Process: Elevator Application		Department: Building Division – Elevator Program (Customer)
Author: Nestor Diaz	SUST OF LAURA	Date Created: September 2, 2022
Last Edited by:	1742 URGINUN	Date Last Edited:

Purpose: To properly guide customers through the application process for an Elevator Installation Permit.

Overview: This document standardizes the process of applying for installing/modification permits for customers.

Process:

- 1. Applicant submits an application by filling out required fields in the Elevator form in ACA:
 - a. Clicks Create an Application under the Building tab



b. Location & People

i. Location Information

1) Search by address which will populate Parcel and Owner

Step 1: Location and People>Location Information

Show Map

Address					
*Street Number	Street Prefix * Str Select	eet Name:	Street Type: Select	Street Suffix: Select▼	
Unit Type:	Unit No.:	Floor Number:	Buildi	ing Number:	
Select	•				
City:			State:	Zip:	
			Select 🔻		
Search Clear					
ii.	Property Owne	er			
	1)	User then confirr accurate.	ns if they are p	property owner and verifies all informat	tion
Property Owner Inform	ation				
*Are you the Property Owner	?:		\bigcirc Yes \bigcirc No		
* Is the displayed owner inform	mation accurate?:		\bigcirc Yes \bigcirc No		

Save And Resume Later

- iii. Applicant
- 1) User is required to enter the Applicant contact type. They can click Select from Account to copy in the details from their ACA account or click Add

New to manually enter in new contact information. *Step 1:Location and People>Contact Information*

* indicates a required field.

Continue Application »

Applicant
To add a contact, click either Select from Account or Add New button. Select from Account allows you to load an existing contact from your account, and Add New allows you to enter details for a new contact. After a contact is added, you can select the Edit link to update the listed contact.
Select from Account Add New

iv. Billing Contact

1) User is required to enter the Billing Contact type. They can click Select from Account to copy in the details from their ACA account or click Add New to manually enter in new contact information.

* indicates a required field.

Billing Contact	
To add a contact, click either Select from Account or Add New button. Select from Account allows you to load an existing contact from your ac you to enter details for a new contact. After a contact is added, you can select the Edit link to update the listed contact.	ccount, and Add New allows
Select from Account Add New	
Save And Resume Later	Continue Application »
c. Elevator Information	orintian

i. Information Detail. User can enter a Project Name and Project Description.

Elevator Installation					
1 Location and People	2. Application Detail	3. License Information	4. Review	5. Pay Fees	6

Step 2: Application Detail>Application Information

Project Information
Project Name
* Project Description

ii. Project Details - User must answer all questions with a red asterisk.

Project Details		
* Is this application for an emergency generator or fire recall system?:	\bigcirc Yes \bigcirc No	
*Are you installing an elevator?:	\bigcirc Yes \bigcirc No	
*Are you installing an escalator?:	\odot Yes \bigcirc No	
*Are you installing a dumbwaiter?:	\odot Yes \odot No	
*Are you installing a lift?:	\odot Yes \bigcirc No	
*Are you applying for a Commercial or Residential Permit?:	Select	•
*What type of Structure will be most impacted by the work?:	Select	•
* Parent Permit:	\odot Yes \bigcirc No	
*Building Name:		

iii. Structure Details – User must answer all questions with a red asterisk.

Structure Details							
* Is the building new or existing?:			Select	•			
*How many elevators are you app	blying for?:		1				
*What is the Contract Value?:							
*What is the Value of Materials?:							
Save And Resume Later						Continue Appli	cation »
d. Elevator	Details						
i. U	ser Selects Add a	Row to contin	nue enteri	ing information	n.	-	0
1 Location and People 2.	Application Detail	3. License In	formation	4. Review	5. P	ay Fees	6
Step 2: Application Detail	>Elevator Informatior	ז				*:!:	an autor al Carlal
						" Indicates a	requirea tieia.
Elevator Details							
Showing 0-0 of 0	of Fire Service E	mergency Bank	Number	of Number of		Temporary	
Number Equipr	ment Access Elevator P	ower Locatio	on Floors Se	erved Landings	Capacity Descr	Construction	
Add a Row	Delete Selected						
Save And Resume Later						Continuo Appl	iontion »
	nnlicant proceeds	to fill out info	ormation .	_ llser must :	answer all (nuestions wi	th a red
a:	sterisk then submit.						
	ELEVATOR INFORMATIC * Equipment Number:	DN * Type of Equipment	t: *	Fire Service Access Ele	evator:		
Home Building Enforc		Select	-	⊃ Yes ⊃ No	nditio	n	
Create an Application	*Emergency Power: Select	*Bank Location:		Number of Floors Serve	ed:		
1 Location and People					Pay Fee		6
Step 2: Application Det			4				field
Elevator Details	Number of Landings:	*Capacity: <i>Ibs.</i>		Description:			
Showing 0-0 of 0 Equipment Ty Number Edu					# sription		
No records found.	 Temporary Construction: Yes O No 						
	Submit		с	ancel			

