



NEW OR ADDITIONS TO GARAGE/SHOP/STORAGE PERMIT REQUIREMENTS

Note: The applicant is advised to consult with all Butte County Land Use Departments (including the Planning Department and Public Works Department – Land Development Division, Public Health – Environmental Health Division, Butte County Fire, etc.) about additional requirements for site development prior to making application of the building permit.

The following is required to make application for a new or addition to a garage/shop/storage building permit application:

- Completed Butte County Department of Development Services building permit application ([form DBP-1](#)). Please furnish the assessor's parcel number for the proposed location.
- 3 site plans signed by the preparer of the plans (form [DBP-3](#)). Paper to draw site plans and site plan submittal requirements (form [DBP-2](#)) are available at the Development Services counter. ***At least one site plan must be 11" x 17"***.
- 3 complete sets of plans signed by the preparer. If plans are prepared by a Registered Design Professional (RDP), the plans must be signed and wet-stamped by and include the name, address, phone number, title and registration number of the preparer. Plans need to include the property owner's name, address and phone number, the assessor's parcel number and the project name, address and phone number of project if different than the property owner and pages to be numbered.

The plans need to include the following:

Cover sheet to include:

- Applicable codes and editions
- Description of scope of all work
- Code Analysis to include construction type, occupancy, use and all square footages

Plans to include:

- Foundation plan
- Cross Section
- Roof plan layout or truss details
- Exterior elevations (all four orientations)
- Floor plans showing all windows, doors with sizes and rooms labeled:

One floor plan must be provided sized 11" x 17" or electronically in pdf format for scanning purposes

Electric, Plumbing, Mechanical (if applicable) plans to include:

Location of HVAC equipment and size

Location of plumbing fixtures and dimensions

Locations of outlets, fixtures, switches, smoke detectors, carbon monoxide detectors (if applicable), subpanels and main panels with size and location

- If plans are engineered 2 sets of wet stamped and signed structural calculations
- 2 sets of truss calculations if applicable. If plans are engineered a letter from the RDP stating the truss calculations comply with the engineering
- Soils Investigation Report (if applicable)
Soils Investigation Report, in duplicate, wet-stamped and signed.
A letter from the registered design professional verifying soils investigation report review and structural design in accordance with the report.
- Energy calculations prepared by a registered energy consultant in duplicate (if applicable).
- A copy of the creation deed may be required for the parcel if the parcel is undeveloped (vacant and never been built on). This will be determined during the permit review by the Land Development Department.
- Flood Elevation Certificate, in duplicate, wet stamped and signed (if applicable). To determine parcel is in a flood zone go to our website www.buttecounty.net. Click on Parcel Lookup from the DDS Menu to do a search.



**BUTTE COUNTY
DEPARTMENT OF DEVELOPMENT SERVICES
BUILDING PERMIT APPLICATION***

Phone: (530) 538-7601 Fax (530) 538-7785

Website: www.buttecounty.net/dds

Payment of Fees Required at Time of Application

PERMIT NO:	FORM NO
BIN NO:	DBP-1

PLEASE PRINT CLEARLY

PROPERTY OWNER INFORMATION		
Last Name	First Name	
Mailing Address		
City	State	Zip
Phone	Fax	
Email	Cell	

PROJECT LOCATION	
APN	
Property Address	
City	Location must not be in the city limits of Chico, Gridley, Oroville or Paradise, click below for parcel information
http://qismaps.buttecounty.net/flexviewer/bcdatasearch/index.html	

CONTRACTOR		
Name		
Mailing Address		
City	State	Zip
Phone	Fax	
Email	Cell	
License No.	Class	

WORKER'S COMPENSATION	
Policy Number	
Carrier	
If hiring other than a licensed contractor, a certificate of worker's compensation must be shown at the time of permit issuance	

LENDING AGENCY		
Name		
Mailing Address		
City	State	Zip

ARCHITECT/ENGINEER		
Name		
Mailing Address		
City	State	Zip
Phone	Fax	
Email	Cell	
CA State License No.		

DESCRIPTION OR SCOPE OF WORK	
Mobile Home permits (other than installation, foundation, utilities & non-attached structures) are issued by the State. Tell staff if this permit is for a Mobile Home. Click below to see Manufactured Home Alterations and Permit Guidelines at: http://www.hcd.ca.gov/codes/mhp/HCD Phone: (916) 255-2501	
Is this a Manufactured/Mobile Home (circle one) Yes / No	

JOB VALUATION: (Enter value of labor, including non-contracted, plus materials charge)	\$
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Square Feet Detail	
Living Area:	Garage:
Open Area:	Covered Area:
<input type="checkbox"/> Structure Built without permits	TOTAL SQ:
<input type="checkbox"/> Proposed Change of Occupancy/Use - Note previous/current use below:	

