PLANNING Date: **APN Number:** To: From: **Project Location** or Address: Here is a list of activities, components and/or resources needed for this project: MAYBE **COMMENTS** NO **SUPPORT PROFESSIONALS AND SERVICES** YES **OFF-SITE IMPROVE ON-SITE IMPROVEMENTS**

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1.1 PLANNING Page 1 of 7

EXTERIOR UTILITIES AND CONNECTIONS TO BUILDINGS	YES	NO	MAYBE	COMMENTS
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EXTERIOR IDENTIFICATION AND LIGHTING				
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BUILDING SHELL-GENERAL				
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BUILDING INTERIOR (FLOORING, CEILINGS, PARTITIONS, WALL FINISHES)	YES	NO	MAYBE	COMMENTS
MECHANICAL AND ELECTRICAL			Ш	
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ENERGY COSTS			47	

INTERIOR FINISHING AND FURNISHINGS	YES	NO	MAYBE	COMMENTS
LANDSCAPING AND IRIGATION	Ш			
LANDSCAFING AND INIGATION				
MATERIALS AND EQUIPMENT-GENERAL		_		
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HOME IMPROVEMENT TIPS FOR SELLING		_	_	
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LAND AND BUILDING REQ	UIREMENTS				
Land Size: Acres:	Sq Ft				
Projected Building Size:	Sq Ft				
Land less Building Size equa	•				
AREA PLANNING REQUIRE	MENTS				
Area Desci	ription	SQ FT	Aı	rea Description	SQ FT
					——
OLUCY COST ANALYSIS				_	
QUICK COST ANAYSIS		UILI IN 5 YAL JA		-	
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COST	Times Cap Rat	e PER CENT		Equals COST/CAP	
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CONSTRUCTION SQ FT	Time	S SQ FT COST		Equals COST	
		_		BUILDING COST	
	VALUE LESS	BUILDING COST EQ	UALS EQUITY II	N BUILDING	
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REAL PROPERTY PURCH	ASE		Check	Comment	ts/Notes
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1.1 PLANNING Page 5 of 7

GENERAL REQUIREMENTS FOR CONSTRUCTION PROJECTS

NON-DISTRIBUTABLE LABOR	YES	NO	MAYBE	UNITS	QTY x	UNIT COST =	COST
PERMITS AND FEES	Λ	Λ		\mathbf{D}			
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OTHER GENERAL REQUIREMENTS	YES	NO	MAYBE	UNITS	QTY x	UNIT COST =	COST
		4					
INSURANCE AND BONDING	A		V/I				
INSURANCE AND BONDING					 		
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OTHER OVERHEAD AND CONTINGENCY					ı	•	
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ONE YEAR INSPECTION							
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