



County of San Diego

RESIDENTIAL PLAN SUBMITTAL WORKSHEET FOR FIRE VICTIMS

Each item on this worksheet is an essential part of the project design. It is the responsibility of the Designer/Applicant to complete this form properly. If the form is incomplete the plans will not be accepted.

Step 1: Customer Information, General
Step 2: Department of Environmental Health (DEH) Review
Step 3: Planning & Development Services (DPLU) Building Plan Pre-submittal Review
Step 4: Department of Public Works (DPW) Review
Step 5 - Customer Information, Building Sizes (Square Footage)

Tech Intake _____ Date _____ Tech Submittal Completed _____ Date _____

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MINIMUM ESSENTIAL ITEMS FOR PLAN SUBMITTAL FOR FIRE VICTIMS

(see Form PDS #658 for a detailed explanation of these requirements)

PLAN REQUIREMENTS	Item Required ¹	Check List
Permit Application	Y	<input type="checkbox"/>
Architect/Engineer Stamp	P	<input type="checkbox"/>
2 Complete Sets of Plans	Y	<input type="checkbox"/>
Assessors Set of Plans (Required at permit issuance only)	Y	<input type="checkbox"/>
ARCHITECTURAL/STRUCTURAL		
Title Sheet	Y	<input type="checkbox"/>
Plot Plan	Y	<input type="checkbox"/>
Evidence of Legal Parcel (Required at permit issuance only)	Y	<input type="checkbox"/>
Grading Plan	P	<input type="checkbox"/>
Compaction Report (3 copies)	P	<input type="checkbox"/>
Soils Report (2 copies)	P	<input type="checkbox"/>
Foundation Plan	Y	<input type="checkbox"/>
Floor Plan	Y	<input type="checkbox"/>
Schedules	P	<input type="checkbox"/>
Elevations	Y	<input type="checkbox"/>
Cross Sections	Y	<input type="checkbox"/>
Roof Plan	Y	<input type="checkbox"/>
Details	Y	<input type="checkbox"/>
Structural Plans & Details	Y	<input type="checkbox"/>
Truss Drawings (2 copies)	P	<input type="checkbox"/>
Special Inspection/Structural Observation	P	<input type="checkbox"/>
Structural Calculations (2 copies)	P	<input type="checkbox"/>
ELECTRICAL		
NOTE: Residential Services of 400 amps or less are exempt		
Electrical Plan	P	<input type="checkbox"/>
Single-line Drawing	P	<input type="checkbox"/>
Electrical Load Calculations/Panel Schedules	P	<input type="checkbox"/>
Lighting Plans	P	<input type="checkbox"/>
ENERGY		
Title 24 Energy Requirements (2 copies)	Y	<input type="checkbox"/>

¹ Y=Required; P=Possibly Required

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Date of Application: _____ Plan File No.: _____ Application Received By: _____

This is to certify that I have been informed that it may not be possible to issue the building permit for which I have submitted an application. Upon review of the plans and permit application by the County, correction list(s) and a Condition of Approval list will be generated. I understand these Conditions of Approval and all plan check items must be resolved before the permit will be issued. I further understand that any fees paid for plan review are not refundable. Acceptance of plans for review is no assurance that a permit will be issued. Upon payment of plan review fees, the plan check will be valid for one calendar year.

Signature

Date