- e. License Information
 - i. Select Look Up function and follow the prompts.

	/ -	-	-		
1 Location and People	2 Application Detail	3. License Information	4. Review	5. Pay Fees	6
Step 3:License Information					
				* indicates	a required field.
Licensed Professional					

-	
To find an existing Lice	nsed Professional, click the Look Up button.
Look Up	

ii. Proceed to enter in a <u>valid</u> State License Number; the rest of the information should auto populate.

	Licensed Professional Information	×
	Enter the License Type and the State License Number. The remaining fields will be populated if the license information is validated. Click Save and Close if the displayed data is correct. If the displayed data is not correct click Clear and try another license.	,
Home Building Er	*License Type *State License Number	ion
	Contractor 🔻	
levator Installation	Business Name / First Name / Last Name	
1 Location and People		ees 6
	Address	
Step 3:License Info		tindicates a security of field
	City Zip Code	"Indicates a required field.
To find an existing Licens	Country/Region	
	United States	
	Phone Email	
	Save and Close Clear Discard Changes	

iii. BPOL License Details – User must answer question with a red asterisk and enter a valid BPOL License

Business, Professional and Occupational License Details

This section will validate your business license against information held by the County of Fairfax. If you are licensed by a jurisdiction outside of the County of Fairfax, it is likely your license details will not be found. In that instance, please enter your account number and continue with your application.

Account Number is a 9 digit number without spaces, letters or dashes. For example: 000142810

*Do you have a Fairfax County Business License?:	\bigcirc Yes \bigcirc No	
Do you have a Temporary BPOL License?:	⊖ Yes ⊖ No	
Please provide the Issue Date for the Temporary BPOL License:	MM/DD/YYYY	

Continue Application »

f. Review

Elevator Installation

i. This screen allows the user to review their application and click the Edit button for each section if they need to make changes prior to submitting.

1	2 Application Detail	3 License Information	4. Review	5. Pay Fees	6. Record Issuance
Step	o 4:Review				
Save Please	e and resume later	Click the "Edit" buttons to make ch	anges to sections or "Contir	nue Application" to move on.	Continue Application »
Rec	ord Type				
			Elevator Installation		
Add	Iress				Edit
12055	GOVERNMENT CENTER PKV	VY FAIRFAX, VA 22035			
Par	cel				Edit
Parce Parce	l ID Number0561150007 I #0561 15 0007				
Ow	ner				Edit
	g. Receipt a <u>Upload I</u>	and Record Submitta Plans and Documer	al – Customer re <u>1ts</u>	ceives a record num	ber and can proceed to clic
	Step 3:Receipt/Record	d Submittal			
Co	onfirmation				
	Thank you for using ou	ur online services for your submiss	sion. A confirmation email w	ill follow.	
1	2055 GOVERNMENT CE	NTER PKWY FAIRFAX, V	A 22035		
	ELEVI-2022-00070		Upload Plans and I	Documents	Copy Record
۶id	e Note* Customers	will receive an email	with their record	number and quick lin	ks to access AA.

i. The following page appears with minimum submission requirements (plans, cut sheets, and building layout)

General	
Review Plan Cycle # 1	Requirements
Enter a description of the plans or documents you are uploading	 Building Layout This document is required. Manufacturer Cut Sheets This document is required. Plans This document is required.

