ADAAG compatibility with few exceptions (ie: federal buildings).

** Be sure to check for state and local codes. Local codes can include special ordinances, health codes, zoning regulations, and historic preservation laws. List the specific ones.

*** Refer to the codes as well as local requirements to determine which standards are required. List the specific publications.

Figure 1.2. Interior Codes Checklist.

OCCUPANCY CHECKLIST

PROJECT NAME: _____

OCCUPANCY CLASSIFICATIONS

BUILDING TYPE/USE: _____

☐ NEW ☐ EXISTING

NUMBER OF OCCUPANTS: _____

☐ ESTIMATED ☐ ACTUAL OCCUPANCY LOAD (see below)

TYPE OF HAZARDS: _____

☐ EXPLOSIVE ☐ FIRE ☐ PHYSICAL ☐ HEALTH ☐ OTHER _____

OCCUPANCY CLASSIFICATION: _____

CODE SOURCE: ☐ NBC ☐ SBC ☐ UBC ☐ IBC ☐ LSC ☐ OTHER: _____

OCCUPANCY SUBCLASSIFICATION: _____

CODE SOURCE: ☐ NBC ☐ SBC ☐ UBC ☐ IBC ☐ LSC ☐ OTHER: _____

SPECIAL OCCUPANCY REQUIREMENTS: _____

CODE SOURCE: ☐ NBC ☐ SBC ☐ UBC ☐ IBC ☐ LSC ☐ OTHER: _____

OCCUPANCY LOADS

OCCUPANCY USE AND LOAD FACTOR:

Use 1: _____ Load Factor: _____ () Gross () Net

Use 2: _____ Load Factor: _____ () Gross () Net

Use 3: _____ Load Factor: _____ () Gross () Net

Use 4: _____ Load Factor: _____ () Gross () Net

CODE SOURCE: ☐ NBC ☐ SBC ☐ UBC ☐ IBC ☐ LSC ☐ OTHER: _____

TOTAL FLOOR AREA: (SF = Square Feet)

Use 1: _____ () Net SF () Gross SF () Other: _____

Use 2: _____ () Net SF () Gross SF () Other: _____

Use 3: _____ () Net SF () Gross SF () Other: _____

Use 4: _____ () Net SF () Gross SF () Other: _____

OCCUPANCY LOAD: (FORMULA: Load = Area (Sq. Ft.) / Load Factor

Use 1: _____ () Using Formula () Fixed Seat Variable _____

Use 2: _____ () Using Formula () Fixed Seat Variable _____

Use 3: _____ () Using Formula () Fixed Seat Variable _____

Use 4: _____ () Using Formula () Fixed Seat Variable _____

TOTAL OCCUPANCY LOAD: _____

LOCAL CODE APPROVAL REQUIRED

☐ NO ☐ YES: NAME: _____ DATE: _____

NOTE: If there is more than one building type in the project, use a separate checklist for each.

MEANS OF EGRESS CHECKLIST

PROJECT NAME: _____
 TYPE OF SPACE: _____ BUILDING _____ FLOOR _____ TENANT _____ ROOM _____
 OCCUPANCY TYPE(S): _____
 OCCUPANCY LOAD(S): _____

TYPES OF MEANS OF EGRESS (Check and research those that apply):

EXIT ACCESS

- ___ Doors
- ___ Stairs
- ___ Ramps
- ___ Corridors
- ___ Aisles
- ___ Intervening Rooms

EXIT

- ___ Exterior Doors
- ___ Exit Stairs
- ___ Horizontal Exits
- ___ Exit Passageway

EXIT DISCHARGE

- ___ Main Lobby
- ___ Foyers
- ___ Vestibules
- ___ Discharge Corridors
- ___ Exit Courts

TYPICAL CODE AND ACCESSIBILITY REQUIREMENTS (Research):

- ___ Doors: Type, Swing, Size, Hardware, Threshold, Clearances, Fire Rating
- ___ Stairs: Type, Riser Height, Tread Depth, Nosing, Width, Handrail, Guardrail, Fire Rating
- ___ Ramps: Slope, Rise, Landings, Width, Edge Detail, Finish, Handrail, Guardrail
- ___ Corridors: Length, Width, Protruding Objects, Fire Rating
- ___ Aisles: Fixed Seats, No Fixed Seats, Ramp(s), Steps, Handrails
- ___ Intervening Rooms: Type, Size, Obstructions, Fire Rating

