



City of Ojai
Community Development Department

**REQUEST FOR CONCURRENT PLAN CHECK AND
ACKNOWLEDGEMENT OF RISKS**

Project Address: _____

Planning Project Number: _____

Property Owner(s) Name: _____

Address: _____

Telephone/Fax/E-mail: _____

Applicant(s) Name: _____

Address: _____

Telephone/Fax/E-mail: _____

I declare that I am the owner / owner's authorized representative (indicate one) of the property involved in this application.

I further declare that I am requesting concurrent Building Plan Check and acknowledge that I understand and am assuming the risks in submitting building plans prior to obtaining all necessary Planning approvals.

Signature of Property Owner / Representative

Date