



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. _____
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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

If checked, certain aspects of the project cannot be verified for compliance due to lack of observation, but efforts have been made to determine general compliance. (See attached Inspections Exceptions Addendum)

By signing below, we confirm that the project has been completed in conformance with all the recommendations of the technical report and/or the project has been completed in conformance with the plans referenced above.

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

Signature: _____ Date: _____

