



City of Arroyo Grande

Community Development Department
300 E Branch Street, Arroyo Grande, CA 93420
(805) 473-5450 FAX (805) 473-5458

BUILDING PERMIT APPLICATION

PROJECT ADDRESS: _____

OWNER INFORMATION: _____ EMAIL _____

NAME _____ PHONE NUMBER _____

ADDRESS _____

TENANT INFORMATION: _____ EMAIL _____

NAME _____ PHONE NUMBER _____

APPLICANT INFORMATION: _____ EMAIL _____

NAME _____ PHONE NUMBER _____

CONTRACTOR INFORMATION: _____ EMAIL _____

NAME _____ PHONE NUMBER _____

LICENSE NUMBER _____ CLASSIFICATION _____

DESCRIPTION OF WORK:

SQUARE FOOTAGE OF AFFECTED AREA _____ VALUATION _____

USE _____ OCCUPANCY _____

This application has been completed to the best of my knowledge, and I understand that inaccuracies or omissions may result in permit processing delays.

APPLICANT SIGNATURE _____ DATE _____



CONSTRUCTION PLAN SUBMITTAL COUNTER INTAKE CHECKLIST

| |
|-----------------|
| OFFICE USE ONLY |
| |
| |

| SHEET | CITY | REQUIRED ITEMS | SHEET | CITY | REQUIRED ITEMS |
|-------|--------------------------|--|--------------------------|--------------------------|---|
| | | 1. BUILDING <i>Use N/A if not applicable</i> | | | 4. OTHER CONT. <i>Use N/A if not applicable</i> |
| | <input type="checkbox"/> | Site Plan | | <input type="checkbox"/> | Conditions of Approval |
| | <input type="checkbox"/> | Scope of Work | | <input type="checkbox"/> | Property Owner |
| | <input type="checkbox"/> | Square Footage – Proposed and/or Remodel | | <input type="checkbox"/> | Developer/Representative |
| | <input type="checkbox"/> | Floor Plan – Existing and/or Proposed | | <input type="checkbox"/> | Engineer of Work |
| | <input type="checkbox"/> | Labeled Room Dimensions | | <input type="checkbox"/> | Architect |
| | <input type="checkbox"/> | Electrical/Mechanical/Plumbing Plan <i>(as applicable)</i> | | <input type="checkbox"/> | Geotechnical Engineer |
| | <input type="checkbox"/> | Framing Plan – New walls/Additions <i>(as applicable)</i> | | <input type="checkbox"/> | Arborist |
| | <input type="checkbox"/> | Code Edition | | <input type="checkbox"/> | Archaeologist |
| | | 2. ENGINEERING <i>Use N/A if not applicable</i> | | <input type="checkbox"/> | Project Title and Location |
| | | Project Statistics | | <input type="checkbox"/> | Sheet Index |
| | <input type="checkbox"/> | Existing Undeveloped Area | | <input type="checkbox"/> | North Arrow |
| | <input type="checkbox"/> | Total Area of Disturbance | | <input type="checkbox"/> | Drawings to Scale |
| | <input type="checkbox"/> | New & Replaced Impervious Area | | <input type="checkbox"/> | Abbreviations |
| | <input type="checkbox"/> | Removed Impervious Area | | <input type="checkbox"/> | Standard General Notes |
| | <input type="checkbox"/> | Net Impervious Area | | <input type="checkbox"/> | Public Utility Signature Block |
| | <input type="checkbox"/> | Impervious Area Ratio | | <input type="checkbox"/> | Demo Plan <i>(as applicable)</i> |
| | <input type="checkbox"/> | Stormwater PCR Tier <i>(as applicable)</i> | | <input type="checkbox"/> | 3 Complete Sets of Plans |
| | | Earthwork Quantities | | <input type="checkbox"/> | 2 Copies of all Supporting Documentation |
| | <input type="checkbox"/> | Cut / Fill | | <input type="checkbox"/> | Digital Submittal Package |
| | <input type="checkbox"/> | Over-excavation/ Re-compaction | | | |
| | <input type="checkbox"/> | Total Cubic Yardage | PROVIDED | CITY | Stormwater Supplementary Submittal |
| | <input type="checkbox"/> | Yardage > 50 cubic yards: <i>(as applicable)</i> | <input type="checkbox"/> | <input type="checkbox"/> | Stormwater Plan Application |
| | | <input type="checkbox"/> Grading Permit Application | <input type="checkbox"/> | <input type="checkbox"/> | Post Construction Documents (SELECT ONE) : |
| | | <input type="checkbox"/> Soils Report (less than 3 years) | | | <input type="checkbox"/> PCR Waiver Request |
| | | 3. PLANNING <i>Use N/A if not applicable</i> | | | <input type="checkbox"/> PR 1 Checklist/Documentation Only |
| | <input type="checkbox"/> | APN | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Stormwater Control Plan (City Template) |
| | <input type="checkbox"/> | Zoning | | | Water Pollution Control (SELECT ONE): |
| | <input type="checkbox"/> | Lot Size | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> Minor Project WPCP |
| | <input type="checkbox"/> | Setbacks – Required & Proposed | | | <input type="checkbox"/> Grading Plan |
| | <input type="checkbox"/> | Lot Coverage – Existing & Proposed | | | <input type="checkbox"/> SWPPP (WDID, LRP, & QSD/QSP must be on Civil Title Sheet) |
| | <input type="checkbox"/> | Floor Area Ratio – Existing & Proposed | <input type="checkbox"/> | <input type="checkbox"/> | Hydrology/Hydraulic Report <i>(as applicable)</i> |
| | <input type="checkbox"/> | Building Elevations <i>(as applicable)</i> | <input type="checkbox"/> | <input type="checkbox"/> | Inspection Agreement <i>(as applicable)</i> |
| | <input type="checkbox"/> | Landscaping/MWELo Documentation | <input type="checkbox"/> | <input type="checkbox"/> | |
| | | 4. OTHER <i>Use N/A if not applicable</i> | | | |
| | <input type="checkbox"/> | Basis of Bearings | | | |
| | <input type="checkbox"/> | City Benchmark | | | |
| | <input type="checkbox"/> | Vicinity Map | | | |

Please sign and date this checklist to acknowledge that you have provided all the required information listed above. This checklist constitutes the minimum requirements to begin the plan check process. If an item from this checklist is required but not on the plans, with the submittal package, or the sheet number is not filled out, **the plans will not be accepted for first review and the plan check process will not be started.**

| | | | |
|--------------------------------|--|--------------|--|
| Signature (Applicant or Agent) | | Date | |
| Staff Reviewer: | | Intake Date: | |