

NOTICE OF REQUEST FOR DUPLICATION OF PLANS

FORM
6D
August 2005

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

| CERTIFIED MAIL | DATE: |
|--|---------------------------------|
| The City of Escondido Building Division has received required to be maintained in the department accordin Safety Code. | |
| The request was made by: | |
| | Applicant's Name and Address |
| For: | |
| Plans | Specifications and Calculations |
| Reports | Documents |
| on property located at: | |
| | |
| | |
| and further identified as Building Division Plan Check | · |

Our records indicate you were the licensed, registered, or certified professional who signed the official copy of the plans.

PERMISSION REQUIRED FOR DUPLICATION

According to law, the official copy may not be duplicated without your written permission, which permission shall not be unreasonably withheld, and the written permission of the original or current owner, or if the building is part of a common interest development, the written permission of the board of directors or governing body of the association established to manage the common interest development, or by order of a proper court.

Guideline #6D (8-05).doc Page 1 of 2

To give permission, please complete the enclosed form and return to:

City of Escondido Building Division 201 North Broadway Escondido, CA 92025

UNREASONABLE REFUSAL EXPLAINED

Refusal to permit duplication of the plans is unreasonable if you do not respond to us within 30 days of the receipt of this letter and the enclosed affidavit. The Building Division can extend this period to no more than 60 days from your receipt of this letter for reasons of serious illness, travel, or other extenuating circumstances.

If you wish to request an extension, please explain your reasons on the enclosed form and return it to us at the above address.

Current law allows making a duplicate of the official copy of the plans, specifications, reports and documents if your refusal is determined to be unreasonable.

| Signature |
|-----------|
| |
| Title |

Thank you for your consideration,

Enclosures:

- 1. Permission of licensed, registered or certified professional to duplicate plans.
- 2. Request for extension of period to respond.
- 3. Affidavit of person requesting duplicate plans.

Guideline #6D (8-05).doc Page 2 of 2