



CITY OF DIXON
600 EAST A ST.
DIXON, CA 95620-3697
PHONE (707) 678-7000
Building Info Building@cityofdixonca.gov

Request For Information Plan Duplication

Name: _____

Date: _____

Address: _____

Purpose: _____

Type of Information

- ☐ Permit History
- ☐ Code Enforcement
- ☐ Permit Under Review
- ☐ Copy of Plans

Fees (Office Use)

- | | |
|--|-------------------|
| <input type="checkbox"/> Document/Plan reproduction (<11x17) | \$0.25 per page |
| <input type="checkbox"/> Document/Plan reproduction (<11x17) | Actual cost + 10% |
| <input type="checkbox"/> Research, etc. (< 30 Mins) | \$201.00 per hour |

Process See Page 2 (below)

AFFIDAVIT REGARDING PLAN DUPLICATION

I, _____, hereby declare that I am the person requesting duplication of the official copy of the plans maintained by the City of Dixon, Building Department, for the building(s)/structure(s) located at _____, Dixon, California, and:

1. That the copy of the plans shall only be used for the maintenance, operation, and use of the building;
2. That drawings are instruments of professional service and are incomplete without the interpretation of the certified, licensed, or registered professional of record; and,
3. That subdivision (a) of Section 5563.25 of the Business and Professions Code states that a licensed architect who signs plans, specifications, reports, or documents shall not be responsible for damage caused by subsequent changes or uses, including changes or uses made by state or local governmental agencies, are not authorized or approved by the licensed architect who originally signed the plans, specifications, reports, or documents, provided that the architectural service rendered by the architect who signed the plans, specifications, reports, or documents was not also a proximate cause of the damage.

I certify under the laws of the State of California that the foregoing declaration is true, accurate, and complete to the best of my knowledge and belief.

(To be signed in the presence of a Notary)

Full Name (print)

Street Address

City and State

NOTARY

State of California
County of Solano

On _____ before me, _____, Notary Public, personally appeared _____, personally known to me (or proved on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal,

Signature _____ (Seal)



Instructions for Plan Duplication

Whenever an individual requests to duplicate the official copy of the plans maintained by the Building Department, the following procedure must be followed in order to insure compliance with the provisions of **Section 19851 of the Health and Safety Code (Amended by Stats. 1988, c. 767, Section 2).**

1. The person requesting to duplicate the official copy of the plans shall complete an **AFFIDAVIT REGARDING PLAN DUPLICATION** provided by the Building Department. The form must be completed, notarized (as this is an affidavit), and returned to the Building Department by the applicant.
2. If the person requesting to duplicate the official copy of the plans is the original owner or current owner of the building or the authorized agent of the board of directors or other governing body of the association established to manage the common interest development where the building is located, then such person shall be requested to complete an **Authorization to Duplicate Official Plans (Owner)**. However, if the person requesting to duplicate the official copy of the plans is not one of the aforementioned parties, then the City will request a **Record/Owner Guarantee** from a local title company. Upon receipt of the ownership information from the title company, the City will mail a form letter (**Request for Permission to Duplicate Official Plans – Owner**) requesting permission from the **Record/Owner** to duplicate the official plans. The form letter will be sent via registered mail, return receipt requested, and shall include a blank copy of the **Authorization to Duplicate Original Plans (Owner)** and a self-addressed, stamped envelope deliverable to the City of Dixon Building Department. Should the **Record/Owner** fail to respond or to consent to the City's request within thirty calendar days of the date of mailing, then the person requesting to duplicate the official copy of the plans shall be notified that the owner has not responded, and the plans may be photocopied.
3. The Building Department will mail the following items to the licensed, registered, or certified professional who prepared the original plans (or to his or her successors, if any):
 - a. A form letter entitled, "**REQUEST FOR PERMISSION TO DUPLICATE OFFICIAL PLAN – SIGNER OF ORIGINAL DOCUMENTS**"
 - b. A copy of the completed **AFFIDAVIT REGARDING PLAN DUPLICATION**