

APPLICATION INFORMATION FILED FOR THE PROJECT CONSTRUCTION DESIGN RELEASE

× STANDARD PARTIAL
x FOUNDATION REQUEST

SBC Project Number 407125

Filing Date 04/02/2019

1010							
	PRO	OJECT I	LOCATION				
Name of project		osest inters					
South Ben		st	reet or road	Darden Road			
Address	r floor		Direction FROM intersection				
52554 State Rd 933		TO	project sou	ıth			
City		Coun	ty	in	city Is p	project State	
SOUTH BEND	IN 46637	ST J	OSEPH		mits? Ye	INO I	
	OWNI	ER'S CE	RTIFICATE				
Authorized signature	Name of owner or business Jai Jagdish Hotels, LLC						
Name (typed as assisted)							
Name(typed or printed)			Address(number and street) 50970 Stonebridge Drive 50970 Stonebridge Drive				
Sam Title	Patel		City, State,				
Member			Granger	211 0	4653	30	
Telephone Number	Fax Number		E-Mail		F	Facility use	
5743159700	5745370808		spatel@ganes	shhote	ls.com	-	
3.15233.63	0.200.0000		zpuco-cguiio.		,		
Signature			Name of fir	m			
	Maust Architectural Services, Inc.						
Name MICHAEL			Address 11	L2 Nort	h Main Stree	et	
MAUST							
Indiana registration number AR19600150			City, state Goshen	, ZIP	code	IN 46526	
Telephone Number 5745378500	E-Mail				Fax	5745370808	
Designated inspecting design	professional	1	ndiana regist R19600150	ration	number	Telephone Number	
DDO TECH DECCRIPATION				731	. OOD 3DE30	HOMEWAND COOK	
PROJECT DESCRIPTION					LOOR AREAS		
Scope of work New Buildin	g					t Area Sq.ft.	
Is this costruction the result Sewer					43460 Existing	Areas below or	
of fire/natural disaster $_{ m N}$	and the second second				0	at the bottom of report	
Fire suppression system in	Detailed suppr	Detailed suppression system plans				dings / Num. of Types	
building Full	and specs	To Fol			1	1	
If partial, specify where*	Located in flo	ood pla	in (4 county	7 .	A	B D F	
	plan commissic	on)	N				
Building construction type	Buil	Building height 4			E C A	Area /cost/type	
and occupancy classification	(Sto	ories)*	-				
						f conversion rule 13)proposed? No	
Does project include:							
X Elevator or lift	Combustible fibers	s stora	ige Fi	irework	s storage	Explosive storage	
High pile storage	Boiler or pressure	e vesse	el Ha	azardou	ıs or flammak	ble materials storage	
Describe proposed used of fac stored or handled Hotel	ility IN DETAIL, ir	ncludir	ng type of fla	ammable	e or combust	ible materials	
Describe previous or current	Number of persons						
N/A General comments*						employed 6	
General comments						Number of persons (public) 360	
	GENE	ZRAT. T	INFORMATION	J		(Public)	
Does project include use of a				10 10	Th. i	Modular/mobile seal numb	
a factory built modular or mo		. TETES	.DC Or P	,,,	IV.	TOGGTAL / MODITE SEAT HUMB	
Name of manufacture		er plar	n/Modular fil	e			
Facility Type Category	Area New				modeled	Cost \$	
					340104	COBC Y	
New Hotel A	43460	0	C	,			