

APPLICATION INFORMATION FILED FOR THE PROJECT CONSTRUCTION DESIGN RELEASE

	х	STANDARD	PARTIAL		
İ		FOUNDATION REQUEST			

SBC Project Number 402844

Filing Date 09/06/2018

1816			402044	09/06/2018	
	PROJECT	LOCATION			
Name of project T Mobile			Closest intersect		
Address	Suite	or floor	Direction FROM intersection		
206 W Ireland Rd			TO project East		
City	Cor	unty	in city Is pro	ject State [
SOUTH BEND	IN 00000 ST	JOSEPH	limits? Yes	Owned No	
	OWNER'S	CERTIFICATE			
Authorized signature		Name of owner or	r business		
Name(typed or printed)		Address(number	and street)		
Christopher	m Urbanczyk	2211 N. Elston	2211	N. Elston	
Title		City, State, ZII	P code 60614		
Telephone Number	Fax Number	E-Mail	E-Mail Facility use		
8472083616	7737963037	mitch@gwproper	mitch@gwproperties.com		
Signature		Name of firm Design Studio	Name of firm Pesign Studio 24 LLC		
Name Christopher Matthew Urbanczyk		Address 2211	Address 2211 N. Elston		
Indiana registration number AR10700007	City, state, Zi	City, state, ZIP code Chicago IL 60614			
Telephone Number 8472083616	E-Mail		Fax	8478857751	
Designated inspecting design Urbanczyk	n professional	Indiana registrat AR10700007	ion number	Telephone Number	
PROJECT DESCRIPTION			FLOOR AREAS	ESTIMATED COST	
cope of work		Remodeling	Total Project A		
s this costruction the resuffire/natural disaster $_{ m N}$			Existing at the bottom of report		
ire suppression system in uilding Full	Detailed suppression	Detailed suppression system plans and specs To Follow		Num. of Buildings / Num. of Types 1 1	
f partial, specify where*	Located in flood p	Located in flood plain (4 county plan commission)		D F	
uilding construction type nd occupancy classification	I	Building height (Stories)*		a /cost/type	
ndiana rehabilitation stand	ard(Rule *) Evaluation d	ocuments provided?		onversion rule)proposed?	
oes project include:			ı		
Elevator or lift	Combustible fibers sto	rage Firew	orks storage	Explosive storage	
High pile storage	Boiler or pressure ves	sel Hazar	dous or flammable	materials storage	
escribe proposed used of fa tored or handled Retail t	cility IN DETAIL, includ	ing type of flamma	ble or combustibl	e materials	
escribe previous or current	use of facitlity IN DET	AIL(if existing fa	cility).*	Number of persons employed 5	
eneral comments*				Number of persons (public) 50	
	GENERAL	INFORMATION		•	
oes project include use of actory built modular or m		ease or No	Modu	alar/mobile seal numb	
ame of manufacture	Master pl	an/Modular file			
Facility Type Category	She	ell Area Tena	nt Area	Cost \$	
н	0	2400			

Facility Type Category Area New Area Addition Area Remodeled Cost \$

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