



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

By signing below, we confirm that the plan sheets listed above for the specified project are in conformance with the recommendations of the technical report prepared under our responsibility.

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

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