



# OSHPD e-Services Portal

*Public User Guide*

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Version Number: 6.2

## **Section 9 – Expedited Building Permits for Skilled Nursing Facilities**

# OSHPD

Office of Statewide Health  
Planning and Development

## 1 Introduction

### Welcome to OSHPD Electronic Services Portal Client Access (eCA) User Guide

This section provides users with step-by-step instructions for creating and submitting an application for a new OSHPD Expedited Building Permit project for a skilled nursing or intermediate care facility using eCA.



**Remember:** Help is available throughout the application. Wherever you see a help  icon, click on the question mark to open help and instructions for that item in the application.

## 2 Expedited Building Permit Applications

### 2.1 Page Flow Overview

Users must follow the predefined steps to create and submit project applications. The steps involved in submitting an Application for an Expedited Building Permit, or XBP, is slightly different from those in submitting for a PAD or a New Project. Below is an illustration of the page flow steps.

Table 1: eCA Pageflow

Page No.	Page Title	Description
<b>Application for New Project</b>		
1	Record Type	User must select <b>Expedited Building Permit</b> on this step in order to submit an application for this type of project.
2	Select Facility	User selects the facility from OSHPD's facility database. eCA auto-populates the facility, address, and facility owner information. Only Skilled Nursing and Intermediate Care Facilities are eligible for Expedited Building Permits.
3	Project Information	User records the Project Name and Project Scope specific to the project.
4	Compliance Checklist	The compliance checklist is used to provide an assessment of specific conditions for the facility where the project is located to determine eligibility and requirements for the project.
5	Costs and Attachments	User enters the construction and fixed equipment costs for the project and uploads attachments such as floor plans, workers compensation insurance certificates, IOR workload report and other documents.
6	Professionals and Workers Comp	User identifies each Contractor or Owner/Builder and the IOR specific to the application then enters information for the Workers Compensation Insurance for the Contractor or Owner/Builder. eCA auto-populates the information.
7	IOR Assessment	The assessment of the qualifications and acceptability of the IOR are entered by the Contractor or Owner/Builder.
8	Contacts	User identifies each Facility Contact specific to the application. eCA auto-populates the information.



9	Facility Authorization	User enters a valid Facility PIN code. Usually entered by Facility Representative but may be entered by any user with the valid PIN.
10	Owner’s Acknowledgement of the IOR	The assessment of the qualifications and acceptability of the IOR are entered by the Legal Owner or Agent.
11	Payment Options	User selects one of the two application fee payment options: “Pay Now” or “Invoice Me”.
12	Review	User reviews the data entered on the application for accuracy; edits can still be made if necessary.
13	Pay Fees	If user selects the “Pay Now” option, user pays the outstanding fee by credit card online.
14	Confirmation	Project application submitted to OSHPD. eCA issues a project ID number. User prints project summary sheet, preliminary invoice or payment receipt as needed.

## 2.2 Basic rules of page flow

Below are some basic rules of submitting an application using the eCA page flow:

- ✓ To start creating an application for a new XBP project, or to resume an existing in-progress application, user must start from the first page flow step.
- ✓ User can navigate back and forth within the completed pages.
- ✓ User must click on “Continue Application” or “Save pending submittal” button to save the data entered on the page.
- ✓ If a page contains a section that allows for multiple records to be added, for example multiple licensed professional or multiple contacts, user must click the “Save” button in the section to save each professional/contact to the record in order to add the next.
- ✓ It is recommended that user clicks the “Save pending submittal” button as needed to prevent data loss due to data entry errors.
- ✓ If any required data is missing from the page, when the “Continue Application” button is clicked, an error message is displayed on the top of the page. User must correct any errors before continuing to the next page flow screen.

## 2.3 Create and Submit an XBP

The following information will guide users through the steps necessary to create an Application for an Expedited Building Permit (or XBP).

### Step 1. Create an XBP

Only registered users may create an Application for an Expedited Building Permit. Begin by clicking on the “Create an Application” link.

**Welcome John Smith**  
You are now logged in.

You may view Facility information, search for projects that have already been created, or create an application for a new project by clicking the links below.

Click the 'Projects' tab above to view all of the projects associated to your profile.