APPLICANT		
Last Name	First Name	
Mailing Address		
City	State	Zip
Phone	Fax	
Email	Cell	

FOR OFFICE USE ONLY			
Zoning:	Flood Zone:		
SRA:	YES	NO	NPDES YES NO
Code Enf:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	Legal Lot: <input type="checkbox"/> YES <input type="checkbox"/> NO
Occupancy	Type Construction		

APPLICANT SIGNATURE AND DATE	
	Date:
Print Name:	

APN:

*When filed, this application and all supporting material becomes subject to the California Public Records Act. All public information related to this application is subject to public inspection and will be posted on the County's website for electronic access



PERMIT CENTER

7 County Center Drive, Oroville, CA 95965

Main Phone (530)538-7601 Permit Center Phone (530)538-6861 Fax (530)538-7785

BUILDING PERMIT SUBMITTAL REQUIREMENTS SITE PLAN REQUIREMENTS

GENERAL INFORMATION

Your site plan may be reviewed by various departments: Building, Planning, Environmental Health, Public Works, CDF, Agricultural Commission, etc. so you will need to include information to satisfy numerous agencies.

- **Please label all items as clearly and completely as possible.**
- **Site plans must be fully dimensioned and clearly drawn on clean paper.**
- **Size: 11" x 17"**

Blow-ups or insets may be used to provide more detail where required. (Note: A scaled site plan may be required, if necessary for septic system permit or other plan review.)

REQUIRED ITEMS

- Owner's name
- Assessor's Parcel Number
- North arrow
- Property lines with dimensions: As shown on assessors map or parcel map
- Distances between improvements **and** from property lines
- Setbacks
- Any features such as cliffs or areas of slope: Include direction & approximate degree of slope
- New buildings are required to meet Minimum Erosion and Sediment Controls
- Measures or Best Management Practices (BMP)

EXISTING AND PROPOSED ON-SITE IMPROVEMENTS INCLUDING:

- Buildings or other structures
- Pools
- Tanks
- Retaining walls
- Cuts and/or fills

ROAD FEATURES INCLUDING:

- Location and name of frontage road(s) serving property
- Location of driveway
- Right-of-way
- Easements

ALL WATER RELATED FEATURES INCLUDING:

- Flood zone
- Septic / Sewage disposal systems (original and replacement)
- Wells
- Waterlines
- Springs
- Creeks or Streams - Seasonal creeks and drainage ditches

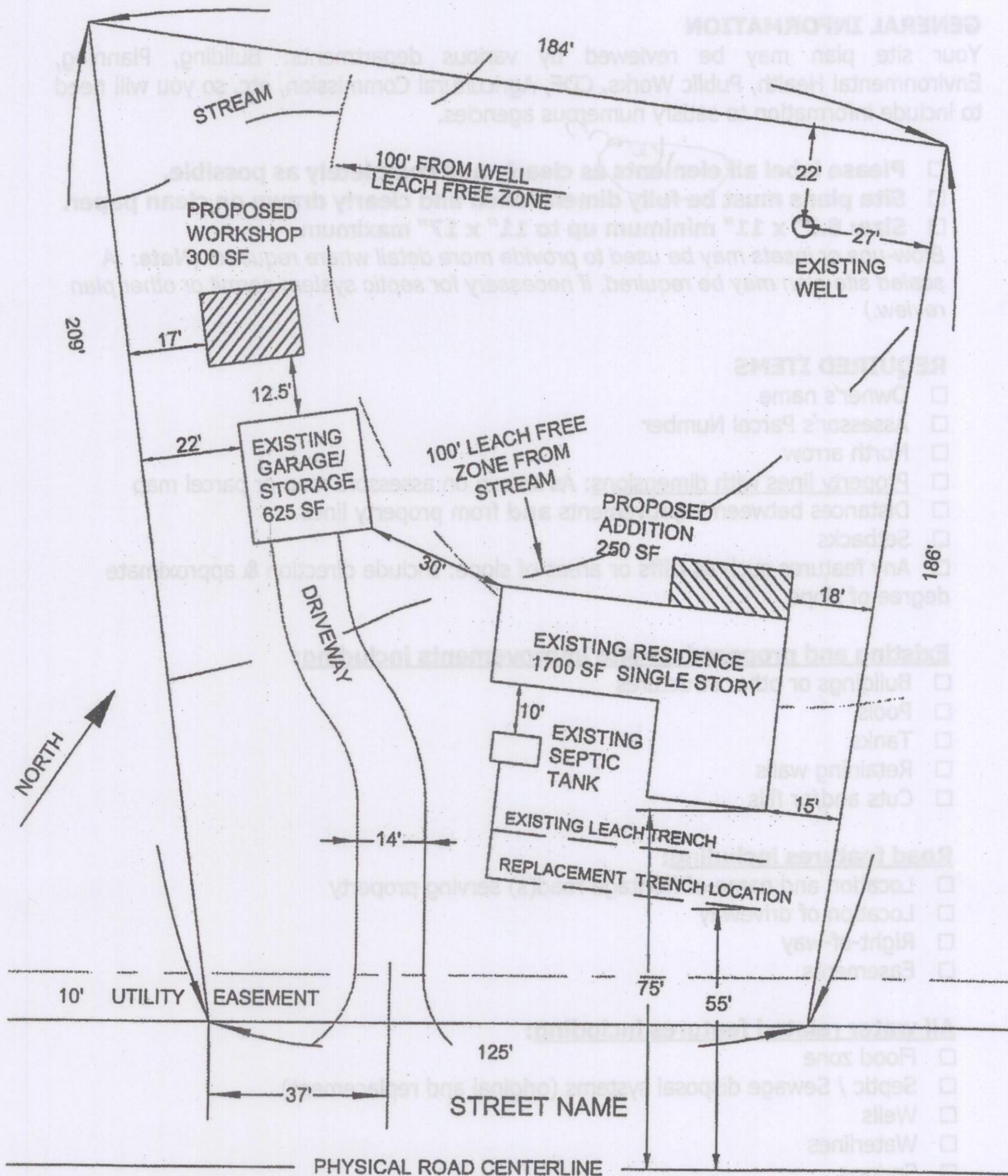
BUTTE COUNTY DEPARTMENT OF DEVELOPMENT SERVICES

