



APPLICATION FORM

FORM MBD-PR-02

Rev. 10/2026

Plan Review Transmittal

Include this transmittal with every submittal (new, resubmittal, revision or deferred) and send it with your construction documents to info@mybuildingdepartment.com. Type into the form, or print it and fill it in by hand.

1 SUBMITTED BY

NAME OF PERSON REQUESTING REVIEW

TITLE OR ROLE

COMPANY, AGENCY OR JURISDICTION

REQUESTING PARTY

☐ Jurisdiction or building department ☐ Architect or engineer ☐ Contractor ☐ Owner or developer ☐ Other

PHONE

EMAIL

Plan review fees are invoiced to the requesting party in Section 1 unless a billing party is named in Section 2 and has agreed in writing to pay.

2 BILLING PARTY (IF DIFFERENT FROM SECTION 1)

BILLING CONTACT

COMPANY OR AGENCY

BILLING ADDRESS

CITY

STATE

ZIP

PHONE

EMAIL

PO OR CONTRACT NO.

3 PROJECT INFORMATION

PROJECT NAME (AS SHOWN ON THE PLANS)

PROJECT STREET ADDRESS

CITY

STATE

ZIP

COUNTY

PARCEL OR TAX LOT NO.

JURISDICTION HAVING AUTHORITY (PERMITTING AGENCY)

JURISDICTION PERMIT OR APPLICATION NO.

DESIGN PROFESSIONAL OF RECORD

FIRM

DESIGN PROFESSIONAL PHONE

DESIGN PROFESSIONAL EMAIL

CONTRACTOR (IF KNOWN)

CONTRACTOR LICENSE NO.

CONTRACTOR PHONE

OCCUPANCY GROUP(S)

CONSTRUCTION TYPE

BUILDING AREA (SQ FT)

STORIES

VALUATION (\$)



Plan Review Transmittal (continued)

FORM MBD-PR-02

4 SCOPE OF WORK

TYPE OF WORK

☐ New building ☐ Addition ☐ Alteration or remodel ☐ Tenant improvement ☐ Change of occupancy ☐ Other

FIRE PROTECTION

☐ No sprinklers ☐ NFPA 13 ☐ NFPA 13R ☐ NFPA 13D ☐ Partial or other ☐ Fire alarm system ☐ No fire alarm

DESCRIPTION AND SCOPE OF WORK

5 REVIEWS REQUESTED

Check each review requested and enter the code and edition, including state amendments (for example, 2025 OSSC or 2021 IBC with WAC 51-50).

REVIEW	CODE AND EDITION	CHECKLIST
☐ Complete review: building, mechanical, plumbing and electrical	Also check each discipline below	
☐ Preliminary (design-phase) building review		MBD-PR-04
☐ Building: commercial and multifamily		MBD-PR-04
☐ Residential: one- and two-family dwellings and townhouses		MBD-PR-05
☐ Mechanical and fuel gas		MBD-PR-06
☐ Plumbing		MBD-PR-07
☐ Electrical		MBD-PR-08
☐ Energy		MBD-PR-09
☐ Accessibility		MBD-PR-10
☐ Fire sprinkler		MBD-PR-11
☐ Fire alarm		MBD-PR-12
☐ Limited-scope review or technical consulting (describe in notes)		

6 THIS SUBMITTAL

SUBMITTAL TYPE

☐ Initial ☐ Resubmittal ☐ Revision to approved plans ☐ Deferred submittal

PRIOR MBD PROJECT NO.

DOCUMENTS INCLUDED

☐ Drawings ☐ Specifications ☐ Structural calculations ☐ Geotechnical report ☐ Energy compliance forms
☐ Special inspection statement ☐ Fire protection calculations ☐ Comment response letter ☐ Other

NOTES, LOCAL AMENDMENTS OR SPECIAL INSTRUCTIONS

7 AUTHORIZATION

By signing, I confirm that I am authorized to request this review for the project and that the information on this form is accurate.

SIGNATURE

PRINTED NAME

DATE

FOR MY BUILDING DEPARTMENT USE ONLY

MBD PROJECT NO.

DATE RECEIVED

REVIEWER(S)

FEE OR INVOICE NO.

COMMENTS DUE