



**AFFIDAVIT FOR  
DUPLICATION  
OF PLANS  
B-43**

*Development Services*

**Building Division**  
1635 Faraday Avenue  
760-602-2719  
www.carlsbadca.gov

**Requestor:** Please allow 3-5 business days for processing time from the date of your request.  
You can email your affidavit to [Building@CarlsbadCA.gov](mailto:Building@CarlsbadCA.gov) or drop it off at the building counter.

Design Professional: On \_\_\_/\_\_\_/\_\_\_ the City has received a request to duplicate building plans of your design related to:

**Address:** \_\_\_\_\_ **APN:** \_\_\_\_\_

**Name of Development:** \_\_\_\_\_ **Permit #:** \_\_\_\_\_

**The reason for the request is:** \_\_\_\_\_

In compliance with Health and Safety Code Section 19851, *Inspection and Duplication of Copy of Plans*, this affidavit of permission to duplicate plans must be sent to the certified, licensed, or registered professional of record. This will allow the plans to be duplicated by the requester subject to the following conditions:

- The plans shall be used only for the maintenance, operation, and the use of the building.
- The drawings are instruments of professional service and are incomplete without the interpretation of the certified, licensed, or registered professional of record.
- That subdivision (a) of Section 5536.25 of the Business and Professions Code states that a licensed architect who signs plans, specifications, reports, or documents shall not be responsible for damage caused by subsequent changes to, or use of, those plans, specifications, reports, or documents where the subsequent changes or uses, including changes made by state or local governmental agencies, are not authorized or approved by the licensed architect who originally signed the plans, specifications, reports, or documents provided the architectural service rendered by the architect who signed the plans, specifications, reports, or documents was not also a proximate cause of the damage.

**I would like to obtain these plans via :**  CD disc at the front counter  FTP link to the below email

\_\_\_\_\_  
**Print Name**

\_\_\_\_\_  
**Signature of Person Requesting Duplication**  
(Owner or HOA Representative)

\_\_\_\_\_  
**Cell**

\_\_\_\_\_  
**Email**

This affidavit is to be mailed by certified or registered mail to the last known address of the Architect of Record by the City along with a letter from the owner requesting duplication of specific plans held by the City of Carlsbad. The plans may then be duplicated after 30 days if there is not response or if the Architect of Record refused permission after receiving the affidavit.

_____ <i>Signature of Architect or Professional of Record</i>	License Number: _____
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**TO BE COMPLETED BY STAFF ONLY**

*Affidavit Sent:* \_\_\_\_\_

*Staff Initial:* \_\_\_\_\_