



DEPARTMENT OF PLANNING & BUILDING  
 BUILDING DIVISION  
 276 Fourth Avenue Chula Vista CA 91910  
 619-691-5272 619-409-5428 FAX

# NEW SINGLE & MULTI-FAMILY WORKSHEET

## FORM 4611

### MINIMUM PLAN SUBMITTAL REQUIREMENTS

#### Building Division

(GRAY AREAS FOR OFFICE USE ONLY.)

Four complete sets of fully dimensioned, drawn to scale plans which include all of the following:

- |                                         |                                                          |                                     |                                                             |
|-----------------------------------------|----------------------------------------------------------|-------------------------------------|-------------------------------------------------------------|
| <input type="checkbox"/> Title Sheet    | <input type="checkbox"/> Foundation Plan                 | <input type="checkbox"/> Elevations | <input type="checkbox"/> Cross Sections                     |
| <input type="checkbox"/> Plot/Site Plan | <input type="checkbox"/> Floor Plan (Show M/E/P 's here) | <input type="checkbox"/> Roof Plan  | <input type="checkbox"/> Structural framing plans & details |

#### Two copies of the following:

- Soils Report (two additional copies required for projects utilizing post tension foundation design)
- Title 24 Energy compliance documentation (Certificate of Compliance sheets shall be reproduced on actual plan sheets)
- Structural calculations (if non-conventional framing)
- Engineered truss layout & details (if roof/floor trusses are used)
- Single line diagram for electrical services over 200 amps

#### Multi-Family Dwellings Only:

- California Administrative Code, Part 2, Title 24 plans demonstrating compliance with disabled access requirements
- Electrical, Mechanical, Plumbing Plans (inc. 2 sets of plumbing isometric plans)

#### Planning Division

- |                                                            |                                                               |                                             |
|------------------------------------------------------------|---------------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Design Review Committee<br>DRC #: | <input type="checkbox"/> Planning Commission<br>PCC or PCS #: | <input type="checkbox"/> Variance<br>ZAV #: |
|------------------------------------------------------------|---------------------------------------------------------------|---------------------------------------------|

- Two sets of Landscape & Irrigation Plans (if permit valuation is > \$20,000)

#### Engineering Department

- Precise Grading Plan

Development Name:		Project Name:	
Neighborhood #:	Unit #:	Phase #:	
ADDRESS OF PROPERTY:			Parcel #
Applicant Name:		<input type="checkbox"/> Agent for Owner	<input type="checkbox"/> Agent for Contractor
Address:	City:	State:	Zip Code:
Phone #:	Fax #:	E-mail:	
Owner:		Phone:	
Address	City:	State:	Zip Code:
Contractor:		Phone #:	Fax #:
Address:		State:	Zip Code:
Chula Vista Business License #:	State License #:	Class:	Expires:

### NEW RESIDENTIAL DWELLING

Type: [ ] SFD [ ] Duplex [ ] Tri-plex		Activity #:	
[ ] House w/Detached 2 <sup>nd</sup> Dwelling [ ] MFD			
Plan#:	Elevation:	Lot #:	# of Bedrooms:
		A/C <input type="checkbox"/> Y <input type="checkbox"/> N	# of Fireplaces:
Type of Construction:		Garage Attached <input type="checkbox"/> Y <input type="checkbox"/> N	Activity # (if detached):
SQUARE FOOTAGE	Dwelling	Garage	Balcony
		Porch	Patio
			Deck

#### Additional Comments:

<b>BUILDING DEMOLITION</b>		Activity #:	
Type of Building:	Sq Ft:	Asbestos Form: <input type="checkbox"/> Y <input type="checkbox"/> N	Disconnect Notice: SDG&E <input type="checkbox"/> Y <input type="checkbox"/> N

Applicant

Development Services Technician

Date