



WHATCOM COUNTY HEALTH DEPARTMENT
**PROCEDURES FOR BUILDING OR
REMODELING A PRIMARY OR
SECONDARY SCHOOL**

509 Girard Street
Bellingham, WA 98225
Telephone: 360-778-6000
Fax: 360-778-6001

The Washington State Board of Health Rules for Primary and Secondary Schools (WAC 246-366-040) require school operators to submit plans for new or remodeled school facilities to the Whatcom County Health Department for review and approval. This packet will help guide you through Health Department review and approval to build or remodel a **Primary or Secondary School**. This packet is intended as a guide only and may not answer all of your questions. If you have questions about this packet, please contact (360) 778-6000.

Use this packet to submit plans for:

New or remodeled public or private school buildings

Submit the following information to the Health Department:

- * The **application packet** and **\$360.00 + \$10.80 (3% Technology Fee) = \$370.80**, for the first hour of review and one pre-operational inspection. Additional review time will be billed at \$138.00 per hour separately and must be paid prior to pre-operational inspection.
- * A **floor plan** drawn to scale (show all dimensions) that includes:
 - an interior **site plan** outlining the seating, restroom, and food preparation areas;
 - an exterior site plan showing parking, play areas, access and egress, fencing, and landscape elements;
 - detailed **classroom drawings**;
 - the **finish materials** for all areas;
 - the location of all **plumbing system components**; and
 - the **ventilation system** design specifications.

Once this information has been reviewed, you will receive notice of either plan approval or of additional information required for Health Department approval. Changes to your plans may be required. Do not proceed with construction until plan approval has been granted.

Your project may also require approval from other agencies. Remember to contact:

- * The city or county building department for permits for plumbing, electrical, mechanical, structural, or other work;
- * The city finance office for a business license;
- * The state revenue department for business registration; and
- * The office of the Washington State Superintendent of Public Instruction (OSPI).

Prior to opening your facility, you will have to complete these additional steps:

- * Call our office to schedule an inspection at least two working days prior to opening.
- * Pay any outstanding plan review fees.
- * Contact the appropriate building department for a **Certificate of Occupancy**.



WHATCOM COUNTY HEALTH DEPARTMENT
SCHOOL FACILITY
PLAN REVIEW APPLICATION

509 Girard Street
Bellingham, WA 98225
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Fax: 360-778-6001

FEE \$360.00 + \$10.80 (3% Technology Fee) = \$370.80

- checkbox New school
checkbox Remodel of existing school
checkbox Converting existing space into school
checkbox Adding or constructing building(s) on campus
checkbox Portable
checkbox Other:

School District Name: _____

School Name: _____

School Address: _____

School City: _____ State: _____ Zip Code: _____

School Phone: _____ School Email Address: _____

School District Contact Information
Name:
Address:
City State Zip:
Phone #:
Email:

Architect Contact Info
Name:
Address:
City State Zip:
Phone #:
Email:

Water Supply Source Name: _____
(specify private well, water association, or municipal water system)

Method of Sewage Disposal: _____
(if septic system, attach a copy of the sewage disposal permit)

Projected Student Capacity: _____ Number of Employees: _____

Construction Start date: _____ Construction Completion Date: _____

Please provide all materials requested at the time plans are submitted (See page 1 for a list of required information). Failure to do so can result in delays to your project. Changes to your plans may be required. Do not proceed with construction until your project has been approved. I understand that, in consideration for the review of these materials by the Whatcom County Health Department, this application shall constitute a contract and a promise to pay all applicable fees as established by the Whatcom County Council.

SIGNATURE OF APPLICANT _____ DATE _____

Office Use Only:
Received By _____ Date _____ Amount Paid _____ Receipt # _____

School Plan Review Checklist

Name of School: _____

Address: _____

Project Logistics

- New school
- Remodel of existing school
- Converting existing space into school
- Adding or constructing building(s) on campus
- Other: _____

- Grade Level K-2
 3-5
 6-8
 9-12

Please give a brief description of the project:

1. Will buildings be demolished on campus while students are present? Yes No
If yes, please include:
 - A safety plan that includes how the students will be protected from construction noise, dust and any other hazardous conditions that will be a result of demolishing structures on campus.
 - A narrative describing each phase of demolition and construction and an approximate time frame for each phase.

