



The preparer is legally responsible for signatures whether a graphic, typewritten, or handwritten. Documents may not be restricted by digital signatures or otherwise.

Project Information	Permit No. _____
APN: _____	Date: _____
Project Address: _____	
Legal Owner: _____	Email: _____
Owner Address: _____	Phone: _____

**Technical Report Information** Please cite all reports utilized to determine project conformance

Consultant Company Name: \_\_\_\_\_

Name of Professional Who Signed Report: \_\_\_\_\_

Date of Report: \_\_\_\_\_

Date of Updates/Supplemental Information: \_\_\_\_\_

**Consultant Information**

Firm Name: \_\_\_\_\_ License No. \_\_\_\_\_

Name: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Geotechnical Engineer     
  Certified Arborist     
  Civil Engineer  
 Certified Engineering Geologist     
  Qualified Biologist     
  Other (type): \_\_\_\_\_

**Project Plan Sheets Reviewed**

Plan Prepared By	Plan Sheet Numbers	Date of Latest Revision

If checked, certain aspects of the project cannot be verified for compliance due to lack of observation, but efforts have been made to determine general compliance. (See attached Inspections Exceptions Addendum)

By signing below, we confirm that the project has been completed in conformance with all the recommendations of the technical report and/or the project has been completed in conformance with the plans referenced above.

**Apply California State registered architect or engineer** (signature and stamp below, if applicable)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