Building Division
7 County Center Drive
Oroville, CA 95965

PH: 530-538-7541
FAX: 530-538-2140
www.buttecounty.net/dds



SITE PLAN REQUIREMENTS



PERMIT CENTER

7 County Center Drive, Oroville, CA 95965 Main Phone (530)538-7601 Permit Center Phone (530)538-6861 Fax (530)538-7785

FORM NO

DBP-3

SITE PLAN

Assessor's Parcel Number: - -

Permit #: _____

Owner Name: _____ **Scale 1" =** _____

Address / Phone: _____

Site Location: _____

Contact Name: _____ **Phone:** _____





Butte County Department of Development Services

PERMIT CENTER

7 County Center Drive, Oroville, CA 95965

Main Phone (530) 538-7601 Permit Center Phone (530) 538-6861 Fax (530) 538-7785

FORM NO

DBP-13

FEE ESTIMATE WORKSHEET FOR RESIDENTIAL ACCESSORY STRUCTURES

In order to give an accurate fee estimate we will need the following information. Please complete as much information as possible to allow us to provide the most accurate estimate. **

CONTACT NAME: _____

Are you the owner of the property: _____ *Contractor:* _____ *other:* _____

DAYTIME TELEPHONE NUMBER: _____

EMAIL: _____

OWNER NAME: _____

PROPERTY ADDRESS OR LOCATION: _____

ASSESSORS PARCEL NUMBER (APN): _____

TODAY'S DATE: _____

****SIGNATURE:** _____

****DISCLAIMER**

By signing this document I am aware that it is only to be used as a guide in the calculation of Building Permit type fees. The Department of Development Services, Building Division does not warrant any part of said document. Actual fees may vary at time of Permit issuance based on conditions, and/or scope of work, and/or any newly adopted ordinances/resolutions/law/statute (Federal/State/County/City) and/or the imposition of other fees by City, County, State or Federal. This document does not warrant any fees not falling within the purview of the Department of Development Services, Building Division. This is not an exact document, henceforth; you are encouraged to verify all fees and requirements with the appropriate ordinances/resolutions/codes/laws/statutes before any reliance upon such estimate.

****When filed, this form and all supporting material becomes subject to the California Public Records Act. All public information related to this form is subject to public inspection and will be posted on the County's website for electronic access.**

Note: We provide the first fee estimate free of charge. However, any additional requests will be charged at our hourly rate (\$127.00) with a minimum charge of \$32.00 for 15 minutes. We will try to provide all fee estimates within 72 hours of receiving this document. Thank you.

Page 2 must be completed in order to receive the requested estimate.

USE OF STRUCTURE: _____

ESTIMATED CONTRACT PRICE OR VALUE OF WORK (Includes labor [including owner builder's labor] and material): \$ _____

SQUARE FOOTAGE (SQ FTG) OF PROPOSED STRUCTURE AND ANY ATTACHMENTS: (SQ FTG) FOR PRIMARY USE: _____

Stairs/Landing/Deck/Uncovered Porch Areas (SQ FTG) : _____

Covered Porch/Patio/Deck Areas (SQ FTG) : _____

Carport/Awnings (SQ FTG) : _____

Type of Construction: (*What kind of material will be used for the proposed structure*)
Wood Framed _____ Metal Framed _____ Masonry/CMU (Concrete Masonry Units): _____
Other: _____