

## CITY OF SANTA ANA PLAN CHECK - CHECKLIST

TRACKING	#:	DATE:		
		PLAN CHECK STATUS anta-ana.org/pb or Call (71	4) 647-5800	
	PLEASE REA	AD AND INITIAL EACH ITE	M BELOW	
1.	I agree to pay a plancheck fee established for this project with the understanding that this payment is not a guarantee that a permit will be issued and that this fee is not refundable once a plancheck has commenced.			
2.	I understand that I may request an "Accelerated Plancheck" at an additional cost. This plan check may be performed at an additional cost with the intention of reducing plancheck time for the Building & Safety Division.			
3.	I understand that the project valuation will be reviewed during the plancheck process and that said valuation shall be adjusted up or down in accordance with established fee computation regulations.			
4.	I understand that I shall submit <b>separate plans, applications and plancheck fees</b> for Mechanical, Electrical, Plumbing, Solar and Grading when plan check is required.			
5.	I understand that prior to the issuance of the Building Permit, I am required to obtain Public Works Agency approval if any of the following apply: project valuation exceeds \$30,000; project has added plumbing fixtures; added bedrooms, or project exceeds 500 sq. ft.			
6.	I understand that prior to the issuance of the Building Permit, I am required to obtain Public Works Agency approval if my project valuation exceeds \$50,000 and that a backflow device may be required. Please call (714) 647-3320 for further information.			
AGREED TO	BY APPLICANT OR AGEN	<u> </u>		
Applicant's S	gnature:			
Print Name:		Address:		
Telephone N	ımber:	Email:		
FOR OFFICE	USE ONLY: "Checklist of	items discussed" APPROV	ALS & FEES REQUIRED	
Planning Depa	gency (714) 647-5074 9.	Title 24 (Disabled Access) Title 24 (Energy) Roof Mounted Equip Grease Interceptor	<ul> <li>15 SMIP Fee</li> <li>16 Microfilming/ scanning Fee</li> <li>17 Res. Dev. Fees</li> <li>18 FCWP Surcharge Fee</li> </ul>	