



The preparer is legally responsible for signatures whether a graphic, typewritten, or handwritten. Documents may not be restricted by digital signatures or otherwise.

Project Information	Permit No. _____
APN: _____	Date: _____
Project Address: _____	
Legal Owner: _____	Email: _____
Owner Address: _____	Phone: _____

Technical Report Information Please cite all reports utilized to determine project conformance

Consultant Company Name: _____

Name of Professional Who Signed Report: _____

Date of Report: _____

Date of Updates/Supplemental Information: _____

Consultant Information

Firm Name: _____ License No. _____

Name: _____ Email: _____

Address: _____ Phone: _____

- | | | |
|--|--|--|
| <input type="checkbox"/> Geotechnical Engineer | <input type="checkbox"/> Certified Arborist | <input type="checkbox"/> Civil Engineer |
| <input type="checkbox"/> Certified Engineering Geologist | <input type="checkbox"/> Qualified Biologist | <input type="checkbox"/> Other (type): _____ |

Project Plan Sheets Reviewed

Plan Prepared By	Plan Sheet Numbers	Date of Latest Revision

By signing below, we confirm that the plan sheets listed above for the specified project are in conformance with the recommendations of the technical report prepared under our responsibility.

Apply California State registered architect or engineer (signature and stamp below, if applicable)

Signature: _____ Date: _____