INSPECTION AND DUPLICATION OF PLANS MAINTAINED BY THE BUILDING DIVISION

The official copy of the plans maintained by the City of Montclair Building Division shall be available for inspection only on the premises of the Building Division as a public record. The copy may not be duplicated in whole or in part except (1) with the written permission of the certified, licensed or registered professional or his/her successor, if any, who signed the original documents, and the written permission of the original or current owner of the building, or, if the building is part of a common interest development, with the written permission of the Board of Directors or governing body of the association established to manage the common interests development; or (2) order of a proper court or upon the request of any state agency.

To obtain copy of the plans maintained by the Building Division, <u>all</u> of the following requirements shall be completed:

- Make an appointment to review all available plans for the building you are inquiring about. You will need the information on these plans to complete the Request to Duplicate Plans forms.
- The copy of the plans shall only be used for the maintenance, operation and use of the building. A form of an affidavit must be signed and notarized by the person requesting to duplicate the official copy of the plans. This form shall be provided by the City. (Every blank of the form must be completed or your request will not be processed.)
- The Building Official will send a letter, by registered mail, to the most recent address of the licensed, registered, or certified professional available, requesting his or her permission to duplicate the official copy of the plans, along with a copy of the affidavit that has been completed and signed by the person requesting to duplicate the official copy of the plans. The professional may be permitted up to 60 days to respond to the letter.
- The Building Official will send a letter, by registered mail, to the most recent address of the building owner, requesting his or her permission to duplicate the official copy of the plans, along with a copy of the affidavit that has been completed and signed by the person requesting to duplicate the official copy of the plans.

With the successful completion of <u>all</u> the above requirements, the applicant <u>must</u> contact a licensed and bonded blueprint company and make arrangements for the pickup of the plans requested for duplication. The blueprint company may call (909) 625-9477 to make arrangements for pickup of the microfilm.



REQUEST TO DUPLICATE OFFICIAL COPY OF PLANS

Please print or type

Building Address
Assessor's Parcel Number(s)
Person Requesting Duplication:
Name
Address/City/Zip
Phone _(FAX _()
E-mail
Project Architect/Engineer:
Name
Address/City/Zip
Original or current owner of the building:
Name
Address/City/Zip

The following affidavit is required under Section 19851(c) of the California Health and Safety Code as a condition of receiving a duplicate copy of official plans held by the City of Montclair:

AFFIDAVIT

I, _____, in requesting a duplicate copy of the official plans for the building at _____, Montclair, California, stipulate to all of the following conditions as required by the California Health and Safety Code:

- (1) That the copy of the plans shall be used for the maintenance, operation, and use of the building.
- (2) That the drawings are instruments of professional service and are incomplete without the interpretation of the certified, licensed, or registered professional of record.
- (3) That subdivision (a) of Section 5536.25 of the Business and Professions Code states that a licensed architect who signs plans, specifications, reports, or documents shall not be responsible for damage caused by subsequent changes to, or use of, those plans, specifications, reports, or documents where subsequent changes or uses, including changes or uses made by state or local government agencies, are not authorized or approved by the licensed architect who originally signed the plans, specifications, reports, or documents, provided that the architectural service rendered by the architect who signed the plans, specifications, reports or documents was not also a proximate cause of the damage.

I declare under penalty of perjury that the foregoing is true and correct.

Signature of person requesting duplication of plans

Capacity Claimed by Signer

State of Ca	lifornia)
County of		
On	before me,	
<u> </u>	Date Detore The,	Here Insert Name and Title of the Officer
personally	appeared	Name(s) of Signer(s)
		who proved to me on the basis of satisfactory evidence t be the person(s) whose name(s) is/are subscribed to th within instrument and acknowledged to me tha he/she/they executed the same in his/her/their authorize capacity(ies), and that by his/her/their signature(s) on th instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the law of the State of California that the foregoing paragraph is true and correct. WITNESS my hand and official seal.
		Signature Signature of Notary Public
	Place Notary Seal Above	Signature of Notary Public
Though t	he information below is not required by	law, it may prove valuable to persons relying on the document
Descriptio	n of Attached Document	and reattachment of this form to another document.
	of Document:	
		Number of Pages:
Document D		
	her Than Named Above:	
Signer(s) Otl	ner Than Named Above:	
Signer(s) Otl	her Than Named Above:	
Signer(s) Otl Capacity(ie Signer's Nan	es) Claimed by Signer(s)	
Signer(s) Otl Capacity(ie Signer's Nan □ Individua	es) Claimed by Signer(s)	Individual
Signer(s) Oth Capacity(ie Signer's Nan Individua Corporate	es) Claimed by Signer(s) ne: e Officer — Title(s):	Individual Corporate Officer — Title(s): Destruct
Signer(s) Oth Capacity(ie Signer's Nan Individua Corporate	es) Claimed by Signer(s) he: e Officer — Title(s): — Limited _ General	Individual Corporate Officer — Title(s): Partner — Limited General RIGHT THUMBPRINT FR Attorney in Fact FR CFSIGNER
Signer(s) Oth Capacity(ie Signer's Nan Individua Corporate Partner –	es) Claimed by Signer(s) ne: e Officer — Title(s): – Limited General	Individual Corporate Officer — Title(s): Partner — Limited General RIGHT THUMBPRINT FR Attorney in Fact FR CFSIGNER
Signer(s) Oth Capacity(id Signer's Nan Individual Corporate Partner – Attorney Trustee	es) Claimed by Signer(s) he: e Officer — Title(s): — Limited _ General	Individual Corporate Officer — Title(s): Partner — Limited General Partner — Limited General Attorney in Fact
Signer(s) Oth Capacity(ie Signer's Nan Individual Corporate Partner – Attorney Trustee Guardian	es) Claimed by Signer(s) ne: e Officer — Title(s): – Limited General in Fact Top of thur	Individual Corporate Officer — Title(s): Partner — Limited General Partner WER Attorney in Fact Trustee Trustee
Signer(s) Otl Capacity(ie Signer's Nan Individual Corporate Attorney Trustee Guardian Other:	es) Claimed by Signer(s) ne: e Officer — Title(s): Limited _ General of Fact Top of thurn or Conservator	Individual Corporate Officer — Title(s): Partner — Limited General Partner in Fact Trustee Guardian or Conservator