



# TRI-PLEX

*\*Complete and attach this cover sheet to your building permit application.*

## SHEET INDEX (2022 CA Building Codes Approved)

- G0.1 COVER SHEET
- G0.2 NOTES & SYMBOLS
- G0.3 CA GREEN BUILDING SHEET 1
- G0.4 CA GREEN BUILDING SHEET 2
- A1.1 FLOOR PLAN / CROSS SECTION / ROOF PLAN / ELECTRICAL
- A 2 ELEVATION
- S1.1 BRACE WALL PLAN / FOUNDATION PLAN
- S 2 BRACE WALL PLAN / FOUNDATION PLAN
- S1.3 ROOF FRAMING PLAN
- A5.1 FOUNDATION DETAILS
- A5.2 FRAMING DETAILS
- A 3 NOTES
- A5.4 NOTES
- P1.1 PLUMBING PLAN
- M.01 HEATING, VENTILATION AND AIR CONDITIONING
- M.02 HEATING, VENTILATION AND AIR CONDITIONING
- EN.01 UNIT 1 ENERGY COMPLIANCE
- EN.02 UNIT 2 ENERGY COMPLIANCE
- EN.03 UNIT 3 ENERGY COMPLIANCE

## ADDITIONAL SUBMITTAL ITEMS

- Building Permit Application
- Site Plan (\*Ch. 11A features required)
- Engineered truss design and supporting calculations
- Moisture and Compaction Report required at Foundation Inspection
- Waiver and Release Form
- Fire Sprinkler Plan
- Solar/PV Plan
- Demolition Permit (If required)
- Ch. 11A Exterior Accessibility Plan

\*Ch.11A plans shall be designed according to CA Building Code Sections 1101A and 1102A.1

- Ch. 11B Accessibility Plan

\*If Public Funds are being used, Submit plans according to CA Building Code Section 11B-233.3

## PROJECT DESCRIPTION

New construction of a 1-story, TRI-PLEX. LAYOUT OPTION:  
SQUARE FOOTAGE OPTION:  2,158sqft  2,409sqft

### SITE INFORMATION

STREET ADDRESS: \_\_\_\_\_, MERCED, CA

APN: \_\_\_\_\_

### SEWER, WATER, GAS, and ELECTRICAL

- Proposed connection to residence water lateral- show on site plan
- Proposed connection to residence sewer lateral- show on site plan
- Proposed connection to residence gas. Detail conduit on site and trenching detail. - show on site plan
- Proposed connection to electrical. Detail conduit on site and trenching detail. - show on site plan

## DIRECTORY

SITE PLAN AND TITLE SHEET PREPARED BY:

COMPANY: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PROPERTY OWNER:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

CITY OF MERCED ACCESSORY DWELLING UNIT PROGRAM

*Note: Contact Inspection Services Division at (209) 385-4773 or inspectionservicesweb@cityofmerced.org for assistance.*