Ohio Residential Plan Submittal Requirement

Mechanical Systems Description Form

Job site

Address: _____ **Contractor:** _____

WORK TYPE: **[ ] NEW** **[ ] REPLACEMENT**

HEATING, VENTILATION & AIR CONDITIONING SYSTEM DESCRIPTIONS (select items as listed)

1. Furnace location:	Basement	Garage	Attic	Other_____	
2. Water heater location:	Basement	Garage	Attic	Other_____	
3. Condensing unit location:	Rear yard	Side yard	(left)	(right)	
4. Furnace / water-heater capacity:	BTU's_____				
5. Fuel type:	Natural gas	L.P.	Electric		
6. Furnace AFUE rating:	80%	90% +			
7. Ductwork type:	Sheet metal	Duct board			
8. Air conditioner capacity:	_____Ton				
9. Air conditioning SEER rating:	11	12	13	14	15 16
10. Location of gas meter	Front yard	Rear yard	Side yard	(left)	(right)
11. Location of vent terminations for: (**Dryer**: front/rear/side yard/other_____)					
(**Furnace:** front/rear/side yard/other_____)					
(**Water heater**: front/rear/side yard/other_____)					

PLUMBING SYSTEM DESCRIPTION **(write in number of fixtures below)**

Description	Count	Description	Count	Description	Count
Water closets		Dishwashers		Sewage grinders	
Lavatory sinks		Garbage disposals		Bidets	
Whirlpool tubs		Drinking fountains		Laboratory sinks	
Hot tubs		Urinals		Hot water dispensers	
Showers		Shampoo bowls		Water heaters	
Floor drains		Grease/oil intercep		Backflow devices	
Laundry tubs		Floor sinks		Washers automatic	
Select size below for building main drain:				Sump pumps	
3 inch 4 inch 6 inch					
Building water service size: ¾ inch 1 inch 1 ¼ inch 1 ½ inch 2 inch					
Building water service type: copper pvc/plastic					

ELECTRICAL SYSTEM DESCRIPTION (write in sizes required and select items listed below)

Underground service [ ]	Single phase [ ]
Overhead service [ ]	Three phase [ ]
Service conductor size:	Number of 120 volt circuits:
Service conductor type: (aluminum) (copper)	Number of 240 volt circuits:
Grounding electrode conductor size:	Service size:
Grounding electrode conductor type: (aluminum) (copper)	Service location:

Approved by_____ Date _____