[Click here for a comprehensive eServices Portal Public User Guide. Individual subject instruction guides are available by clicking the "Instructions" tab at: <http://www.oshpd.ca.gov/FDD/eServices/index.html>](#)

<b>Facility Information</b> <a href="#">Lookup Facility Information</a>	<b>Projects</b> <a href="#">Create an Application</a> <a href="#">Search Projects</a>
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### Step 2. Accept OSHPD Privacy Policy

Click on the link in the window to review the privacy policy. Check “I have read and accepted the above terms” then click on “Continue Application” button.

**Online Application**

Welcome to the OSHPD Electronic Services Portal Client Access (eCA) online system. Using eCA, you can submit new projects and post-approval documents, pay fees, and track the status of your project 24-hours a day.

Please **“Allow Pop-ups from This Site”** before proceeding. You must accept the OSHPD Privacy Policy below before beginning your application.

**OSHPD Privacy Policy**  
By continuing, I have read and accept the OSHPD privacy policy.  
[http://www.oshpd.ca.gov/General\\_Info/Privacy.html](http://www.oshpd.ca.gov/General_Info/Privacy.html)

I have read and accepted the above terms.

[Continue Application »](#)

### Step 3. Select Record Type

Select the **“Expedited Building Permit”** then click on “Continue Application” button. Expedited Building Permits are intended only for single-story Skilled Nursing Facilities (SNFs) and Intermediate-Care Facilities that are of wood frame construction; if your facility does not meet this criteria you will receive an error message when you proceed.

**Select a Record Type**

**Application for New Project**

This application is used to apply for all project types other than Incremental projects; this includes structural and non-structural projects, preliminary reviews, SB 1838 and AB 2632 projects, GeoTech projects and ROCC projects. Applications for Incremental projects must be submitted via the traditional paper application. To submit an application for [Building Permit](#) or [Post Approval Document](#) or [Alternate Method of Compliance](#), click the **Search Projects** link, locate your existing project and select the **Amendment** link.

**Expedited Building Permit**

An Expedited Building Permit is a companion process to the OSHPD Field Review, Exempt, and Expedited Review (FREER) Manual intended as general reference guides and/or checklists to facilitate repair, maintenance, minor renovation/remodeling, or installation of certain equipment projects. Expedited Building Permits are intended only for **single-story Skilled Nursing Facilities (SNFs) and Intermediate-Care Facilities that are of wood frame construction** as prescribed in the California Health & Safety Code §129875. For more information regarding projects eligible for the Expedited Building Permit, see 'How to Guides' at <http://oshpd.ca.gov/FDD/SNF-ICF>. **If there are any questions regarding eligibility or applicability, it is recommended that you contact your OSHPD Compliance Officer.**

- Application for New Project  
 Expedited Building Permit

[Continue Application »](#)

Click "Continue Application".

**Step 4. Enter Facility Information**

Enter the OSHPD Facility ID or Facility Name then click on "Search" button. If the facility is found, the facility information, address, and owner fields will be automatically populated and become read-only. Notify OSHPD of any errors.

<b>* Facility ID</b>		<b>Facility Name</b>
<input type="text" value="21212"/>		<input type="text"/>
<b>Responsible Region:</b>	<input type="text" value="--Select--"/>	<b>Type of Facility:</b>
	▼	<input type="text" value="--Select--"/>
<b>Geographic Region:</b>	<input type="text" value="--Select--"/>	<b>County Code:</b>
	▼	<input type="text" value="--Select--"/>
<b>RCO:</b>	<b>ACO:</b>	<b>DSE:</b>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Senior Architect:</b>	<b>Plan Review PT:</b>	
<input type="text"/>	<input type="text"/>	
<input type="button" value="Search"/>	<input type="button" value="Clear"/>	



### Expedited Building Permit



**Step 1 : Select Facility > SNF or ICF**

Expedited Building Permits are only permitted in Skilled Nursing and Intermediate Care Facilities. If your facility is not a Skilled Nursing or Intermediate Care Facility, you will not be permitted to continue.

\* indicates a required field.

#### Facility

Enter the OSHPD Facility ID for this Project (or select 'Auto-fill' if available) and then click on the Search button. Select the correct facility from the returned list. Both the Address and Owner sections will be automatically completed with the current information from our database. **Please verify that this information is correct.** Contact OSHPD at [eserv@oshpd.ca.gov](mailto:eserv@oshpd.ca.gov) if the current facility information is incorrect or to add a new facility.

