

## Development Services Department

1887 Howard Street, Anderson, California 96007 • Telephone (530) 378-6636 • Fax (530) 378-6666

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### Fee Estimate Request

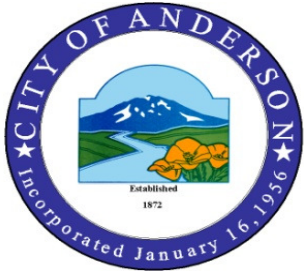
The Building Department would like you to be fully informed of any fees associated with your project. Most fees are determined by the nature and scope of your plans. Please fill out the following information sheets so that we understand the detail of your proposed building. The information that you provide will be used to determine the estimated fees.

Your estimate will be returned within 10 business days. In an attempt to do a thorough and complete job of estimating your fees, we do not compute estimates at the counter.

It is important to note that changes in floor area, use, and location can change the fees. If these elements of your plans change, contact the Building Department at (530) 378-6636 for a revision of your estimate.

You may return the completed forms to the Building Department by:

Mail: 1887 Howard Street, Anderson, CA 96007  
Fax: (530) 378-6666  
Email: [mmofield@ci.anderson.ca.us](mailto:mmofield@ci.anderson.ca.us)



**Development Services Department  
Fee Estimate Request  
Project Information**

**Project Location**

Address \_\_\_\_\_ APN \_\_\_\_\_

Shopping Center Name (if applicable) \_\_\_\_\_

**Applicant Information**

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

**Contact Person** (please check the box for preferred method of communication)  Same as applicant

Name \_\_\_\_\_

E-mail \_\_\_\_\_

Telephone \_\_\_\_\_

FAX \_\_\_\_\_

**Work Estimate**

Value of the work to be performed \$ \_\_\_\_\_

Anticipated date of submittal to the Building Department \_\_\_\_\_

**Construction Type**

- New  Interior Remodel  
 Shell  Tenant Improvements (*First-time improvements to the space*)  
 Other (Explain) \_\_\_\_\_

**Previous Use**

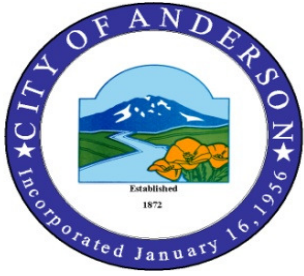
- Vacant Land  Office Name \_\_\_\_\_  
 Single Family  Retail Name \_\_\_\_\_  
 Restaurant Name \_\_\_\_\_  
 Other (describe): \_\_\_\_\_

**Project Use**

Identify the different uses in the building and the approximate area devoted to each use:

Office - Floor area _____	Multi-Family-Floor Area	Sq Ft: _____	# Units: _____
Retail - Floor area _____	Industrial	_____	_____
Single Family - Floor area _____	Restaurant	_____	_____
Exterior impervious area - (parking, walkways, etc.): _____			
Other (describe): _____			

Please complete a separate form for each building



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Project Information**

**Equipped with fire sprinkler system?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Building's structural material?** \_\_\_\_\_ Block \_\_\_\_\_ Metal \_\_\_\_\_ Other:  
 \_\_\_\_\_ Concrete \_\_\_\_\_ Wood

**Electrical:**

<u>Quantity</u>	<u>Size</u>	<u>Voltage</u>	<u>Existing Electrical Meters?</u>
_____	_____ amps	_____ 120/240 _____ 120/208 _____ 227/480	_____ No _____ Yes
_____	_____ amps	_____ 120/240 _____ 120/208 _____ 227/480	_____ No _____ Yes
_____	_____ amps	_____ 120/240 _____ 120/208 _____ 227/480	_____ No _____ Yes
_____	_____ amps	_____ 120/240 _____ 120/208 _____ 227/480	_____ No _____ Yes

**Plumbing:**

_____ Toilets	_____ Lavatories	_____ Tub/Shower	_____ Water Heaters
_____ Dishwasher	_____ Sinks/Laundry Trays	_____ Garbage Disposal	_____ Gas Appliances
_____ Washing Machines	_____ Septic System	_____ Sewer Connections	_____ Irrigation Sprinkler
_____ Grease Traps	_____ Other (describe): _____		

**Mechanical:**

<u>Quantity</u>	<u>Size</u>	<u>Check One</u>	<u>Quantity</u>	<u>Type</u>
_____	_____	_____ Tons _____ BTU _____ HP	_____	Evaporative Coolers
_____	_____	_____ Tons _____ BTU _____ HP	_____	Exhaust Fans
_____	_____	_____ Tons _____ BTU _____ HP	_____	Commercial Hoods
_____	_____	_____ Tons _____ BTU _____ HP		

**Water meter size(s):** \_\_\_\_\_ Inches \_\_\_\_\_ Inches \_\_\_\_\_ Inches

**Food Service (Check all that apply):**

_____ Food preparation on site	_____ Fast food - Major chain	_____ Pre-packaged food
_____ Delicatessen	_____ Fast food - Local	_____ No onsite food preparation
_____ Open 24-hours	_____ Pizza parlor	_____ Commercial dishwasher

**Comments:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please complete a separate form for each building