CITY OF CHULA VISTA

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

# FORM 4561

# NEW CONSTRUCTION WORKSHEET
## COMMERCIAL/INDUSTRIAL

### MINIMUM PLAN SUBMITTAL REQUIREMENTS

**Planning Division** **(GRAY AREAS FOR OFFICE USE ONLY.)**

- ❑ Design Review Committee DRC #:
- ❑ Planning Commission PCC or PCS #:
- ❑ Variance ZAV #:
- ❑ Two sets of Landscape & Irrigation Plans (if permit valuation is > $20,000)

**Engineering Department**

- ❑ Approved Final Subdivision or Parcel Map for addresses or parcels on this worksheet: Final Map #:
- ❑ Approved Grading Permit: Grading Permit #:

**Building Division**

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

- ❑ Title Sheet
- ❑ Plot/Site Plan
- ❑ Foundation Plan
- ❑ Floor Plan
- ❑ Elevations
- ❑ Roof Plan
- ❑ Cross Sections
- ❑ Structural framing plans & details
- ❑ Electrical Plans
- ❑ Mechanical Plans
- ❑ Plumbing Plans (including 2 sets of plumbing isometric plans)

**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)
- ❑ California Administrative Code, Part 2, Title 24 plans demonstrating compliance with disabled access requirements
- ❑ Structural calculations
- ❑ Engineered truss layout & details (if roof/floor trusses are used)
- ❑ Single line diagram for electrical services over 200 amps
- ❑ Hazardous Material Questionnaire
- ❑ Approved Health Department Plans (if food service business)

Site Address: Parcel #:

Applicant Name: ☐ Agent for Owner ☐ 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 COMMERCIAL/INDUSTRIAL BUILDINGS** **Activity #:**

| Building Number/Tenant | Bldg Sq Footage | Type of Construction | Occupancy | Shell | Fire Sprinklers | A/C |
|---|---|---|---|---|---|---|
| | | | | ☐Y ☐N | ☐Y ☐N | ☐Y ☐N |

**NEW COMMERCIAL ACCESSORY STRUCTURES**

| ID #: | ☐Patio Cvr/Encl | ☐Retaining Wall/Masonry Fence | ☐Trash Encl | ☐City Stnd | Sq Ft: | **Activity #:** |
|---|---|---|---|---|---|---|
| | | | | | | |

**FOR CONSTRUCTION OF ADDITIONAL BUILDINGS AND ACCESSORY STRUCTURES AT THE SAME ADDRESS, COMPLETE FORM 4561a.**

**NEW COMMERCIAL POOL** **Activity #:**

☐Gunite ☐Vinyl ☐Fiberglass Sq Ft: Solar Heater ☐Y ☐N Spa ☐Y ☐N Deck ☐Y ☐N Sq Ft:

**BUILDING DEMOLITION** **Activity #:**

| Type of Building | Square Footage | Asbestos Form | Disconnect Notices: | |
|---|---|---|---|---|
| | | ☐Y ☐N | SDG&E ☐Y ☐N | PAC BELL ☐Y ☐N |

**WORK NOT LISTED ABOVE:** **Activity #:**

Valuation: Form 4561: ☐Y ☐N

Applicant Development Services Technician Date