* Facility ID		Facility Name		
<input type="text" value="21212"/>		<input type="text" value="Vintage Estates of Hayward"/>		
Responsible Region:		Type of Facility:		
<input type="text" value="Central Region"/>		<input type="text" value="Skilled Nursing and Intern. Care Fz"/>		
Geographic Region:		County Code:		
<input type="text" value="Central Region"/>		<input type="text" value="01 - Alameda"/>		
RCO:	ACO:	DSE:	Field FLSO:	Closure PT:
<input type="text" value="GDUNGER"/>	<input type="text" value="SREX"/>	<input type="text" value="SPANDYA"/>	<input type="text" value="MMCCLURE"/>	<input type="text" value="GDUNGER"/>
Senior Architect:	Plan Review PT:			
<input type="text" value="MBJORGUM"/>	<input type="text" value="EBLACKMA"/>			

#### Address

* Street No.:	* Street Name:	City:	State:	Zip:
<input type="text" value="25919"/>	<input type="text" value="Gading Road"/>	<input type="text" value="Hayward"/>	<input type="text" value="CA"/>	<input type="text" value="94544"/>

#### Owner

Auto-fill with

Owner Name:

Address Line 1:	City:	State:	Zip:
<input type="text" value="9200 W SUNSET BLVD."/>	<input type="text" value="WEST HOLLYWOOD"/>	<input type="text" value="CA"/>	<input type="text" value="90069"/>

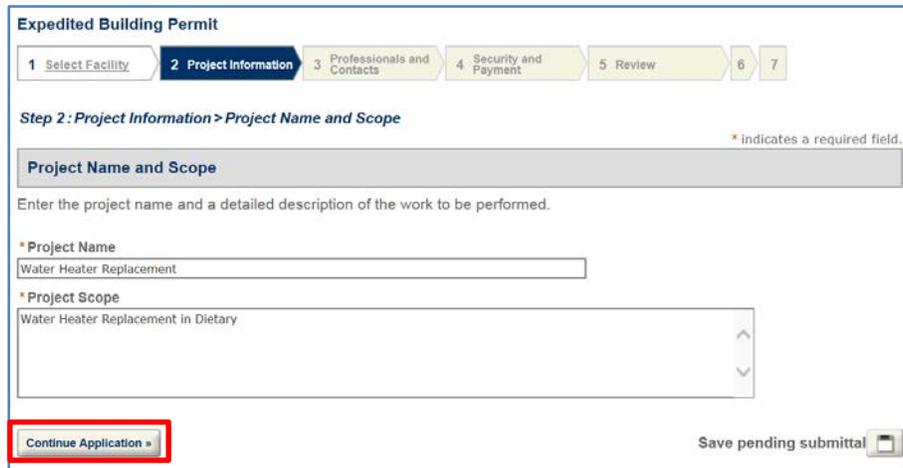
Phone:   
E-mail:

Save pending submission

To search for another facility, click on "Clear" button in Facility section. This clears the previous entered facility. To advance to the next page flow step, click on "Continue Application".

**Step 5. Enter Project Details and Additional Details.**

Enter the record/project name and enter a detailed description of the work to be performed. Click Continue Application.



**Expedited Building Permit**

1 Select Facility   2 **Project Information**   3 Professionals and Contacts   4 Security and Payment   5 Review   6   7

**Step 2: Project Information > Project Name and Scope** \* indicates a required field.

**Project Name and Scope**

Enter the project name and a detailed description of the work to be performed.

\* Project Name  
Water Heater Replacement

\* Project Scope  
Water Heater Replacement in Dietary

**Continue Application »**   Save pending submittal 

**Step 6. Complete the Compliance Checklist.**

Expedited Building Permits may be used for various project types; the current types of projects that an Expedited building Permit may be used for are water heater replacement, handrail replacement, and TV/monitor bracket installation projects. These are referred to as “Submittal Types”. Additional Submittal Types are forthcoming in future months.

Each Submittal Type has a custom checklist to provide an assessment of specific conditions for the facility where the project is located. All questions must be answered and, based on the answers provided, eCA will determine if the facility is eligible for the project to be submitted using the Expedited Building Permit process. *The OSHPD Compliance Officer will field verify compliance with this checklist and additional work may be required to bring the installation into code compliance if found to be deficient.*

Begin by entering the appropriate Submittal Type.

\* indicates a required field.

