

Date: _____

Project Name: _____

Office Use		
EDUs		
W/S/R		
CFD	YES	NO
Res/OS/Com/Misc		
Plan Checker		
Completed Date		



DOCUMENTS REQUIRED FOR PLAN CHECK

Note: EMWD will perform a completeness check of the documents identified below within the first week of submittal. If the package is found to be incomplete, your submittal will not be accepted. A submittal will **NOT** be placed in the queue for the next available plan checker until it is found to be complete.

We are providing the following:

- | Yes | N/A | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | An Approved Developer Design Conditions (DDC) Summary Spreadsheet & Exhibits
DDC PPI # _____ (Located on the approved DDC Summary Spreadsheet)
If approved DDC is expired (older than 6 months), please follow up with DDC Engineer. |
| <input type="checkbox"/> | <input type="checkbox"/> | 2 Sets of Water & Sewer Improvement Plans (Per EMWD Standards and Guidelines) |
| <input type="checkbox"/> | <input type="checkbox"/> | 1 Set of Street Improvement Plans |
| <input type="checkbox"/> | <input type="checkbox"/> | 1 set of Storm Drain Plans (if not included with Street Improvement Plans) |
| <input type="checkbox"/> | <input type="checkbox"/> | 1 Set of Grading Plans |
| <input type="checkbox"/> | <input type="checkbox"/> | 1 Set of the approved Tentative Tract Map |
| <input type="checkbox"/> | <input type="checkbox"/> | 1 Set of the Parcel or Tract Map |
| <input type="checkbox"/> | <input type="checkbox"/> | 1 Set of the current Conditions of Approval including documentation indicating extensions (if any),
and Fire Flow Requirements
If the Conditions of Approval are not available, provide one set of Fire Flow Conditions
From the governing Fire Prevention Agency. |
| <input type="checkbox"/> | <input type="checkbox"/> | A Plan Check Deposit: Attached Amount \$ _____
Refer to Work Order Deposit Work Sheet (Form: NBD-053) for plan check deposit amount. |
| <input type="checkbox"/> | <input type="checkbox"/> | A Community Facilities District (CFD) Letter (Form: NBD-008) |
| <input type="checkbox"/> | <input type="checkbox"/> | A Work Order Request Form: NBD-050 |

Current guidelines for preparation of sewer and water plans and standard drawings are available on our website at www.emwd.org.

Signature of Registered Civil Engineer

Print name:

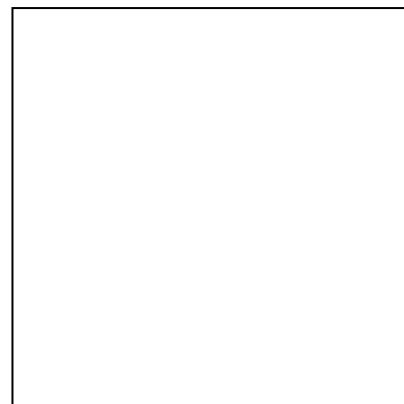
Phone:

Company Name

Address

City, State, Zip Code

Email



Professional Engineer Stamp