



**SNOHOMISH
COUNTY**
HEALTH DEPARTMENT

SCHOOL PLAN REVIEW APPLICATION

NAME AND ADDRESS OF SCHOOL:
(check all that apply)

- New Construction
- New Portable (moving existing portable does not need review)
- Remodel
- Moving to existing building

Property Tax Account Number

Name

Street Address

City

Zip Code

SCHOOL DISTRICT AND ADDRESS:

Name

Street Address

City

Zip Code

CONTACT PERSON AND ADDRESS:
(for plan review purposes)

Name (PLEASE PRINT)

Mailing Address

PROJECT START DATE

City

Zip Code

COMPLETION/OPENING DATE

Phone Number

Email

LOCAL BUILDING INSPECTION AGENCY: _____

WATER SUPPLY

- Public: _____
name of system
- Private Well

SEWAGE DISPOSAL

- Sewer
- Onsite Sewage Disposal

Review of these plans is based upon the rules and regulations of the State Board of Health for Environmental Sanitation Primary and Secondary Schools, WAC 246-366. Other agency approvals requisite to your actual construction may include County or City Planning, Building, Plumbing and Fire Departments, Water and Sewer Utilities.

If the amount of time for plan review exceeds two weeks, you will be notified.

**INVOICE WILL BE SENT TO CONTACT PERSON. SEE CURRENT FEE SCHEDULE.
Purchase Orders are NOT accepted.**

NOTE: Please provide Supplemental Information (architectural drawings) & pages 1-7 attached to this Application.

X _____
Signature of Applicant

Date

SCHOOL PLAN REVIEW CHECKLIST

Please indicate which components are applicable for this project.

NAME AND ADDRESS OF SCHOOL: _____

PROJECT LOGISTICS:

- | | Yes | No | N/A |
|--|--------------------------|--------------------------|--------------------------|
| 1. Will students be displaced during the construction period? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A. If yes, where will displaced students be schooled? | | | |
| _____ | | | |
| B. If students are to be schooled at another campus during construction, please provide school name and address. | | | |
| _____ | | | |
| 2. Will construction take place while students are on campus? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A. Will a gate encompass the construction zone and prohibit student access? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Will construction noise be limited during school hours? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Will foodservice (main school kitchen) be impacted by the project? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| If yes, please describe alternative means of foodservice to be provided: | | | |
| _____ | | | |

Note: The following items **cannot** be interrupted during hours of meal preparation and service:

- 1) Potable water service, and
- 2) Electricity.

PORTABLE CLASSROOMS

- Proposed Portable Classrooms. Manufacturer Name/Model #:

BUILDINGS: WAC 246-366-050

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| 1. Ceiling Height - at least 8 feet? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Projections (light fixtures, beams, etc.) at least 7 feet from floor? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Stairways have handrails? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Steps have non-slip treads? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Floors have easily cleanable surfaces? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Environmental Health Division

3020 Rucker Avenue, Suite 104 ■ Everett, WA 98201-3900 ■ fax: 425.339.5254 ■ tel: 425.339.5250

School Plan Review Checklist
Supplemental Information Requested

- | | Yes | No | N/A |
|--|--------------------------|--------------------------|--------------------------|
| 6. Windows provided in every classroom, excluding special purpose instruction areas? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Exterior sun control excludes direct sunlight from classrooms during at least 80% of normal school hours or school air conditioned? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PLUMBING, WATER SUPPLY, FIXTURES: WAC 246-366-060

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 1. School served by an approved public water supply? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Adequate, conveniently located toilet and handwashing facilities provided for students and employees? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Single-service towels or warm air dryers provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Temperature controls provided for handwash (100-120° F)? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Showers with hot water provided for physical education classes grade 9 and above? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Shower and drying areas have impervious, non-skid floors? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Walls in shower areas are impervious to water up to shower head height? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Locker and dressing room floors water impervious?
<input type="checkbox"/> Washable walls?
<input type="checkbox"/> Floor drains provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SEWAGE DISPOSAL: WAC 246-366-070

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| 1. Sewage and waste water drained to an approved sewage disposal system? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have engineered plans for on-site disposal been approved? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

VENTILATION: WAC 246-366-080

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| 1. Are student and staff areas vented to keep them free of odor, excessive heat, and condensation? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Are sources producing air contaminants of public health significance locally vented? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

HEATING (Temperature Control): WAC 246-366-090

- | | Yes | No | N/A |
|---|--------------------------|--------------------------|--------------------------|
| 1. Are heating, ventilation and air conditioning systems equipped with automatic room temperature controls? Student and staff areas can be heated to a minimum of 65°F, except for the gym which may be 60°F. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

SOUND CONTROL: WAC 246-366-110

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 1. Is background noise from HVAC system limited? (Designed to limit ambient noise levels to values published by ASHRA.) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Will maximum ambient noise level in vocational areas when all exhaust systems are operating not exceed 65 dBA? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

