



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

**NEW  
 CONSTRUCTION  
 WORKSHEET  
 COMMERCIAL/INDUSTRIAL**

**FORM 4561**

**MINIMUM PLAN SUBMITTAL REQUIREMENTS**

**Planning Division**

(GRAY AREAS FOR OFFICE USE ONLY.)

<input type="checkbox"/> Design Review Committee DRC #:	<input type="checkbox"/> Planning Commission PCC or PCS #:	<input type="checkbox"/> Variance ZAV #:
<input type="checkbox"/> Two sets of Landscape & Irrigation Plans (if permit valuation is > \$20,000)		

**Engineering Department**

<input type="checkbox"/> Approved Final Subdivision or Parcel Map for addresses or parcels on this worksheet: Final Map #:	<input type="checkbox"/> Approved Grading Permit: Grading Permit #:
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**Building Division**

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

<input type="checkbox"/> Title Sheet	<input type="checkbox"/> Elevations	<input type="checkbox"/> Electrical Plans
<input type="checkbox"/> Plot/Site Plan	<input type="checkbox"/> Roof Plan	<input type="checkbox"/> Mechanical Plans
<input type="checkbox"/> Foundation Plan	<input type="checkbox"/> Cross Sections	<input type="checkbox"/> Plumbing Plans (including 2 sets of plumbing isometric plans)
<input type="checkbox"/> Floor Plan	<input type="checkbox"/> Structural framing plans & details	

**Two copies of the following:**

<input type="checkbox"/> Soils Report (two additional copies required for projects utilizing post tension foundation design)	<input type="checkbox"/> Structural calculations
<input type="checkbox"/> Title 24 Energy compliance documentation (Certificate of Compliance sheets shall be reproduced on actual plan sheets)	<input type="checkbox"/> Engineered truss layout & details (if roof/floor trusses are used)
<input type="checkbox"/> California Administrative Code, Part 2, Title 24 plans demonstrating compliance with disabled access requirements	<input type="checkbox"/> Single line diagram for electrical services over 200 amps
	<input type="checkbox"/> Hazardous Material Questionnaire
	<input type="checkbox"/> Approved Health Department Plans (if food service business)

Site Address:		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:
<b>NEW COMMERCIAL/INDUSTRIAL BUILDINGS</b>		<b>Activity #:</b>	
Building Number/Tenant	Bldg Sq Footage	Type of Construction	Occupancy
		Shell <input type="checkbox"/> Y <input type="checkbox"/> N	Fire Sprinklers <input type="checkbox"/> Y <input type="checkbox"/> N
			A/C <input type="checkbox"/> Y <input type="checkbox"/> N
<b>NEW COMMERCIAL ACCESSORY STRUCTURES</b>			
ID #:	<input type="checkbox"/> Patio Cvr/Encl	<input type="checkbox"/> Retaining Wall/Masonry Fence	<input type="checkbox"/> Trash Encl <input type="checkbox"/> City Stnd
Sq Ft:	Activity #:		
<b>FOR CONSTRUCTION OF ADDITIONAL BUILDINGS AND ACCESSORY STRUCTURES AT THE SAME ADDRESS, COMPLETE FORM 4561a.</b>			
<b>NEW COMMERCIAL POOL</b>		<b>Activity #:</b>	
<input type="checkbox"/> Gunit <input type="checkbox"/> Vinyl <input type="checkbox"/> Fiberglass	Sq Ft:	Solar Heater <input type="checkbox"/> Y <input type="checkbox"/> N	Spa <input type="checkbox"/> Y <input type="checkbox"/> N
		Deck <input type="checkbox"/> Y <input type="checkbox"/> N	Sq Ft:
<b>BUILDING DEMOLITION</b>			<b>Activity #:</b>
Type of Building	Square Footage	Asbestos Form	Disconnect Notices:
		<input type="checkbox"/> Y <input type="checkbox"/> N	SDG&E <input type="checkbox"/> Y <input type="checkbox"/> N
			PAC BELL <input type="checkbox"/> Y <input type="checkbox"/> N
<b>WORK NOT LISTED ABOVE:</b>			<b>Activity #:</b>
Valuation:			Form 4561: <input type="checkbox"/> Y <input type="checkbox"/> N

Applicant

Development Services Technician

Date