



APPLICATION INFORMATION FILED
FOR THE PROJECT
CONSTRUCTION DESIGN RELEASE

☒ STANDARD ☐ PARTIAL
FOUNDATION REQUEST

SBC Project Number
408618

Filing Date
06/04/2019

PROJECT LOCATION			
Name of project Ireland Road Retail Center		Closest intersecting street or road Miami Road	
Address 800 E Ireland Rd		Suite or floor	
City SOUTH BEND		County IN 46614 ST JOSEPH	Direction FROM intersection TO project West
City limits?		in city Is project	State Owned No

OWNER'S CERTIFICATE			
Authorized signature		Name of owner or business You Ji Lin	
Name (typed or printed) Sean Frederick		Address (number and street) 800 E. Ireland Rd	
Title		City, State, ZIP code South Bend 46614	
Telephone Number 5746437567	Fax Number	E-Mail Nevereleveninc@gmail.com	Facility use

Signature		Name of firm Creative Design Solutions, Inc	
Name Sean Ronald Frederick		Address 224 W. Jefferson Blvd.	
Indiana registration number AR10900028		City, state, ZIP code South Bend IN 46601	
Telephone Number 5746437567	E-Mail	Fax 1424567890	
Designated inspecting design professional Frederick		Indiana registration number AR10900028	Telephone Number

PROJECT DESCRIPTION		FLOOR AREAS		ESTIMATED COSTS	
Scope of work		Total Project Area Sq.ft. 11470		Areas below or at the bottom of report	
Is this construction the result of fire/natural disaster N	Sewer	Existing 11470			
Fire suppression system in building None	Detailed suppression system plans and specs	Num. of Buildings / Num. of Types 1 1			
If partial, specify where*	Located in flood plain (4 county plan commission) N	A B D F			
Building construction type and occupancy classification	Building height (Stories)* 1	E C Area /cost/type			
Indiana rehabilitation standard(Rule *) Evaluation documents provided? No		Use of conversion rule (Rule 13)proposed? No			

Does project include:

Elevator or lift	Combustible fibers storage	Fireworks storage	Explosive storage
High pile storage	Boiler or pressure vessel	Hazardous or flammable materials storage	

Describe proposed used of facility IN DETAIL, including type of flammable or combustible materials stored or handled

Describe previous or current use of facility IN DETAIL(if existing facility).*	Number of persons employed 2
General comments*	Number of persons (public) 50

GENERAL INFORMATION						
Does project include use of a master plan design release or a factory built modular or mobil structure?				Modular/mobile seal number		
Name of manufacture				Master plan/Modular file		
Facility Type correction	Category A	Area New 0	Area Addition 0	Area Remodeled 750	Cost \$ 0	

Facility Type	Category	Area New	Area Addition	Area Remodeled	Cost	\$
A	A	0	0	10720		