

# PERMISSION TO COPY PLANS AFFIDAVIT

City of Foster City, 610 Foster City Boulevard, Foster City, CA 94404; (650) 286-3200

APN:		Date:	
Owner Name:		Site Address:	
Requestor's Name:		Phone #:	
Description and No. of Pages (Full or Partial Set?):			
Purpose:			

I, the undersigned declare as follows:

1. I have requested a copy of the above-described plans, documents and/or reports.
2. As required by Health and Safety Code §19851, this affidavit confirms that the copy of these plans shall only be used for the maintenance, operation, and use of the project. I understand and acknowledge that the drawings are instruments of professional service and are incomplete without the interpretation of the certified, licensed, or registered professional of record. I further understand and acknowledge that subdivision (a) of §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 signs the plans, specifications, reports, or documents, provided that the architectural service rendered by the architect who signs the plans, specifications, reports, or documents, was not also a proximate cause of the damage.
3. I have read the above provisions and attest that the above statements are true and agree to abide by the limitations stated therein. **I agree to pay a fee for the service requested as per the current Schedule of Fees and Charges.** I am aware that the actual reproduction of any plans, documents, and/or reports will be done at an additional cost based on the size and number of documents to be reproduced.
4. As the requestor, I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

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Requestor's Name (Print)

Requestor's Signature

Date

## TO BE COMPLETED BY THE ARCHITECT/ENGINEER OF RECORD:

The City of Foster City has received a request for permission to duplicate plans or documents that were originally prepared by your office. Pursuant to Section 19851 of the Health & Safety Code, the City, prior to copying plans or documents prepared by a licensed, registered, or certified professional, must first attempt to contact the preparer for permission to copy the plans or documents. This constitutes the City's request per Health & Safety Code Section 19851 requesting your permission to copy the above-referenced documents. Failure to respond to this request within 30 days will be interpreted as consent for the duplication of the plans.

I agree     I disagree    To give permission for the above-referenced plans and/or documents to be copied.

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Licensed Professional's Name (Print)

Licensed Professional's Signature

Date

## TO BE COMPLETED BY THE CURRENT PROPERTY OWNER:

The City of Foster City has received a request for permission to duplicate plans or documents that were originally prepared regarding your property. Pursuant to Section 19851 of the Health & Safety Code, the City, prior to copying plans or documents prepared by a licensed, registered, or certified professional, must first attempt to contact the current property owner for permission to copy the plans or documents. This constitutes the City's request per Health & Safety Code Section 19851 requesting your permission to copy the above-referenced documents. Failure to respond to this request within 30 days will be interpreted as consent for the duplication of the plans.

I agree     I disagree    To give permission for the above-referenced plans and/or documents to be copied.

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Current Property Owner's Name (Print)

Current Property Owner's Signature

Date