

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: \$5,846 \$ _____

1.5 inch meter: \$11,693 \$ _____

2 inch meter: \$18,708 \$ _____

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: \$11,409 \$ _____

1.5 inch meter: \$22,819 \$ _____

2 inch meter: \$36,509 \$ _____

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, \$2.77 per square foot \$ _____

Accessory Dwelling Unit >750 sq ft, \$2.77 per square foot \$ _____

Retail/Commercial Land Use, \$3.08 per square foot \$ _____

Office Land Use, \$3.97 per square foot \$ _____

Industrial Land Use, \$2.21 per square foot \$ _____

Hotel/Lodging Land Use, \$2.57 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

Is the property currently sprinklered? ☐ Yes ☐ No

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: _____

Name: _____ Role with Project: _____

Phone Number: _____ Email: _____

Name: _____ Role with Project: _____

Phone Number: _____ Email: _____

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

Plan review turnaround is approximately 15 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 15 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) including but not limited to:

- Property lines and adjacent streets or roads.
- Total acreage or square footage of the parcel.
- Footprint/outline of all structures, including garages, shops, barns, etc.
- Driveway plan view showing width, length, turnarounds, and radii.
- Driveway profile showing the percent grade from the access road to the structure.
- All floors and rooms are shown with total dwelling square footage.
- Garage, shop, or other accessory buildings shown with square footage.
- Location of smoke and carbon monoxide detectors.
- Smoke detectors are required in each bedroom and each corridor on every level with bedrooms.
- Carbon monoxide detectors are required within 20 feet of each bedroom door.
- See sheets _____ for smoke alarm locations.
- Electrical main disconnect location.
- Generator location (if applicable).
- Open flame appliances/devices.
- Propane tank location and size (in gallons) and secondary regulator locations.
- Liquefied petroleum gas tank located a minimum of 10 feet from the structure and property line.
(For tanks up to 500 gallons: Code requires clearance for larger tanks)
- Location of secondary regulator (must be on the gable end).

☐ 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: _____

Final inspection is required. Please schedule your final inspection at least 48 business hours in advance.