EGRESS CAPACITIES (Calculate):

NUMBER OF EXITS:

- ___ MINIMUM OF TWO EXITS
 - 1 - 500 = 2 Exits
 - 501 - 1000 = 3 Exits
 - over 1000 = 4 Exits
- ___ ONE EXIT EXCEPTION
- ___ REQUIRED NUMBER OF EXITS
- ___ NUMBER OF EXITS PROVIDED

EXIT WIDTH:

- OCCUPANCY LOAD X VARIABLE = TOTAL WIDTH
- ___ LEVEL VARIABLE
- ___ STAIR VARIABLE
- ___ OTHER VARIABLE
- ___ CALCULATED WIDTH @ EACH EXIT LOCATION
- ___ TOTAL WIDTH REQUIRED

TRAVEL DISTANCE:

- ___ 1/2 DIAGONAL RULE
- ___ DEAD END CORRIDOR
- ___ COMMON PATH OF TRAVEL
- ___ MAXIMUM ALLOWED TRAVEL DISTANCE

NOTES:

1. ATTACH ANY FLOOR PLANS AND OTHER PAPERWORK INDICATING THE REQUIRED CALCULATIONS.
2. CHECK SPECIFIC OCCUPANCY CLASSIFICATIONS FOR SPECIAL REQUIREMENTS THAT MAY APPLY.

Figure 4.17. Means of Egress Checklist.

FIRE RESISTANCE CHECKLIST

PROJECT NAME: _____
 OCCUPANCY (new or existing): _____
 TYPE OF CONSTRUCTION: _____

| REQUIRED FIRE PROTECTION (check those that apply) | EXISTING (yes or no) | LOCATION IN BUILDING | TYPE OF MATERIAL OR ASSEMBLY REQUIRED (list information) | HOURLY RATING OR FIRE TEST REQUIRED (list type) |
|---|-------------------------|-------------------------|--|---|
| <u>FIRE BARRIERS:</u> ___ Fire Wall(s) ___ Occupancy Separation Wall(s) ___ Tenant Separation Wall(s) ___ Corridor Walls ___ Horizontal Exit(s) ___ Vertical Shaft Enclosure(s) ___ Room Separation(s) ___ Floor/Ceiling Assembly(ies) ___ Other: _____ | | | | |
| <u>SMOKE BARRIERS:</u> ___ Wall Assembly(ies) ___ Vertical Shaft(s) ___ Vestibule(s) ___ Other: _____ | | | | |
| <u>OPENING PROTECTIVES:</u> ___ Fire Door(s) ___ Fire Window(s) ___ Rated Glazing ___ Other: _____ | | | | |
| <u>THROUGH-PENETRATION PROTECTIVES:</u> Engineer Required? ___ YES ___ NO ___ Firestop(s) ___ Draftstop(s) ___ Damper System(s) ___ Other: _____ | | | | |

NOTE: Refer to codes and standards for specific information. Also check the ADAAG for mounting locations.

Figure 5.15. Fire Resistance Checklist.

FIRE PROTECTION CHECKLIST

PROJECT NAME: _____
 OCCUPANCY (new or existing): _____
 TYPE OF CONSTRUCTION: _____

| REQUIRED FIRE PROTECTION (check those that apply) | EXISTING (yes or no) | LOCATION IN BUILDING | TYPE OF SYSTEM REQUIRED (list information) | QUANTITIES REQUIRED (new or additional) |
|---|-------------------------|-------------------------|--|---|
| DETECTION SYSTEMS: Engineer Required? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Smoke Detector/Alarm(s) <input type="checkbox"/> Fire Alarm(s) <input type="checkbox"/> Audio System(s) <input type="checkbox"/> Accessible Warning System(s) <input type="checkbox"/> Other: _____ | | | | |
| SUPPRESSION SYSTEMS: Engineer Required? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Fire Extinguisher(s) <input type="checkbox"/> Standpipe(s) <input type="checkbox"/> Fire Hose(s) <input type="checkbox"/> Sprinkler System(s) <input type="checkbox"/> Types of Sprinkler Head(s) <input type="checkbox"/> Other: _____ | | | | |

NOTES:

1. Refer to codes and standards for specific information. Also check the ADAAG for mounting locations and alarm details.
2. If automatic sprinkler systems are used, check for possible code trade-offs.
3. Consult and coordinate detection systems with electrical engineers and suppression systems with mechanical engineers.

Figure 6.4. Fire Protection Checklist.