

**City Staff Use Only**  
**Application Complete**    \_\_\_ Yes    \_\_\_ No  
 Check one  
 City Staff Initials \_\_\_\_\_ Date \_\_\_\_\_

**CITY OF WINTERS BUILDING DIVISION  
 SUBMITTAL CHECKLIST**

Name of Project \_\_\_\_\_ Permit #: \_\_\_\_\_

Address/Location \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone Number \_\_\_\_\_

E-mail \_\_\_\_\_ Fax Number \_\_\_\_\_

Contact the City Planner at (530) 794-6714 and obtain approval prior to completing the items on this submittal checklist.

Number of Copies	<b>APARTMENT COMPLEX – Remodels / REHAB</b>	# Plans Received	Date Received	Received By
3  2 of these sets must be stamped & signed by a licensed architect or engineer	<b>CONSTRUCTION DRAWINGS:</b> <input type="checkbox"/> Site plan showing area of work including all affected units; <input type="checkbox"/> Landscape plan (if applicable); <input type="checkbox"/> Floor plan; <input type="checkbox"/> Architectural details (if applicable); <input type="checkbox"/> Structural (if applicable); <input type="checkbox"/> Plumbing, including isometric; <input type="checkbox"/> Mechanical; <input type="checkbox"/> Electrical, including single line diagram, main panel, subpanel, and all home runs; <input type="checkbox"/> Exterior Alterations and details (if applicable);			
1	<b>COMPLETE SET OF 11x17 PLANS</b>			
3	<b>STRUCTURAL CALCS</b> – Stamped and signed by a licensed engineer or architect.			
3	<b>ENERGY CALCS</b> - Include all compliance forms and work sheets required by the California Energy Commission.			
3	<b>MANUFACTURERS INFORMATION BOOKLETS</b> for hoods and other kitchen equipment (if applicable)			
1	<b>PLANNING APPROVAL LETTER</b> (if applicable)			
1	<b>AIR QUALITY MANAGEMENT DISTRICT SURVEY FORM</b>			
1	<b>OWNER / BUILDER VERIFICATION FORM</b>			
1	<b>BUILDING PERMIT APPLICATION FORM</b> (include contract amounts)			