



Wood-Frame Seismic Retrofit Program

SCREENING FORM – NO FEE

City records indicate that a building located on the block and lot shown below is subject to San Francisco Building Code Chapter 34B: Mandatory Earthquake Retrofit of Wood-Frame Buildings. The building owner or the owner's authorized agent shall complete and submit this Screening Form (Section 3404B.2). Sections 3 through 5.1 of this form, if needed, are to be completed by a California licensed architect or civil or structural engineer. Submittal of this Screening Form is required even if the building has completed voluntary seismic strengthening or if the building in its current condition is believed to satisfy the retrofit requirements of SFBC Section 3406B (see Section 2).

A separate document, **Screening Form Instructions**, provides explanation and instructions for this Screening Form.

Submit the completed Screening Form either:

- As a pdf attachment to softstory@sfgov.org, with "Screening Form submittal" in the subject line, or
- As a hardcopy by U.S. mail to Wood-Frame Seismic Retrofit Program, Department of Building Inspection, 1660 Mission Street, San Francisco, CA 94103

BLOCK / LOT NUMBER _____

ADDRESS _____

OWNER _____

SECTION 1 – ADMINISTRATIVE INFORMATION

Owner telephone

Owner email

Owner mailing address

Authorized agent (optional)

Agent telephone

Agent email

Agent mailing address

CONDOMINIUM OWNERS: Please submit one Screening Form and one set of contact information for each building. Please list all lot numbers comprising the building here:

Does this Screening Form replace or supplement a previously submitted Screening Form for the same building? Yes No

BLOCK / LOT NUMBER _____

SECTION 2 – VOLUNTARY STRUCTURAL WORK EXEMPTION

If the answer to question one (1) is yes, Screening Form Sections 3, 4, and Section 5.1 need not be completed. Section 5.2 must be completed in all cases.

- | | <u>Yes</u> | <u>No</u> |
|--|--------------------------|--------------------------|
| 1. Has voluntary seismic strengthening been completed under Administrative Bulletin AB-094, Definition and Design Criteria for Voluntary Seismic Upgrade of Soft Story, Type-V (wood frame) Buildings? | <input type="checkbox"/> | <input type="checkbox"/> |

If yes, AB-094 Permit Application Number: _____

2. In addition to the exemption for AB-094 retrofits, this program (SFBC Section 3402B) also exempts certain retrofits completed within the last 15 years. To qualify for that exemption, complete and submit this Screening Form as well as the separate **Optional Evaluation Form**.

SECTION 3 – SCOPE VERIFICATION

- | | <u>Yes</u> | <u>No</u> |
|---|--------------------------|--------------------------|
| 1. Was the building originally constructed before January 1, 1978, or was a permit for construction applied for before January 1, 1978? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Is the building three or more stories, or two stories over a basement or underfloor area that extends above grade? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Does the building contain five or more dwelling units? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Is the building of Type V (wood-frame) construction? <i>(This question applies only to Target Stories. Use the Type V Worksheet in the Screening Form Instructions to answer this question.)</i> | <input type="checkbox"/> | <input type="checkbox"/> |

If No, indicate also which of these conditions is true:

- The building has no Target Stories.
- The building has one or more Target Stories but they are not wood-frame.

CONCLUSION: Is the response to ALL FOUR of the preceding questions Yes?

If Yes: The building is subject to SFBC Chapter 34B. Complete and submit this Screening Form.

If No: The building is exempt from SFBC Chapter 34B. Complete and submit this Screening Form, but skip Section 4. The Department will confirm the exemption in writing.

Note: Even if the building is subject to SFBC Chapter 34B, it might not require retrofit. An owner may show that retrofit is not required by submitting a separate Optional Evaluation Form with supporting documents. The **Optional Evaluation Form** is available at www.sfdbi.org/softstory.

SECTION 4 – ASSIGNMENT OF COMPLIANCE TIER

Indicate the compliance tier. Use the Compliance Tier Worksheet in the Screening Form Instructions to find the compliance tier.

Tier I Tier II Tier III Tier IV

BLOCK / LOT NUMBER _____

SECTION 5 –DESIGN PROFESSIONAL & OWNER AFFIDAVIT

Please see instructions.

5.1 DESIGN PROFESSIONAL

Under penalty of perjury, I certify that the information provided in Sections 3 and 4 of this Screening Form is based on my personal review of the building and its records, or review by others acting under my direct supervision, and is correct to the best of my knowledge.

Date stamped and signed

Firm name

Design Professional telephone

Design Professional email

[Professional Stamp Here]

5.2 OWNER/ AGENT

Under penalty of perjury, I certify that the information provided in Sections 1 and 2 of this Screening Form is correct to the best of my knowledge.

- Owner
- Agent

Signature

Date

FOR DBI USE ONLY

Form appears incomplete / more information needed regarding:

SECTION 2: AB-094 Retrofit

SECTION 3: Scope Verification

Wood-Frame

Pre- 1978

Stories

Units

SECTION 4: Compliance Tier

SECTION 5: Professional and Owner / Agent
Statement s

Building is subject to the ordinance.

The form appears complete and is assumed correct based
on design professional and owner / agent statements.

DBI Reviewer: _____

Date: _____