

PLAN REVIEW APPLICATION

530-583-4692
305 Olympic Valley Rd
PO Box 2026
Olympic Valley, CA 96146
www.ovpsd.org



Owner/Property Information

Owner Name: _____ Date: _____
Owner Mailing Address: _____
Owner Phone: _____ Owner Email: _____
Property Address: _____
APN: _____ Building Permit #: _____
Project Description: _____

I do hereby declare that the statements contained herein and, in the documents, maps, plans and specifications attached and submitted herewith are true and correct. I also agree to an inspection at the time of completion of construction and anytime thereafter to verify the number of fixture units. I understand the Olympic Valley Fire Department has no responsibility or liability for the installation of piping connecting the LPG tank to the regulator. I agree to be bound by the current policy, procedures and regulations applicable to the issuance of Sewer and/or Water Service Permit(s) and to the service thereafter and authorize the District to cancel the permit(s) in the event I or my agent violates any of the provisions contained therein.

Applicant (Contractor/Architect) Information

Applicant Email Address: _____

Owner/Applicant Signature: _____ Phone: _____
Applicant Name & Address: _____ Phone: _____
(if different from owner name)

FEES (TO BE COMPLETED BY DISTRICT STAFF ONLY)

Application Fee \$ 20.00
Engineering Plan Check* \$ _____
**District Water Code section 6.01 Plan Checking Fees states, "Any person required by this chapter to have improvement plans checked by the District shall reimburse the District for the actual total costs to the District of providing such a service."*

Sewer Fees

Plan Checking Fee \$ 50.00
Total Equivalent Fixture Units (EFU) SEWER _____ Current Meter size _____
Addition or remodel: EFU _____ to be added to dwelling. New required meter size _____
1 inch meter: \$5,627 (< 127 EFU's) \$ _____
1.5 inch meter: \$11,254 \$ _____
2 inch meter: \$18,006 \$ _____
Difference in cost from current meter size fees paid to new meter size fees \$ _____

Water Fees

Plan Checking Fee \$ 50.00
Total Equivalent Fixture Units (EFU) WATER _____ Current Meter size _____
Addition or Remodel: EFU _____ to be added to dwelling New required meter size _____
1 inch meter: \$10,414 (< 127 EFU's) \$ _____
1.5 inch meter: \$20,828 \$ _____
2 inch meter: \$33,325 \$ _____
Difference in cost from current meter size fees paid to new meter size fees \$ _____
Meter Installation Fee (1" Meter: \$435): \$ _____

*In the event that the actual cost is greater than the fee, the difference shall be collected by the District prior to providing water service.

Fire Fees

OVFD Fire Protection Fee:
All Residential Land Use, \$2.81 per square foot \$ _____
Accessory Dwelling Unit >750 sq ft, \$2.81 per square foot \$ _____
Retail/Commercial Land Use, \$3.13 per square foot \$ _____
Office Land Use, \$4.03 per square foot \$ _____
Industrial Land Use, \$2.24 per square foot \$ _____
Hotel/Lodging Land Use, \$2.61 per square foot \$ _____
Per the Current OVFD Fire & Life Safety Cost Recovery \$ _____

TOTAL \$ _____

Received by: _____ Date: _____ Check #: _____

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Please fill out the appropriate sections below pertaining to your project.

Existing conditioned space/floor area (Sq. Ft.)

Living _____ Garage _____ Storage/Basement _____ Deck/Porch _____ Other _____

How much new conditioned space/floor area (Sq. Ft.) is being added?

Living _____ Garage _____ Storage/Basement _____ Deck/Porch _____ Other _____

How much new conditioned ADU space/floor area (Sq. Ft.) is being added?

Living _____ Garage _____ Storage/Basement _____ Deck/Porch _____ Other _____

Existing unconditioned space/floor area (Sq. Ft.)

Living _____ Garage _____ Storage/Basement _____ Deck/Porch _____ Other _____

How much new unconditioned space/floor area (Sq. Ft.) is being added?

Living _____ Garage _____ Storage/Basement _____ Deck/Porch _____ Other _____

If demo, what is the square footage being demoed?

Living _____ Garage _____ Storage/Basement _____ Deck/Porch _____ Other _____

If converting, what is the total square footage being converted? _____

Additional comments: _____

Project Type: ☐ New Construction ☐ Demo/Rebuild ☐ Remodel/Addition ☐ Converting

Project Occupancy (As issued by Placer County): _____

General Contractor Information, if applicable:

Name: _____ Business Name: _____ CA License #: _____
Phone Number: _____ Email: _____

Additional Contact Information, if applicable:

Name: _____ Role with Project: _____
Phone Number: _____ Email: _____

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Review the statements below. Check the boxes once the statements have been reviewed.

Plan review turnaround is approximately 7-10 business days from the date the District receives the completed application and plans.

If any of the requirements are missing, plans will not be approved and will be subject to resubmittals and resubmittal fees. All resubmittals trigger a new 7-10 business day turnaround.

Check the requirements to ensure all are met prior to submitting.

- ☐ A complete set of the construction plans stamped and signed by the design professional(s).
- ☐ A complete set of the construction plans must be submitted electronically.
- ☐ All required notes have been placed verbatim on the construction plans, if applicable.
- ☐ The Placer County issued project permit number. If the Placer County permit issuance checklist has already been issued, include it with the submittal.
- ☐ Read and understand Olympic Valley's locally amended Fire Code, Water, and Sewer code, if applicable.

Please note, once the plans are reviewed/approved AND any cost recovery/mitigation fees have been paid, OVPSD/OVFD will sign off on the workflow in Placer County's permitting system and add any fire flags/holds/notes that will be required before the County's project final inspection.

The approval of this review will allow for permit issuance from the County if their requirements have been met.

I acknowledge that I have read and understand the plan review requirements set forth by Olympic Valley Public Service District and Fire Department. I further understand that failure to comply with these requirements will result in the rejection of the plans/project and will necessitate resubmittal, including applicable resubmittal fees. By signing below, I confirm that this submittal meets all stated requirements.

Signature: _____

Date: _____