**Compliance Checklist**

**EXPEDITED BUILDING PERMIT CODE COMPLIANCE CHECKLIST**

The following checklist is used to provide an assessment of specific conditions for the facility where the project is located. This checklist gives no consideration to suitability for use in a specific application, compatibility with other building systems, appropriate use of materials or design, appearances, etc. The facility owner and/or his/her representative must review all such qualities, features, and/or properties to ensure compliance with the California Building Standards Code and all applicable local zoning codes and ordinances, appropriate integration with other building systems, and proper design for the project specific conditions and installation, etc.

While not mandatory, OSHPD recommends the facility consult with a California-licensed architect or engineer, or a California-licensed contractor to assist in the review of the code compliance checklist herein below. In this manner the facility will have a better understanding of the scope of work that may be required for a code compliant project prior to beginning the work.

**NOTE:** The OSHPD Compliance Officer will field verify compliance with this checklist and additional work may be required to bring the installation into code compliance if found to be deficient.

Submittal Type:

 Please select a submittal type from the dropdown list.

Upon completion of compliance checklist, the answers to the questions will be used to determine if the facility or project is eligible for the Expedited Building Permit process:

 Success. Your project is qualified to apply for an expedited building permit.

If any of the answers disqualify the project, a notification will appear at the bottom of the checklist:

 Your project does not meet the requirements for an expedited building permit.

If the project is determined to be eligible for the expedited Building Permit process, it can be used to mitigate unauthorized construction. Select the applicable button and click Continue Application.

**Additional Information**

**APPLICATION**

Use Annual Building Permit:  Yes  No  
 Unauthorized Construction Mitigation:  Yes  No

Save pending submittal 

**Step 7. Add Project Costs and Attachments**

The project estimated construction costs are entered on this step. User must enter at least one Costs row. To add one Costs row, click on “Add a Row” button in COSTS section.

\* indicates a required field.

**Project Cost**

**COSTS**  
Enter the estimated costs for the project. To enter costs, click the “Add a Row” button. Enter only one cost row. Do not enter commas or dollar signs.

Showing 0-0 of 0

Cost Date	Construction Costs	Fixed Equipment Costs	Total Costs
No records found.			

On the pop up window, enter the estimated Construction Costs and the Fixed Equipment Costs, then click on “Submit” button to copy form to Costs Table. For more info, click 

**COSTS**  
Enter the estimated costs for the project. To enter costs, click the “Add a Row” button. Enter only one cost row. Do not enter commas or dollar signs.

\* **Cost Date:**  

\* **Construction Costs:**  

\* **Fixed Equipment Costs:**  

**Total Costs:**  

Electronic files can be uploaded to the application as attachments. Attachments include files such as floor plans, workers compensation insurance certificates, IOR workload report and other documents. The maximum file size is 100 MB and some file types are disallowed. Begin by clicking “Add”.

**Attachment(s)**

The maximum file size allowed is 100 MB.  
html;htm;mht;mhtml;exe;com;pif;scr;vbs;shs;chm;bat;cmd;hta;reg are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
No records found.				

Locate the files on your computer and select them; multiple files can be attached by holding down the ‘Ctrl’ button and selecting each file individually.

Use the drop-down menu to select the applicable description of each attachment and enter a simple description of each attachment. Click “Save” to upload the files to eCA.

**Attachment(s)**

The maximum file size allowed is 100 MB.  
 html;htm;mht;mhtml;exe;com;pif;scr;vbs;shs;chm;bat;cmd;hta;reg are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
No records found.				

--Select--  
 Documents  
 Final Costs Affidavit  
**Floor Plan**  
 Notice of Start of Construction  
 Photos  
 Verified Compliance Report  
 IOR Workload.pdf

[Remove](#)

**\*Description:**

Facility Site Plan

When the attachment upload is complete, the 'Action' selection will appear. To attach additional files click "Add"; when all files are attached, click "Continue Application" to advance to the next step.

**Attachment(s)**

The maximum file size allowed is 100 MB.  
 html;htm;mht;mhtml;exe;com;pif;scr;vbs;shs;chm;bat;cmd;hta;reg are disallowed file types to upload.

