

**Applicant, Property Owner and Tenant Must Sign This Form**



**City of Sonoma**  
**Building Department**

#1 The Plaza  
 Sonoma, CA 95476

Phone: (707) 938-3681  
 Fax: (707) 938-8775

**Building Survey  
 Application**

Application Date: \_\_\_\_\_

*Please complete all applicable portions of the application below.*

Building Address		Suite #	
Building or Existing Business Name		APN #	
Property Owner	Phone	E-Mail Address	
Mailing Address	City	State	Zip
<b>Tenant</b> <i>(Required if building is occupied)</i>	Phone	E-Mail Address	
Mailing Address	City	State	Zip
Applicant	Phone	E-Mail Address	
Mailing Address	City	State	Zip
Requested Date and Time for Building Review	Existing Use of Building		
Date: _____ Time: _____	Is Remodeling being considered? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Description of Proposed Use of the Building <i>(Attach detailed information if available)</i>	Is an Addition being considered? <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Is the proposed Use a Food Handling Business? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**NOTICE**  
 The requested inspection is provided as a service to the above-mentioned Applicant and Owner to determine general code deficiencies and potential requirements relating to the building or buildings to be inspected based on the proposed use indicated. Any conditions found on the premises which are determined to be dangerous, a hazard or a nuisance pursuant to the codes adopted by the City of Sonoma will be required to be abated by repair or removal. In addition, any residential building which is inspected and found to be substandard in accordance with the State Housing Law shall be abated by repair or demolition. If the building is determined to be an immediate hazard to the extent that it endangers life, limb, health, property, safety or welfare of the public or the occupants thereof, the City's Building Official may order the building be vacated.

**PROPERTY OWNER**  
 I am the legal Owner or the Authorized Agent of the Owner of the property listed above and hereby certify that I have read this application and agree to comply with all City and County ordinances and State laws governing the above-mentioned building. I request that an inspection be made of the subject building and a report be issued thereof to myself and the above-mentioned Applicant. The undersigned hereby grants permission for the entry and inspection of the premises by the City of Sonoma Building Department on the aforementioned date, whether or not in the presence of the owner or his/her agent. I further agree to save, indemnify and hold harmless the City of Sonoma against liabilities, judgments, costs and expenses which may in any way accrue against said City in consequence of the performance of this inspection or the issuance of the subsequent report, and will pay all expenses including attorneys' fees in connection therewith.

x \_\_\_\_\_  
 Signature of Property Owner or Authorized Agent Date

**TENANT**  
 The undersigned Tenant hereby grants permission for the entry and inspection of the premises by the City of Sonoma Building Department on the aforementioned date, whether or not in the presence of the Tenant. I further agree to save, indemnify, and hold harmless the City of Sonoma and its employees against liabilities, judgments, costs and expenses which may accrue against the City or its employees in consequence of the performance of this inspection or the issuance of the subsequent report, and will pay all expenses, including attorney's fees, in connection therewith.

x \_\_\_\_\_  
 Tenant Signature *(Required if existing building is occupied)* Date

**APPLICANT**  
 I agree agree to save, indemnify, and hold harmless the City of Sonoma and its employees against liabilities, judgments, costs and expenses which may accrue against the City or its employees in consequence of the performance of this inspection or the issuance of the subsequent report, and will pay all expenses, including attorney's fees, in connection therewith.

x \_\_\_\_\_  
 Applicant Signature *(Person requesting the Building Survey)* Date

**Total Fee: \$** \_\_\_\_\_

Report Completed By \_\_\_\_\_ Date Report Mailed \_\_\_\_\_