



**ENGINEERING DEPARTMENT  
IMPROVEMENT PLAN CHECK  
APPLICATION AND CHECKLIST**

130 SOUTH MAIN STREET, LAKE ELSINORE, CA 92530  
P: 951.674-3124, F: 951.471-1261

For Staff Use  
Received By:  
EnerGov No.

Fill in the following information and submit with the required documents and fees to initiate Plan Check. Incomplete submittals will not be processed for plan check.

PARCEL/TRACT NO.: \_\_\_\_\_ PROJECT NAME: \_\_\_\_\_

ASSESSOR'S PARCEL NO(S): \_\_\_\_\_ Gross Acreage \_\_\_\_\_

PROJECT STREET ADDRESS OR  
CROSS STREETS: \_\_\_\_\_

AMOUNT FROM ENGINEER'S COST  
ESTIMATE: \_\_\_\_\_ NO. OF SHEETS IN PLAN SET: \_\_\_\_\_

SUBMITTAL TYPE:                      St                      Strm                      REVISION No. :  \_\_\_\_\_  
check all that apply                      Impvt                      Drain

REVISION  
DESCRIPTION: \_\_\_\_\_

A SEPARATE submittal is required for the following:       Sign /Stripe       Traffic Signal

OWNER / DEVELOPER: \_\_\_\_\_

STREET ADDRESS/CITY/ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PROJECT MANAGER: \_\_\_\_\_  
If different from Owner or Engineer

STREET ADDRESS/CITY/ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ENGINEER \_\_\_\_\_ COMPANY: \_\_\_\_\_

STREET ADDRESS/CITY/ZIP: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

Distribution: Orig-File; Copy-Planchecker



## IMPROVEMENT PLAN CHECK SUBMITTAL CHECKLIST

**NEW** - A digital copy (CD/DVD/Thumb Drive) of **all submittal documents** is required for in person submittals. Online submittal using the City's Customer Self Service Portal (CSSP) at [www.lake-elsinore.org](http://www.lake-elsinore.org) is encouraged to save you time and money.

### REQUIREMENTS: NEW SUBMITTAL

QTY	DESCRIPTION OF REQUIRED DOCUMENTS
1	<b>This Form</b> identifying all items being submitted.
2	<b>PROPOSED IMPROVEMENT PLANS</b> - Prepared using CITY STANDARD TITLE BLOCK FORMAT, 24" x 36"
2	<b>HYDROLOGY AND HYDRAULICS STUDY</b> - 1 orig, sealed and signed by engineer of work.
1	<b>ENGINEER'S COST ESTIMATE</b>
1	<b>FINAL MAP</b> (if applicable)
2	<b>CONDITIONS OF APPROVAL</b>
1	<b>APPROVAL FROM OTHER AGENCIES</b> (Copy of Stamped Plans if applicable)

<b>PLAN CHECK FEES*</b>	* City ordinance provides for cost recovery of fees; Plan reviews in excess of 4 checks will result in additional fees	
\$200.00	+	<input style="width: 100px;" type="text"/>
Admn Charge	+	Enter Fee Above Based on % of Engineer's Estimate from Fee Schedule

### REQUIREMENTS: REVISION SUBMITTAL

QTY	DESCRIPTION OF REQUIRED DOCUMENTS
1	<b>This Form</b> identifying all items being submitted.
2	<b>REDLINED APPROVED PLANS</b> - 24" x 36"
2	<b>COPIES OF DOCUMENTS in SUPPORT of PROPOSED REVISION.</b>

<b>PLAN CHECK FEES</b>	* City ordinance provides for cost recovery of fees; Reviews that exceed 4 checks will result in additional fees.	
\$200.00	+	<input style="width: 100px;" type="text"/> x \$450
Admn Charge	+	Enter Above the # of REVISED Plan Sheets Per sheet charge

### REQUIREMENTS: SIGNING & STRIPING and TRAFFIC SIGNAL SUBMITTALS

QTY	DESCRIPTION OF REQUIRED DOCUMENTS
1	<b>This Form</b> identifying all items being submitted.
2	<b>COPY OF PLAN</b> - 24" x 36"
2	<b>COPIES of DOCUMENTS in SUPPORT of PROPOSED TRAFFIC SIGNAL</b>

<b>PLAN CHECK FEES</b>	City ordinance provides for cost recovery of fees; Reviews that exceed 4 checks will result in additional fees.	
\$200.00	+	<input style="width: 100px;" type="text"/> x \$450
Admn Charge	+	Enter Above the # of Plan Sheets Per sheet charge

Other documents may be required prior to approval of revisions at the discretion of the plan checker.