Name	Type	Size	Latest Update	Action
<a href="#">Floor Plan.pdf</a>	Floor Plan	314.18 KB	09/17/2015	<a href="#">Actions</a> ▼
<a href="#">IOR Workload.pdf</a>	IOR Workload Report	273.68 KB	09/17/2015	<a href="#">Actions</a> ▼
<a href="#">Workers Comp Certificate.pdf</a>	Workers Comp Ins Cert	182.29 KB	09/17/2015	<a href="#">Actions</a> ▼

Save pending submittal

**Step 8. Add Licensed Professionals, Contractor or Owner/Builder and IOR; provide Workers Compensation Insurance information**

While not mandatory, OSHPD recommends the facility consult with a California-licensed architect or engineer, or a California-licensed contractor to assist in the review of the code compliance checklist herein below. In this manner the facility will have a better understanding of the scope of work that may be required for a code compliant project prior to beginning the work. If a Registered Design Professional such as an Architect or Engineer will be responsible for the design of the project, they must be included

on the Application for Expedited Building Permit. At a minimum the Licensed Contractor or Owner/Builder and Inspector of Record (IOR) must be added at this step.

To add a Licensed Professional, Contractor or IOR to this application, click "Look Up" and enter search criteria in at least one of the fields. To add an Owner-Builder contractor, enter "OBXXXXX" in the 'State License Number' field with the 5-digit Facility ID Number in place of "XXXXX" (i.e. OB21212).

To obtain the best search results, limit the number of fields in the search. For instance, enter only the license number and leave all other fields empty. If you do not know the LP's license number, enter the license type and last name only and then click **Look Up**. The search results will return all licensed professionals with that last name. If the search returns no results, the Licensed Professional is not currently in our database. Contact OSHPD at [eserv@oshpd.ca.gov](mailto:eserv@oshpd.ca.gov) to add a new Licensed Professional to our database.

**Look Up License**

<b>License Type:</b> Contractor <input type="button" value="v"/>	<b>State License Number:</b> OB21212
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First Name:	Middle:	Last Name:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of Business:

Business License #:

Address Line 1:  
*Enter professional's work address*

City:	State:	Zip:	Country:
<input type="text"/>	<input type="text"/>	<input type="text"/>	--Select-- <input type="button" value="v"/>

Phone: <i>Enter the work phone number</i>	Mobile Phone:	Fax:
<input type="text"/>	<input type="text"/>	<input type="text"/>

<input type="button" value="Look Up"/>	<input type="button" value="Clear"/>	<a href="#">Discard Changes</a>
--	--------------------------------------	---------------------------------

If the search results in a single record, the LP, Contractor or IOR will be added to the application; if the search results in more than one record, locate the correct LP in the returned list then check the box adjacent to the License Number and click Continue. The LP's name, address, and other information will be automatically populated with the current information from our database. **Please verify that the information is correct by clicking Edit under the Action column.** Contact OSHPD at [eserv@oshpd.ca.gov](mailto:eserv@oshpd.ca.gov) to update the existing or missing Licensed Professional's information.

\* indicates a required field.

### Licensed Professional List

[Look Up](#)

✔ Licensed professional added successfully.

Showing 1-2 of 2

License Number	License Type	Contact Name	Business Name	Action
A20468	IOR	Marcia Lee - Stalker	DS CERTIFIED INSPECTION SERVICES	<a href="#">Edit</a> <a href="#">Delete</a>
OB21212	Contractor		St. Michael Convalescent Hospital	<a href="#">Edit</a> <a href="#">Delete</a>

[Continue Application »](#) Save pending submission

Indicate whether the licensed professional or the Contractor or Owner/Builder is the Design Professional in Responsible Charge of the project by setting the “Responsible Primary (eCA)” button to **Yes**. Click on “Save and Close” button; the updated record is copied to the Licensed Professionals List. Continue these steps to add all LPs, Contractor and IOR to the project. User can always delete an entry by clicking on the “Delete” link at the end of the record line.

### Licensed Professional Information

\* License Type:  \* State License Number:  Name of Business:

First Name:  Last Name:  E-mail:

\* Address Line 1:  \* City:  \* State:  \* Zip:

Phone:  Mobile Phone:  Fax:

**Responsible Primary (eCA):**  
 Yes  No

[Save and Close](#) [Discard Changes](#)

Next, select the appropriate type of Workers Compensation Coverage for the Contractor or Owner/Builder and enter the relevant information.

### Details

#### WORKERS COMPENSATION

\* Workers Compensation Coverage:



- If the coverage type is “Exempt”, user must enter exemption reason.

