

**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>RESIDENTIAL - <input type="checkbox"/> PATIO COVERS <input type="checkbox"/> PATIO ENCLOSURE <input type="checkbox"/> ACCESSORY STRUCTURES <input type="checkbox"/> DECKS</b>	# Plans Received	Date Received	Received By
3	<b>PLOT PLANS:</b> <input type="checkbox"/> Show name and address; <input type="checkbox"/> North arrow; <input type="checkbox"/> Dimension and location of structure; <input type="checkbox"/> Side, rear and front yard setbacks from the structure to the property lines.			
3	<b>CONSTRUCTION DRAWINGS:</b> <input type="checkbox"/> Foundation details showing type and size of footings; <input type="checkbox"/> Framing section showing sizes; <input type="checkbox"/> Elevations showing four sides of the proposed structure <input type="checkbox"/> Indicate height of deck.			
2	<b>STRUCTURAL CALCS OR I.C.B.O. REPORT:</b> <input type="checkbox"/> Stamped engineered plans or manufacturers diagram for prefab structures.			
1	<b>COMPLETE SET OF 11x17 PLANS</b>			
1	<b>OWNER / BUILDER VERIFICATION FORM</b>			
1	<b>BUILDING PERMIT APPLICATION FORM</b>			