



# City of Moorpark

## Building and Safety

799 Moorpark Avenue

Moorpark, CA 93021

(805) 517-6272 FAX (805) 532-2520

## Plan Check Application

### Site Information

Plan Check Number: \_\_\_\_\_  
(Office Use Only)

Site Address: \_\_\_\_\_

Tract: \_\_\_\_\_ Lot: \_\_\_\_\_ APN: \_\_\_\_\_

#### Property Owner

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

#### Applicant

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

#### Architect/Designer

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
License No.: \_\_\_\_\_ Exp.: \_\_\_\_\_

#### Engineer

Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State & Zip: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
License No.: \_\_\_\_\_ Exp.: \_\_\_\_\_

### Project Information

Estimated Valuation (total cost of labor and materials): \$ \_\_\_\_\_

Existing floor area: \_\_\_\_\_ New/Addition floor area: \_\_\_\_\_ Remodeled floor area: \_\_\_\_\_

Scope of Work:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I attest by my signature below under penalty of perjury that I have read this application and the information I have provided is true and correct. I attest that I am the Property Owners Authorized representative and authorize representatives of the city of Moorpark to enter the above-identified property for inspection purposes.

Business Name: \_\_\_\_\_

Applicant /Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant/Owner Name: \_\_\_\_\_

(Print)

**This Plan Check Application expires 180 days after first submittal date.**

Issue 1 Rev. 3

Revision Date: 12/16/2020