



Building Division Submittal Form

Project Worksheet for One & Two Family Dwellings

Office Use Only Submittal Date: _____ Received By: _____ Plan Check No. _____

Project Address: _____
 Tract No. _____ Lot No. _____ APN No. _____
 Project Name: _____
 Use: Single-Family Duplex Residential Care Other _____

Applicant : _____ Firm: _____ Phone: _____

Plan Review Contact: _____ **Firm:** _____
Phone: _____ **Fax:** _____ **E-mail** _____

Contact: (Circle Applicable) Owner Permit Service Designer Architect Engineer Contractor Other

Property Owner: _____

Service Requested:

Submittal for: Permit Application & Plan Review Zoning Review
 Counter Service: Prelim Zoning Review Prelim Code Review

Permit Type (circle all applicable):

addition/alteration - accessory structure - subtrade only - new custom home - demolition - fire damage - house move

Permits Requested: Building Electrical Plumbing Mechanical

Previous Permits obtained for this project: Yes / No Permit no(s). _____

No. of Stories: _____ Lot Size: _____ sq ft Building height: _____

Planning Permit No. (if applicable): _____

Number of Plans Submitted:	Plans _____	Struct Calcs _____	Title 24 Docs _____
	Soils Report _____	Other _____	

Describe Proposed Work: _____

MANDATORY: Complete opposite side of this page to indicate scope of work proposed.

THIS FORM MUST BE COMPLETED PRIOR TO COUNTER SERVICE. Incomplete forms may result in the applicant returning to the waiting area to complete this form, and issuance of a new counter service ticket number behind other customers



CITY OF SAN JOSÉ, CALIFORNIA

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Single Family Remodel Scope of Work

Indicate the area (square feet) of work proposed, below:

		Addition to Existing	Alteration of Existing	New Home	
Heated Living	Total Living Area ¹	sf	sf	sf	
	Kitchen ²	sf	sf		
	Bath #1 ²	sf	sf		no. fixtures being installed _____
	Bath #2 ²	sf	sf		no. fixtures being installed _____

		Addition to Existing	Alteration of Existing	New Structure
Unheated Rooms	Garage - detached			
	Garage - attached			
	Screen Room			
	Basement			
	Other:			

		New Area	
Other Structures	Patio Cover		
	Swimming Pool		
	Deck		
	Retaining Wall	_____ ft height x _____ ft length	
	Fence	_____ ft height x _____ ft length	

	Description	Area	Quantity
Other Construction			

		Quantity
Other Alteration Items	Windows / Exterior Door	
	Bay Windows	
	Skylights (framing modified)	
	Skylights (w/o framing modification)	

Notes:

¹ Includes floor area of kitchen, bathrooms and heated basements.

² List kitchen and bath square feet separately.