

## ALTERNATE CERTIFICATION STATEMENT OF CONTENT FOR CONSTRUCTION CHANGE DOCUMENT (CCD), ADDENDA AND REVISIONS

PROJECT INFORMATION	
Name of Facility:	DSA File #: -
Date:	DSA App. #: -

ARCHITECT OR STRUCTURAL ENGINEER INFORMATION	
<input type="checkbox"/> Architect License #:	<input type="checkbox"/> Structural Engineer License #:
Work Mailing Address:	
Work Email:	Work Phone:

DOCUMENT LIST (CCD #, Addendum # or Revision #)	DESCRIPTION
1.	
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*I declare under penalty of perjury and subject to disciplinary proceedings and penalties prescribed in the California Architects Practice Act / California Professional Engineers Act that the above listed documents depicting changes to the DSA-approved construction documents do not contain changes to the Structural, Fire & Life Safety, or Accessibility portions of the project.*

**Note:** Person signing this form must be the California Licensed Architect or Structural Engineer listed on form DSA 1: Application for Approval of Plans and Specifications, as the architect or engineer in general responsible charge; or be delegated responsibility by submitting form DSA 1-DEL: Delegation of Responsibility, or form DSA 108: Change in Delegation of Responsibility.

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

Print Full Name: \_\_\_\_\_ Work Email: \_\_\_\_\_

Submit completed form to the DSA Regional Office with construction oversight authority for the project.			
<input type="checkbox"/> DSA Oakland Region 1515 Clay Street, Suite 1201 Oakland, CA 94612	<input type="checkbox"/> DSA Sacramento Region 1102 Q Street, Suite 5200 Sacramento, CA 95811	<input type="checkbox"/> DSA Los Angeles Region 355 S. Grand Ave., Suite 2100 Los Angeles, CA 90071	<input type="checkbox"/> DSA San Diego Region 10920 Via Frontera Rd., Suite 300 San Diego, CA 92127