

## APPLICATION INFORMATION FILED FOR THE PROJECT CONSTRUCTION DESIGN RELEASE

	STANDARD	PARTIAL						
	FOUNDATION REQUEST							

SBC Project Number 410585

Filing Date 08/30/2019

1010									
	PRO	JECT I	LOCATION						
Name of project				C	losest i	ntersect	ing		
Panera Brea		st	street or road Brookton Dr						
Address	Address Suite or				Direction FROM intersection				
1315 E Ireland Rd		TO	o projec	t East					
City		Coun	ity			Is proj	ect		
SOUTH BEND	IN 46614	ST J	ОЅЕРН		n city imits?	Yes	State Owned	No	
	OWNE		ERTIFICATE		IIIII CD:		Ownca		
	Onne		MIII ICHIL						
Authorized signature	Name of owner or business Panera Braed								
Name(typed or printed)			Address(number and street)						
Rashad	Palmer		3630 S Geyer	3630 S Geyer Rd Suite 100					
Title	_	City, State, ZIP code							
Construction Manager			St. Louis			63127			
Telephone Number	Fax Number		E-Mail				lity use		
3149842525			rashad.palme	.palmer@panerabrea Restaurant			aurant		
Signature			Name of firm Arcvision I						
Name Frederick	J		Address 10	350 a	aig Rd				
Frederick Goglia	J		Suite 300	ou cr	ата ка				
Indiana registration number AR00920072			City, state, ZIP code St. Louis MO 63146					6	
Telephone Number 3144152400	E-Mail				Fax		3144152300		
Designated inspecting design	professional	I	ndiana regist	ratio	n numbei	<u> </u>	Telephone N	Jumber	
Goglia		A	R00920072						
PROJECT DESCRIPTION				F	LOOR A	REAS	ESTIMATED	COSTS	
Scope of work New Building					Total F	roject A	rea Sq.ft.		
	Sewer			4498 Areas below			w or		
Is this costruction the result of fire/natural disaster $_{ m N}$			Existin	ıg	at the bot of report	tom			
Fire suppression system in building <b>Full</b>		Detailed suppression system and specs To Follow			Num. of Buildings / Num. of Types ${f 1}$			'ypes	
If partial, specify where*	Located in floo	od pla	in (4 county A B			В	D F		
	plan commission	n)	N						
Building construction type and occupancy classification	Building height 1 (Stories)*				E C Area /cost/type				
Indiana rehabilitation standar <b>No</b>	d(Rule *) Evaluati <b>No</b>		cuments provid	ded?			proposed?	No	
Does project include:									
Elevator or lift	Combustible fibers	stora	age Fi	rewor	ks stor	age	Explosive s	torage	
	Boiler or pressure						materials sto		
Describe proposed used of faci stored or handled Restaurant	_	cludir	ng type of fla	ammabl	e or co	mbustible	e materials		
Describe previous or current u	se of facitlity IN	DETAI	IL(if existing	g faci	lity).*		Number of pe		
General comments*							Number of pe		
	(IPNE)	RAT. T	INFORMATION	J			(Public) =		
Doog product include						34 - 3	low/m=h=1 - :		
Does project include use of a magnitude as a factory built modular or mob	il structure?			10		Modu	lar/mobile se	ı number	
Name of manufacture	Maste	r plan	n/Modular file	е					
Facility Type Category	Area New	Area	Addition A	Area R	emodele	f	Cost	\$	
A A	4498	0	0	)					