



PLAN CHECK SUBMITTAL DECLARATION

Project Address: _____ Unit: _____ Project Number: _____

Project Description: _____

I, _____ Applicant's Name _____, declare, to the best of my knowledge, that I have submitted all the necessary plans, reports, calculations, or necessary documentation needed to properly represent my project to be in compliance with all state and local codes.

I have included the following materials as a complete set of plans:

- | | |
|---|---|
| <input type="checkbox"/> Survey/Topography Map | <input type="checkbox"/> Shoring Plans |
| <input type="checkbox"/> Architectural Plans | <input type="checkbox"/> Civil/Drainage Plans |
| <input type="checkbox"/> Structural Plans | <input type="checkbox"/> Landscaping Plan |
| <input type="checkbox"/> Structural Calculations | <input type="checkbox"/> Mechanical Plan |
| <input type="checkbox"/> Title 24 – Energy Calculations | <input type="checkbox"/> Electrical Plan |
| <input type="checkbox"/> Soils Report | <input type="checkbox"/> Plumbing Plan |
| <input type="checkbox"/> Grading Plans | <input type="checkbox"/> Color Rendering |

Important Conditions:

1. Applicant understands that if plans are incomplete for any reason, additional fees may be charged and revised building plans may be required.
2. Plan check expires 180 days after the initial submittal date. At the discretion of the building official, Plan Check may be extended only once for a period of 180 days. The request for extension shall be in writing and must be submitted prior to expiration of the plan check. The request shall express the circumstances beyond the control of applicant that resulted in delay and expiration of plan check time.
3. If building permit is not secured within the allotted and/or extended plan review time, the owner/applicant agrees to pay a new plan review fee in order to reinstate the expired plan review.
4. The applicant understands that should the submitted plans and documents be deemed incomplete, the plan review will be placed on hold until such time the revised/complete plans are resubmitted for review. The plan review time will start from the re-submitted date.

I have read and understand the conditions listed above and agree to abide by same terms and conditions.

This is to acknowledge and attest that the submitted plan check set (plans and documents) represents to the best of my knowledge all material required to perform a complete plan review.

Applicant (print name): _____ Signature: _____

Applicant's Address: _____ Unit: _____ Date: _____

Telephone Number: _____ E-mail: _____