


**PENCIL DRAWINGS & APPLICATIONS WILL NOT BE ACCEPTED**  
**DRAWINGS MUST BE TO SCALE AND FOLDED**  
 INFORMATION PROVIDED IS PUBLIC RECORD

**ADDENDUM SUBMITTALS WILL BE ACCEPTED MON – FRI BETWEEN 8:30 A.M. & 4:30 P.M.**

**Payment methods accepted: Cash or Check *only***

Rec'd By: _____  Addendum Fee:  \$ _____  Receipt No:  _____	  <b>ADDENDUM APPLICATION</b>  <b>City of Atascadero</b> 6500 Palma Avenue, Atascadero, CA 93422 (805) 461-5035 (805) 461-7612 FAX <a href="mailto:permitcenter@atascadero.org">permitcenter@atascadero.org</a>	ADDENDUM NUMBER  <b>202</b> ____ - ____ - ____    (DATE STAMP RECEIVED)
Project Address: _____  Addendum Description: _____ _____ _____ _____ _____		
<input type="checkbox"/> Mechanical <input type="checkbox"/> Electrical <input type="checkbox"/> Plumbing                    Residential: _____                    Commercial: _____                    Ret Wall: _____ <div style="display: flex; justify-content: space-around; font-size: small;"> <span>New Sq Ft</span> <span>New Sq Ft</span> <span>Sq Ft</span> </div>		

<b>OWNER:</b>			
ADDRESS:	CITY:	STATE:	ZIP:
PHONE #:	FAX#:	E-MAIL:	
<b>APPLICANT: Owner - Tenant - Contractor:</b> (circle one)			
<b>IF CONTRACTOR:</b> CSLB #:	CLASS:	CITY BUSINESS LIC. #:	
ADDRESS:	CITY:	STATE:	ZIP:
PHONE #:	FAX#:	E-MAIL:	
<b>PROJECT CONTACT:</b>			
ADDRESS:	CITY:	STATE:	ZIP:
PHONE #:	FAX#:	E-MAIL:	

\_\_\_\_\_  
**OWNER OR CONTRACTOR SIGNATURE**  
 T:\FORMS\BUILDING\~ PERMIT APPLICATIONS\AddendumApp.doc

\_\_\_\_\_  
**DATE**  
 REV Jan-20