2. Will portable classrooms be used? Yes No
 - Existing portable classrooms:
Manufacturer's name, model, year constructed: _____
 - New portable classrooms: Manufacturer's name and model: _____

3. Will students be relocated during construction? Yes No
If so, additional plans may be required for review.
Relocation name and address: _____

4. Will foodservice be impacted by the project? Yes No
If yes, please describe alternative means of foodservice to be provided: _____

Note: The following items cannot be interrupted during hours of meal preparation and service:

- Potable water service
- Electricity

Buildings

1. Ceiling Height at least 8 feet? Yes No
2. Projections (light fixtures, beams, etc.) at least 7 feet from floor? Yes No
3. Stairways have handrails? Yes No
4. Steps have non-slip treads? Yes No

- 5. Floors have easily cleanable surfaces? Yes No
- 6. Flooring is smooth, durable and easily cleanable extending at least 36 inches in front of the sinks located in classrooms and staff rooms? Yes No
- 7. Windows provided in all instructional areas where students spend more than 50% of the day? Yes No
- 8. Exterior sun control provided to exclude direct sunlight from window areas during at least 80% of normal school areas? (Sun control is not required if school is air conditioned or Low E glass is installed.) Yes No

Plumbing, Water Supply, Fixtures

- 1. Adequate, conveniently located toilet and handwashing facilities provided for students and employees? Yes No
- 2. All handwashing sinks are provided with warm water between 100-120°F and arrives within 15 seconds? Yes No
- 3. Hand operated self-closing faucets run for at least 10 seconds? Yes No
- 4. Single-service towels or warm air dryers provided? Yes No
- 5. Showers with hot water provided for grade 9 and higher physical education classes? Yes No NA
- 6. Showers temperature controls can regulate water between 100-120°F? Yes No NA
- 7. Shower and drying areas have impervious, non-skid floors? Yes No NA
- 8. Shower room walls are impervious up to shower head height? Yes No NA
- 9. Showers room upper walls and ceilings are smooth and easily cleanable? Yes No NA
- 10. Locker and dressing room floors are non-skid and impervious? Yes No NA
- 11. Locker and dressing rooms have floor drains to eliminate standing water? Yes No NA

Sewage Disposal

- 1. If an existing on-site septic system is used, does it need to be redesigned to meet the proposed new use? Yes No NA
- 2. Have engineered plans for on-site disposal been approved? Yes No NA

Ventilation

- 1. Student and staff areas vented to keep them free of odor, excessive heat, and condensation? Yes No
- 2. On demand mechanical ventilation system provide additional air exchange for chemical areas such as photo darkrooms and science labs with exhaust directly to the outside? Yes No NA
- 3. Minimum amount of incoming fresh air provided by the air handling system in each classroom is at least 15 cubic feet per minute (cfm) per person? Yes No
- 4. Minimum amount of incoming fresh air provided by the air handling system for laboratories and science prep areas, is at least 20 cfm per person? Yes No NA
- 5. Ventilation system is designed so that carbon dioxide levels after occupancy will not exceed 700 parts per million (ppm) above ambient outdoor air (usually 1100 ppm)? Yes No

6. Dedicated exhaust vented to the outside for high-volume copy machine or laminator? Yes No NA

Heating and Temperature Control

1. Heating, ventilation and air conditioning systems equipped with automatic room temperature controls? Yes No
2. Student and staff areas heated to a minimum of 65°F? Yes No
3. Gymnasium heated to a minimum of 60°F? Yes No NA

Sound Control

1. Noise levels in all rooms are at 45dBA or less when ventilation systems and computers are running? Yes No
2. Noise level in vocational areas when all exhaust systems are operating will not exceed 65 dBA? Yes No NA

Lighting

1. Lighting when measured 30 inches above the floor or on work surfaces, provides a light intensity as follows:

<u>Area</u>	<u>Minimum Foot candles</u>			
Instructional areas, study halls libraries, classrooms, classrooms	30	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Laboratories, chemical storage areas, vocational training such as wood shop, metal shop, art rooms	50	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>
Non-instructional areas	10	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Gymnasium	20	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>

2. Does lighting minimize shadows? Yes No

Please check all that apply to your project

Science Room(s)

1. Handwashing sink(s) provided with soap and paper towel dispensers? Yes No
2. Inventory list of all chemicals available for review?
Attach copy with this application. Yes No
3. Emergency eyewash provided and located within 50 feet or 10 seconds walking distance from all lab science work stations? Yes No
4. Emergency eyewash stations provide 0.4 gallons per minute for 15 minutes or more at 25 PSI or less? Attach manufacturer's information. Yes No
5. Emergency safety shower provided? Yes No
6. Emergency shower delivers water to cascade over the user entire body at a minimum rate of 20 gallons per minute for 15 minutes or more?
Attach manufacturer's information. Yes No
7. Fume hood air velocity provides 60-125 linear feet per minute and exhaust directly to the outside away from all occupied areas and air intakes? Yes No NA
8. Chemical storage room provided? Yes No
9. Chemical storage room(s) are lockable, inaccessible to students and have self-closing doors? Yes No

