



BUILDING DIVISION
Development Services
100 N Wilcox Street
Castle Rock
CO. 80104

CUSTOM HOME APPLICATION CHECKLIST 2012 IRC

The Town of Castle Rock requires electronic submission of all permit applications and required documents in pdf format via eTrakIT

Please provide the following information:

All drawings **must have** the Engineer Stamp including the Architectural drawings

- Completed Permit Application (Include the completed worksheet with your submittal)
- Completed square footage worksheet
- Site Plan
- DESC Plan
- Verify structural plans are designed for 35# snow load, 90 MPH sustained wind with exposure C or 105 MPH 3 Second Gust
- Provide **Wet Stamped** Architectural Drawings. Include elevations, sections and stair geometry
- Provide **Wet Stamped** Electrical Plans. Indicate 75% of permanently installed lighting fixtures shall contain high efficiency lamps per N.1104.1
- Provide **Wet Stamped** Soils Report
- Provide **Wet Stamped** roof ventilation plans
- Provide **Wet-Stamped** Structural Engineered Framing and Foundation Plans
- Provide **Wet-Stamped** Roof Trusses with Layout. Trusses must be designed To **Truss Plate Institute 2002-1**
- Provide 4.5.05 REScheck Compliance Certificate to the 2012 IECC (Download @ www.energycodes.gov)
- Provide Manual J,D & S
- Provide HOA approval letter or stamp on plans

- Drive Way and Culvert Plans – *For Diamond Ridge Estates and Castle RidgeEast only*
- For Metro Districts Certificates please contact:
 - o Castlewood Ranch and Woodlands 303-987-0835
 - o Heckendorf Ranch 303-818-9365
 - o Founders Village 303-790-4548
 - o Meadows 303-779-5710
 - o Crystal Valley ranch 303-779-5710
 - o Maher Ranch and Castle Oaks 303-689-0833
- Provide completed Landscape Irrigation Design Checklist.

Please call Ruth Stadler at 720-733-6045 for questions about Landscape and Irrigation plan requirements.

All contractors must be registered with the Town of Castle Rock prior to permit issuance.

For contractor registration information please select [etrakit](http://etrakit.com) or crgov.com/building

Please contact buildingcounter@crgov.com for alternate submittal methods or phone 720-733-3527

Department Mission: "Implementing Community Vision through Development Activities"

Date:
Permit Number:
Address:

Name of Applicant:



RESIDENTIAL WATER FIXTURE UNIT CALCULATIONS					
FIXTURE:		Quantity		Water FU	TOTAL WATER F.U.
Bathtub (with/without overhead shower head)	Private		x	1.4	
Clothes washer	Private		x	1.4	
Dishwasher (DW)	Private		x	1.4	
3 Piece Bath Group(1 sink,toilet,tub)	Private		x	2.6	
4 Piece Bath Group(1sink, toilet,tub, shower stall)	Private		x	3.8	
5 Piece Bath Group(2sinks, toilet,tub, shower stall)	Private		x	4.5	
Half Bath Group (toilet and sink only)	Private		x	1.4	
Hose Bibb (sillcock)	Private		x	2.5	
Kitchen group(DW & Sink with/without garbage grinder)	Private		x	2.5	
Kitchen Sink	Private		x	1.4	
Laundry group(clothes washer standpipe & laundry tub)	Private		x	2.5	
Laundry tub	Private		x	1.4	
Lavatory (sink)	Private		x	0.7	
Shower stall	Private		x	1.4	
Water closet/toilet (tank type)	Private		x	1.0	
DO NOT WRITE BELOW, TOCR UTILITIES TO COMPLETE. TOTALS :					
				Water FU	
Peak Demand Estimate (Taken from Table P2903.6(1) 2009 IRC=					GPM
Highest Irrigation Zone assumed 7 GPM unless irr. calculations are submitted. GPM flow =					GPM
TOTAL GPM =					GPM
SFE EQUIVALENT =					

RESIDENTIAL IRRIGATION CHART



Date:

Permit Number:

Address:

Registered Professional Name/Number:

Zone	Plant Type (Turf, Native, Shrubs, Perennials, Trees, Annuals, etc.)	Head Type (Rotors, Sprays, Bubblers, Drip, SDI, etc.)	Nozzle (Nozzle/ Emitter size)	Gpm/Nozzle	Total nozzles per zone	GPM (Per Zone)
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
Total GPM						
Highest Zone GPM						

***Only to be used if irrigating/landscaping entire lot.**



Landscape and Irrigation Design Affidavit

(To be submitted in conformance with the Town of Castle Rock Landscape Regulations)

Date Submitted: _____

Building Permit Number: _____

Project Name: _____

Landscape Plan Designer: _____

Town Registration Number: _____

Irrigation Plan Designer: _____

Town Registration Number: _____

I hereby affirm that the landscape plans for the above noted single family residential building permit have been prepared under my direct supervision in accordance with the attached Utilities Department "Landscape Checklist (Model or Custom Home Plans)" as well as all applicable Town of Castle Rock and State of Colorado standards and statutes, respectively; and that I am fully responsible for all design and revisions relative to said plans.

Signature of Landscape Designer

I hereby affirm that the irrigation plans for the above noted single family residential building permit have been prepared under my direct supervision in accordance with the attached Utilities Department "Irrigation Checklist (Model or Custom Home Plans)" as well as all applicable Town of Castle Rock and State of Colorado standards and statutes, respectively; and that I am fully responsible for all design and revisions relative to said plans.

Signature of Irrigation Designer



Landscape Checklist
(Master, Model and Custom Home Plans)

The purpose of this checklist is to identify minimum landscape requirements for Master plan, model and custom home landscape and irrigation design, installation and inspection. The final design, installation and inspection should address all items required in section 4 and 6 of the Town of Castle Rock Landscape Regulations. These landscape regulations can be found online at www.crgov.com.

Owner/Builder and Model Name and Number _____

address of property: _____

Building permit number: _____

1. Landscape designed per Town regulations? _____

2. Maximum turf grass designed per Town regulations? _____

3. Type of trees in the landscape identified? _____

4. Minimum tree size designed? _____

5. Other plants used in the landscape identified? _____

6. Minimum size of shrubs meets the Town minimum size? _____

7. Type of mulch and depth of mulch designed per Town of Castle Rock minimum required? _____

8. Soil amendments specified is minimum per Town of Castle Rock regulations?
(4 cu. yds. per 1,000 square feet of landscaped area and rototilled into 6 inches deep) _____

I hereby affirm that these landscape plans were prepared by me in accordance with all applicable Town of Castle Rock Landscape Regulations and that I am fully responsible for these landscape designs.

Landscape Designer name: _____

Landscape Designer's e-mail: _____

Town of Castle Rock Registration number: _____