

Fill out completely

For Postal Delivery

Department of Labor and Industries
Factory Assembled Structures
PO Box 44430
Olympia WA 98504-4430



For Non-Postal Delivery (e.g., FedEx, UPS)

Department of Labor and Industries
7273 Linderson Way SW MS 44430
Tumwater WA 98501

Company/Owner
Address
City/State/ZIP
Phone No. FAX No.

FOR DEPT USE ONLY
Fee Ledger Sheet No.
Application ID
Ap No.
Date approved
Expiration date

PLAN APPROVAL REQUEST
CONVERSION VENDOR/ MEDICAL UNITS

Contact person's printed name:
Date
Fee enclosed \$
Signature
Phone No
FAX No

See WAC 296-150V-3000 for fees required.

New plan design \$
Addendum \$
Resubmittal
Filing Fee \$

Size of structure:
Width: Length: Area (Sq Ft):
Type heat: (If none, mark N/A)
Type of fuel:
Insulation values:
Electrical service: Amps
WSEC compliance chapter: (Zone 1) (Only required if...)
Please contact Dept for forms
Energy calculations:
Air conditioning

Concentrated load calculations
HVAC drawing
Panel box schedule/Electric load calc's
Floor plan drawing
Gas Piping drawing
Plumbing systems:
Water supply drawing
Drain and vent drawing
Operating pressure
No of fixtures to
Total developed length

Instructions for completing F622-035-000 Plan Approval Request Conversion and Vendor/Medical Units

1. Provide owner name, address, and telephone number and your fax number if available.
2. Print and sign the name of the contact person responsible for this plan and for information. Include on this line the date the plan was sent to the Department and the total fee enclosed for this building. See [WAC 296-150V-3000](#) for the fee schedules. Provide an extension number or direct line and FAX number if available for the contact person.
3. Use this line if a new plan is submitted for the first time. Indicate the appropriate fee to be paid. See [WAC 296-150V-3000](#).
4. This line is to be used if this submittal is an ADDENDUM to a previously approved plan. Indicate the fee paid and the approved plan number that you wish to amend.
5. Fill in this line only if this is a resubmittal response to a previously reviewed and rejected plan. Indicate the fee required for resubmittals. See [WAC 296-150V-3000](#).
6. This is a one-time-only fee for first-time applicants.
7. Show the width and length of the structure and the square footage.
8. If applicable, indicate the type of heating to be installed in the structure. Use "other" to describe systems not shown or indicate N/A if no heating or cooling system is installed. Drive train generated heat or cooling does not require energy code compliance.
9. If applicable check the type of fuel used in the heating or cooling system.
10. If applicable list the insulation value for floors, walls and roof that are to be installed in the structure or mark N/A if no insulation provided.
11. Provide the size of the Electric Service for the whole structure. The size of the main breaker is usually the same as the electrical service.
12. Mark the appropriate box if the Energy code compliance is obtained by the systems analysis approach, the components performance approach, or if a prescriptive path was used. If Energy Code compliance is obtained by calculations they must be attached with the submittal. Mark box 'yes' or 'no' regarding air conditioning installed in the coach. If Energy code compliance is required contact the department for correct forms.
13. This section is meant to act as a checklist for some of the information that may be necessary to approve the structure. Not all elements may be applicable to your plan and as such may be 'N/A'ed.
14. Provide plumbing system operating pressure whenever plumbing fixtures are installed in the structure. Provide the number of individual fixtures that are installed in the structure. Provide the total developed length of the water supply system. For self contained commercial coach units, the developed length is from the pump to the most remote fixture.