**WORKERS COMPENSATION**

\*Workers Compensation Coverage:

\*Reason for Exemption(required):

- If the coverage type is “Insured through carrier”, user must enter Policy Number, Insurance Carrier and the Expiration Date

**WORKERS COMPENSATION**

\*Workers Compensation Coverage:

\*Policy Number (required):

\*Insurance Carrier (required):

\*Expiration Date (required):

Insurance Agent Name:

Insurance Agent Phone:

- If the coverage type is “Self-insured”, user must enter the Policy Number.

**WORKERS COMPENSATION**

\*Workers Compensation Coverage:

\*Policy Number (required):

Click on “Continue Application” to proceed to the next step.

**Step 9. Responsible Primary Professional Assessment of IOR**

The Design Professional in Responsible Charge of the project (Licensed Professional or Contractor or Owner/Builder) must complete Step 9 to confirm their acceptance of the Inspector of Record.

- In accordance with Title 24, Part 1, Section 7-144, the DPOR or Contractor – Owner/Builder must certify that Applicant for IOR is known to and satisfactory to them; the assessment of their qualifying knowledge and experience of the IOR must be selected from the dropdown choices
  - Interview Date
  - Prior OSHDP Projects
  - Other



\* indicates a required field.

**DPOR ASSESSMENT OF IOR**

**DESIGN PROFESSIONAL OF RECORD**

\* The Applicant for IOR is known to me and is satisfactory to me, in accordance with Title 24, Part 1, Section 7-144, as an Inspector of Record for this project; my assessment of the qualifying knowledge and experience of the IOR applicant is based on:

\* As the Design Professional in responsible charge of the project, I hereby confirm that I have verified with the Applicant for Inspector of Record that he/she is not committed to a workload outside of this project that would inhibit his/her ability to allot adequate time to perform the inspections required for this construction project. I have advised the Applicant for Inspector of Record that if he/she undertakes additional work, he/she will promptly provide written notification to OSHDPD, the owner and myself:

\* If this project includes primary gravity and/or lateral load elements/systems, I hereby affirm the Applicant for IOR is also acceptable to the Structural Engineer of Record:

- DPOR must indicate what his or her assessment of IOR is based on.
  - If user selects “Interview”, user must enter the interview date

\* The IOR applicant is known to me (per Title 24, Part 1, Section 7-144) as an Inspector of Record on this project; my assessment of the qualifying knowledge and experience of the IOR applicant is based on:

\*Interview Date (required):

- If user selects “Other”, user must enter the descriptions of reasons.

\* The IOR applicant is known to me (per Title 24, Part 1, Section 7-144) as an Inspector of Record on this project; my assessment of the qualifying knowledge and experience of the IOR applicant is based on:

\*Please describe for Other(required):



- If user selects “Prior OSHPD Projects”, user must enter the description of the prior projects.

\* The IOR applicant is known to me (per Title 24, Part 1, Section 7-144) as an Inspector of Record on this project; my assessment of the qualifying knowledge and experience of the IOR applicant is based on:

Prior OSHPD Projects

\*Prior OSHPD Project(s)(required):

Finally, the DPOR must confirm that he or she has verified with the IOR that he/she is not committed to a workload outside of this project that would inhibit his/her ability to allot adequate time to perform the inspections required for this construction project. This confirmation is affirmed by placing a check in the checkbox.

\* As the Design Professional in responsible charge of the project, I hereby confirm that I have verified with the Applicant for Inspector of Record that he/she is not committed to a workload outside of this project that would inhibit his/her ability to allot adequate time to perform the inspections required for this construction project. I have advised the Applicant for Inspector of Record that if he/she undertakes additional work, he/she will promptly provide written notification to OSHPD, the owner and myself:

If the DPOR is unwilling to certify the above, the application cannot be submitted using eCA and must use the paper application process.

**Step 10. Add Contacts to this project.**

A Contact is the individual representing the Facility to whom correspondence will be copied. At least one Contact must be included for every project. Unlike adding Licensed Professionals, a search function is not available for Contacts and they must be added by completing each applicable field, although information from the logged-in public user’s account can be used to automatically populate required fields. Multiple Contacts may be added to the project.

Begin by selecting either “Select from Account” or “Add New”.

\* indicates a required field.

**Contact List**

Select from Account Add New

Showing 0-0 of 0

Name	Business Name	Contact Type	Work Phone	E-mail	Action
No records found.					