Continue

ii. Applicant will then click the **Browse** button to access PDF's and begin upload Step 2: Add & Process Files

Browse or drag and drop the desired files to upload. Once all files are added, the Upload and Validate button is displayed. Click on it to validate the files and add them to your review package. When all of the desired files are uploaded and validated, click the Process Files button to prepare your files for review.

Note: Please do not combine plans and documents of va	rrious types into a single PDF document.					
		Requirements				
Drag a	S Building Layout This document is required.					
	Browse	Manufacturer Cut Sheets				
		This document is required.				
		This document is required.				
iii. After selec	cting plans click upload and validate					
plan 2022.pdf	Plans	~ ~				
	Description					
	Upload and Validate					

iv. Once plans and documents have been validated, select Process Files

Files								
Name	Description	Type	Status	Uploaded By	Uploaded Date	Signature		
Occupancy Letter.pdf		Building Layout		Nestor Diaz	8/19/2022	\ \	ø	
OCCUPANCY PERMIT.pdf		Manufacturer Cut Sheets		Nestor Diaz	8/19/2022	\mathbf{i}	ø	
Occupancy plan 2022.pdf		Plans		Nestor Diaz	8/19/2022		A *	
							*	
						Pro	cess	Files

v. File Processing – This usually takes a few minutes before completion. When complete, select Continue

File processing	×
Your files are being processed into sheets and title block information is being extracted. This process can take several minutes to complete. You can navigate away from this page and return if desired. We will notify you via <i>email</i> when the process is completed and provide a link for you to return and complete the remaining steps to finalize your review package.	
Note: Your review package is not complete and will not be routed for review until you complete the remaining steps.	
Close	•

h. Sheet Versioning – Plans are automatically named if they are formatted correctly, if not you can manually add names.

Sheets			
Showing a total of 2 sheets			Show only error sheets
Title Block	Thumbnail	Sheet number and title	
LZEI 44A P	C.	A101	
GOUND FLOOR PLAN		GROUND FLOOR PLAN	
8		Decupancy plan 2022.pdf (Page: 1)	
LITEL AA. P		A102	
MAIN FLOOR PLAN		MAIN FLOOR PLAN	
		Decupancy plan 2022.pdf (Page: 2)	
Save and resume later			Continue

i. Review - This screen allows the user to review their application and click the Edit button for each section if they need to make changes prior to submitting. Click Finish when complete.

1. Information	2. File Processing	3. Sheet Versioning	4. Review
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Step 4:Review

Please review the information below and ensure you have uploaded all of the plans and documents for this review cycle. Click the **Edit** buttons to make any needed changes or to upload any remaining documents. Once you click **Finish**, your review cycle will begin and additional documents cannot be uploaded until after the review cycle has been completed.

									Finish
General									Edit
Review Plan Cycle # 1									
Requirements									Edit
This is the requirements checklist for this package. j. Customer will receive record number along with a copy of their submittal via email.									
Home Building Enforcement Environmental Health Fire Planning Site Zoning Proffer/Development Condition									
Create an Applica	ation Search /	Applications Schedu	ule an I	nspection					
Success. Your review package has been received.									
Digital Plan Room Record: ELEVI-2022-00070 Address: 12055 GOVERNMENT CENTER PKWY, FAIRFAX VA 22035 Status: SUBMITTED									
Record Details	Summary	Uploads	ls	ssues	Co	onditions	Notes	Approved	

Once application is submitted, record is entered in AA.

NOTE:

Once application goes through the prescreening process, they will receive a separate email for fees due. They will then follow the prompts and checkout fees to proceed with the permitting process.

Customers who will pay by credit card will be paying an additional 2.4% in credit card fees. They can link their bank account and routing number to pay by e-check to avoid credit card fees.

FUTURE OPPORTUNITIES FOR IMPROVEMENT

- Allowing third party contractors to apply for specific addresses without having to be manually added as on owner contact.

ORGANIZATIONAL CHANGE MANAGEMENT CONSIDERATIONS

- Third party contractors will have to reach out to Fairfax County before applying with a letter from the owner allowing them to be a contact

A	Product Owner	 Date:
Approva	Project Stakeholder	Date: