

CITY OF SANTA MARIA PLANCHECK APPLICATION



COMMUNITY DEVELOPMENT DEPARTMENT, 110 S. PINE ST. #101, SANTA MARIA, CA 93458-5082 (805) 925-0951 EXT. 2241

PLEASE COMPLETE THOROUGHLY & ACCURATELY, INACCURACIES OR OMISSIONS MAY RESULT IN PERMIT PROCESSING DELAYS

ASSESSOR PARCEL NUMBER _____ JOB ADDRESS _____

PROPERTY OWNER _____ PH # _____

TENANT OR BUSINESS NAME _____ PH # _____

Contact name for "CORRECTIONS" _____ **Company** _____

METHOD OF CONTACT YOU PREFER (COMPLETE ONLY ONE OF THE CHOICES BELOW) Please Print

Phone _____ Email _____

DETAILED DESCRIPTION OF WORK: _____

If applicable: Grading – cubic yards of earth; cut _____, fill _____, import _____, export _____

DOCUMENTATION INCLUDED: Structural Calcs _____ Energy Calcs _____ Truss Calcs _____ Specs _____ S.B. Health APCD _____ Soils Report _____
OF PLAN SETS _____ # OF LNDSP SETS _____

PLANS DRAWN BY: Name _____ Company _____ License Number _____

ADDRESS _____ Phone _____ Email _____

CONTRACTOR COMPANY NAME _____ STATE LICENSE NO/CLASS _____

Contact name for "PERMIT ISSUANCE" _____ **Phone** _____

Valuation \$ _____ **Applicant's signature** _____ **Company** _____

(BELOW FOR OFFICE USE ONLY)

Zone _____ Within Downtown Specific Plan? Circle: YES or NO

CODE COMPLIANCE: NONE _____ ACTIVE _____ DATE CHECKED: _____ BY: _____

PLANNING DIVISION: ACCEPTANCE: _____ APPROVAL: _____ DATE: _____ BY: _____

BUILDING DIVISION: ACCEPTANCE: _____ APPROVAL: _____ DATE: _____ BY: _____

ROUTE TO:

Building _____ Engineering _____ Police _____ Plan Check Fee _____

Planning _____ Wastewater _____ Rec & Parks _____ Paid by _____

Fire _____ Pre-Plan check Accessibility _____ Bldg Lndsp _____