10. Chemical storage room(s) mechanically vented without recirculation Yes No
11. Chemical storage doors have a one hour fire rating or greater if required by the Fire Marshall? Yes No
12. Storage shelving secured and shelf stoppers (lips) installed on storage shelves? Yes No
13. Flammables stored in approved flammable storage cabinets with self-closing doors? Yes No
14. Natural gas provided to workstations? Yes No
15. Master gas shut-off easily accessible and clearly marked? Yes No
16. Only explosion proof refrigerators used to store volatile chemicals? Yes No
17. Waste disposal disposed of in accordance with DOE regulations?
Note: No waste or acid chemicals shall be poured down the drain or put in the solid waste stream with approval from local sewer or solid waste authorities. Yes No
18. Table tops made of noncombustible materials? Yes No

Art Room/ Darkroom

1. Handwashing sink(s) provided with soap and paper towel dispensers? Yes No
2. Will a kiln be used? Yes No
- Kiln has dedicated exhaust system vented to outside? Yes No
 - Door to kiln room is self-closing, lockable and inaccessible to students? Yes No
 - Chemical storage required for art media? Yes No
3. Will a photography darkroom be used? Yes No
4. Chemical storage provided? Yes No
- All flammable liquids stored in approved cabinets with self-closing doors? Yes No
 - Dedicated exhaust for darkroom vented outside? Yes No
5. Spray booth provided? Yes No
6. Emergency eyewash stations provide 0.4 gallons per minute for 15 minutes or more at 25 PSI or less? Attach manufacturer's information. Yes No N/A

Auto Shop

1. Handwashing sink(s) provided with soap and paper towel dispensers? Yes No
2. Emergency eyewash provided and located within 50 feet or 10 seconds walking distance from all student work stations? Yes No
3. Emergency eyewash stations provide 0.4 gallons per minute for 15 minutes or more at 25 PSI or less? Attach manufacturer's information. Yes No
4. All flammable liquids stored in approved storage cabinets with self-closing doors? Yes No
5. Master electrical shut-off for electricity and gas easily accessible and clearly marked? Yes No

Metal Shop

- 1. Handwashing sink(s) provided with soap and paper towel dispensers? Yes No
- 2. Emergency eyewash provided and located within 50 feet or 10 seconds walking distance from all student work stations? Yes No
- 3. Emergency eyewash stations provide 0.4 gallons per minute for 15 minutes or more at 25PSI or less. Attach manufacturer's information. Yes No
- 4. Solvents for parts cleaning stored in approved containers. Yes No
- 5. Compressed gas cylinders are properly labeled, maintained, stored and secured with caps in placed. Yes No
- 6. All flammable liquids are stored in approved storage cabinets with self-closing doors. Yes No
- 7. Mechanical ventilation provided for all arc and gas welding cutting tables to prevent welding vapors from traveling through the breathing zone Yes No
- 8. Master electrical shut-off electricity and gas easily accessible and clearly marked? Yes No
- 9. Two food safety zone marked around equipment? Yes No
- 10. Non-skid surfacing installed in the operator zone of all stationary equipment? Yes No

Wood shop

- 1. Handwashing sink(s) provided with soap and paper towel dispensers? Yes No
- 2. Wood chip and sawdust collection system installed? Yes No
- 3. All flammable liquids stored in approved cabinets with self-closing doors? Yes No
- 4. Emergency eyewash provided and located within 50 feet or 10 seconds walking distance from all student work stations? Yes No
- 5. Emergency eyewash stations provide 0.4 gallons per minute for 15 minutes or more at 25 PSI or less. Attach manufacturer's information. Yes No
- 6. Spray booth provided? Yes No
- 7. Master electrical shut-off for electricity and gas easily accessible and clearly marked? Yes No
- 8. Two food safety zone marked around equipment? Yes No
- 9. Non-skid surfacing installed in the operator zone of all stationary equipment? Yes No

Horticulture/Greenhouse

- 1. Handwashing sink(s) provided with soap and paper towel dispensers? Yes No
- 2. Vented storage cabinet provided for agricultural chemicals? Yes No NA
- 3. Hoses are installed with anti-siphon devices? Yes No
- 4. Will produce be incorporated into school meal program? Yes No

Culinary arts

- 1. Will students prepare food for sale or service outside the culinary arts program? Yes No
If yes, you may be required to submit a separate plan review application to our office. Please contact our office for an application.

School kitchen

1. Will students be provided with snacks or meals service? Yes No

If yes, a separate plan review application must be submitted to our office. Please contact our office for an application.