LIGHTING: WAC 246-366-120

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| 1. Is lighting designed to provide a maintained light intensity when measured 30 inches above the floor or on work surfaces, as follows: | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|--|--------------------------|--------------------------|--------------------------|

<u>Area</u>	<u>Foot-Candles</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General instruction areas	30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Special areas (sewing, labs, chemical storage)	50	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Food preparation	30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Non-instructional areas	10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gymnasium	20	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

- | | | | |
|------------------------------------|--------------------------|--------------------------|--------------------------|
| 2. Does lighting minimize shadows? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|------------------------------------|--------------------------|--------------------------|--------------------------|

SCIENCE AREA:

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| 1. Handwash sink(s) provided with soap and paper towel dispensers? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Emergency eyewash provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| A. Hands-free? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| B. Flow rate of at least 0.4 gpm for at least 15 minutes | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| C. Tepid water? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| D. Floor drain provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| E. Within 50 feet or 10 seconds from all science lab stations? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Emergency safety shower with floor drain provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Chemical storage area provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Mechanically vented, not recirculated | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Lockable | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> One hour fire rating for walls and doors | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Self-closing door(s) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Large enough to properly separate chemicals | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

School Plan Review Checklist

Supplemental Information Requested

Page 4

	Yes	No	N/A
<input type="checkbox"/> Adequate lighting (50 f.c.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Shelf stoppers (lips) on storage shelves	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Storage shelving secured	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Two exits (recommended)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Natural gas provided to workstations?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Master gas shut-off easily accessible and clearly marked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Fume hood if needed; 100 linear feet per minute (lfm) face velocity, have make-up air source; in a place not subject to drafts or excess traffic, vented to outside(1/3 building height or reduced outlet for increased exhaust velocity) so not near air intakes; unrestricted vent; stainless steel ducts recommended; joints welded; exterior electrical, gas and water controls; motor distal to hood; safety glass in sash; spark proof motor; vapor proof lights, constructed of non-flammable material?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Storage facilities for flammable materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Fire cabinets meet fire code?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Refrigerators (chemical storage) nonspark?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Sinks with hot and cold water?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Acid resistant plumbing?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Exterior gas control?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Are two widely marked exits available?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Electrical outlets in wet areas have ground fault interrupters (GFI's)?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. Table tops made of noncombustible materials?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

ART ROOM:

1. Handwash sink(s) provided equipped with soap and paper towel dispensers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Chemical storage provided? <i>Note:</i> if more than 10 gallons of flammables are stored, a flammable cabinet is required.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Will a kiln be used?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Dedicated mechanical exhaust system vented to outside?			
<input type="checkbox"/> Kiln located outside in fenced area?			

School Plan Review Checklist
Supplemental Information Requested

- | | Yes | No | N/A |
|--|--------------------------|--------------------------|--------------------------|
| 4. Will 3D printers be used? If yes, a dedicated mechanical exhaust system to the outside is required. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Spray booth provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Emergency eyewash provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

AUTO SHOP:

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 1. Handwash sink(s) provided with soap and paper towel dispensers? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Emergency eyewash provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Master electrical shut-off easily accessible and clearly marked? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

WELDING/METAL SHOP:

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 1. Handwash sink(s) provided with soap and paper towel dispensers? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Emergency eyewash provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Fume collection system provided for welding booths? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Master electrical shut-off easily accessible and clearly marked? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

WOOD SHOP:

- | | | | |
|---|--------------------------|--------------------------|--------------------------|
| 1. Handwash sink(s) provided with soap and paper towel dispensers? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Master electrical shut-off easily accessible and clearly marked? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Sawdust collection system provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Emergency eyewash provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Spray booth provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Lumber storage area provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Yes No N/A

HORTICULTURE:

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| 1. Handwash sink(s) provided with soap and paper towel dispensers? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Vented storage cabinet provided for agricultural chemicals? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PLAYGROUND AREAS:

- | | | | |
|--|--------------------------|--------------------------|--------------------------|
| 1. Does the design and structural integrity of the playground equipment promote safety? Are protrusions, clothing entanglements, head and or neck entrapment, or crush and shear points minimized? [See <u>Handbook for Public Playground Safety</u> , 2010, U.S. Consumer Product Safety Commission (Publication No. 325) for specific equipment guidelines.] | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Equipment properly anchored? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Each piece of equipment has an adequate use zone? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Resilient surfacing material provided under playground equipment? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. The quantity of material along with the scope of adequate coverage under each piece of equipment? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Drainage of playground area (including area under equipment) adequate? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Tires have drainage holes to prevent accumulation of standing water? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. Fences or other means necessary to protect children from traffic hazards (roads, railroad, parking lots, etc.) provided? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |