



# PLAN CHECK REQUEST

## PROJECT INFORMATION

Date Submitted \_\_\_\_\_

Project Name \_\_\_\_\_  Tract or  Parcel Map No. \_\_\_\_\_

Site Address/Location \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

APN(s) \_\_\_\_\_

### PROJECT TYPE (Check all that apply)

- New Building Construction/Development
- Building Addition or Remodel
- Tenant Improvement to Existing Building or Space
- New Tenant or Owner, Change of Space Use
- Demolition (Sewer Capping/Abandonment)
- Work in Public Right-Of-Way or Easement
- Other \_\_\_\_\_

### PROJECT USE (Check all that apply)

- Residential
- Mixed Use (Residential & Commercial, etc.)
- Commercial/Office/Retail
- Industrial/R&D/Manufacturing
- Restaurant/Food Service Establishment\*
- Municipal/Utility/Agency/District/School/Religious
- Other \_\_\_\_\_

\* Submittal of Food Service Permit Application & menu required

## DWELLING/DEVELOPMENT UNITS (Enter quantity as applicable to project)

**Residential:** \_\_\_\_\_ Single-Family Residences, detached; \_\_\_\_\_ Accessory Dwelling Units (area) \_\_\_\_\_ sq ft  
\_\_\_\_\_ Multi-Family units, describe: \_\_\_\_\_

**Non-Residential:** Specify no. of buildings, floor area, stories, space usage and area (i.e., retail, office, restaurant, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

## SUBMITTED BY/PROJECT CONTACT

Business Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Contact Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

## BILL TO

Business Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Contact Email \_\_\_\_\_ Cell Phone \_\_\_\_\_

USD Notes: \_\_\_\_\_  
\_\_\_\_\_

By: \_\_\_\_\_ Due Date: \_\_\_\_\_ District PTS Project No.: \_\_\_\_\_