



City of Seaside Building Division

400 Harcourt Avenue, Seaside, California 93955 (831) 899-6737

Plan Change/Addendum Request

Plan Review/Permit #: _____ Submittal Date: _____

Job Address: _____

Applicant Name: _____ Contact Phone #: _____

Submittal Requirements: In the space below please describe the exact changes you are submitting on your plans. Identify which area and sheet number the changes are located. Please attach appropriate energy, truss and or structural calculations and layouts that support your proposal. Additional plan review fees may be assessed.

Applicant's Signature: _____ Date: _____

City Plan Review Correction:

Approved by: _____ Date: _____

All construction requirements are based on the California Code of Regulations (CCR) Title 24: 2016 California Residential Code; 2016 California Electrical Code; 2016 California Mechanical Code; 2016 California Plumbing Code; 2016 California Fire Code.