OUNTY OF SISKINGE

COUNTY OF SISKIYOU

COMMUNITY DEVELOPMENT DEPARTMENT

Building ◆ Environmental Health ◆ Planning

806 South Main Street Yreka, California 96097

Phone: (530) 841-2100 · Fax: (530) 841-4076

https://www.co.siskiyou.ca.us/community-development

RICHARD J. DEAN DIRECTOR

AARON STUTZ, MD PUBLIC HEALTH OFFICER

AFFIDAVIT

		Current Building Owner Y/N?
Name of Applicant		
Street Address of Applicant		
City State	ZIP	
I hereby request, in accordance with Sed duplicate of the official copy of:	ctions 19850 a	nd 19851 of the California Health and Safety Code, a
Architectural / Engineering Plans / Maps Reports Specifications and Calculations Documents		
FOR THE BUILDING LOCATED AT (AS	SESSOR'S PA	ARCEL NUMBER / BUILDING ADDRESS):
I affirm that I am aware of and understar Code which states in part:	nd the provision	ns of Section 19851, of the California Health and Safety
maintained by the building department, s registered professional, or his or her suc original or current owner of the building of	shall request w cessor, if any, or (2), if the bu	is requested to duplicate the official copy of the plans ritten permission to do so from the certified, licensed, or who signed the original documents and from (1) the ilding is part of a common interest development, from the ciation established to manage the common interest
		of an affidavit to be completed and signed by the person nich contains provisions stating all of the following:
(1) That the copy of the plans shall only	be used for th	e maintenance, operation, and use of the building.
(2) That drawings are instruments of procertified, licensed, or registered profession		ice and are incomplete without the interpretation of the
who signs plans, specifications, reports, changes to, or use of, those plans, specincluding changes or uses made by state licensed architect who originally signed to	or documents ifications, repo e or local gove the plans, spectific who sign	ness and Professions Code states that a licensed architect shall not be responsible for damage caused by subsequent rts, or documents where the subsequent changes or uses, rnmental agencies, are not authorized or approved by the sifications, reports, or documents, provided that the ned the plans, specifications, reports, or documents was
Attested to by:		
Signature of Applicant	 Date	Telephone / Email