



# AFFIDAVIT

FORM  
**6B**  
August 2005

CITY OF ESCONDIDO • BUILDING DIVISION • 201 N. BROADWAY, ESCONDIDO, CA 92025 • (760) 839-4647

*Print or type all information*

State of California

County of San Diego: \_\_\_\_\_

*Name of Applicant*

\_\_\_\_\_  
*Street Address of Applicant*

*City*

*State*

*ZIP Code*

I hereby request in accordance with Sections 19851 and 19852 of the California Health and Safety Code a duplicate of the official copy of:

- Building Plans     
  Specifications and Calculations     
  Reports     
  Documents

on file in the City of Escondido Building Division for

## Building Address

\_\_\_\_\_  
*Street No.*

\_\_\_\_\_  
*Street Name*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*ZIP Code*

I affirm that I am aware of and understand the provisions of Section 19851 (c), of the California Health and Safety Code which states:

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;
3. That subdivision (a) of Section 5536.25 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 to, or use of those plans, specifications, reports or documents where the subsequent changes or uses, including changes or uses made by state or local government 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, report or documents was not also a proximate cause of the damage.

Attested to by: \_\_\_\_\_

*Signature of Applicant*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Telephone Number*