If ‘Select from Account’ is clicked you may choose from either a generic ‘Associated Owner’ contact or an ‘Associated Contact’ that includes all of your public user contact information. You must also select the Contact Type:

**Select Contact from Account**

John Smith

\* Type: --Select--

- Administrator
- Applicant
- Authorized Agent
- Contact
- Facility Representative

Continue Application »

**Select Contact from Account**

Select a contact to attach to this application.  
If the contact has multiple addresses, you can select which to use in the next step.

Showing 1-2 of 2

Category	Type	Name
<input type="radio"/> Associated Contact	Individual	John Smith
<input type="radio"/> Associated Owner		21212 - WINDSOR CHEVIOT HILLS, LLC

Continue [Discard Changes](#)

**Contact Information**

\* First Name:  Middle:  \* Last Name:  Title:

Name of Business:

\* Address Line 1:  \* City:  \* State:  \* Zip:

Work Phone:  Mobile Phone:  Fax:  E-mail:

Continue [Discard Changes](#)

If all required fields are complete, the contact will be added to the application; if any required fields are blank, a Contact Information box will open for you to edit missing info. Missing data from required fields must be completed to continue the application.

If you select “Add New”, you will be prompted to select a contact type from the drop-down menu. A Contact Information form will open with required field identified by a red asterisk \*. Missing data from required fields must be completed to continue the application.

When the contact information is properly entered you will receive a confirmation message.

✔ Contact added successfully.

Showing 1-1 of 1

Name	Business Name	Contact Type	Work Phone	E-mail	Action
<a href="#">John Smith</a>	<a href="#">OSHPD</a>	<a href="#">Facility Representative</a>		<a href="mailto:xiaoling4.wang@oshpd.ca.gov">xiaoling4.wang@oshpd.ca.gov</a>	<a href="#">Edit</a> <a href="#">Delete</a>

Continue Application »
Save pending submittal 

Click on “Continue Application” to proceed to the next step.

**Step 11. Enter Facility PIN code or Save pending submittal.**

***Before entering the Facility PIN Code, it is recommended that you have clicked on “Save pending submittal” at least once!***

If you are authorized by the facility and have obtained a valid Facility PIN, enter it on the screen, then click on “Continue Application” button to proceed to the next page flow screen.

If you do not have a valid Facility PIN code, click on “Save pending submittal” button to save the record.

\* indicates a required field.

**Authorization**

**SECURITY**

Enter the six digit Facility PIN below. If you do not know the Facility PIN, click “Save pending submittal” now. **Do not click “Continue Application” without a valid PIN. If you enter an invalid PIN, you will receive an error message and you will lose all of the information you have entered and will need to restart the application.** If you entered an incorrect Facility PIN and you have a temporary application number (e.g. 13TMP-00014), click [eserv@oshpd.ca.gov](mailto:eserv@oshpd.ca.gov) to email OSHPD with the TMP identification number to reset this project application.

Facility PIN Code: ?

Continue Application »
Save pending submittal 

If you click the “Save pending submittal” button, the application process stops and user is redirected to the Project List page. eCA issues a temporary Project ID and displays the application in user’s project list. Users can “Resume Application” at a later time.

Your partial applications (15TMP-000389) have been successfully saved. To resume the applications, go to the Projects section and click the Resume Application link.

**Projects**

Showing 1-10 of 90 | [Download results](#) | [Add to collection](#)

<input type="checkbox"/>	Date	Project Number	Project Type	Project Name	Status	Related	Action
<input type="checkbox"/>	09/10/2015	15TMP-000389	Expedited Building Permit	Water Heater Replacement		0	<a href="#">Resume Application</a>

If user enters an invalid Facility PIN, eCA displays an error message and prevents user from proceeding to the next screen. The application will be locked and can only be reset by an OSHPD System Administrator. If this occurs, contact OSHPD at [eserv@oshpd.ca.gov](mailto:eserv@oshpd.ca.gov) to have the record reset.

 **An error has occurred.** This application cannot be continued without a valid facility PIN. If you have a temporary application number (e.g. 13TMP-00014), contact OSHPD to activate facility PIN. If you did NOT click "Save Pending Submittal" prior to receiving this error, you must restart the application.

**Step 12. Select Payment Option.**

After entering a valid Facility PIN code, user can select one of the three payment options. The description of each payment options is as follow:

\* Indicates a required field.

**Select Payment**

**PAYMENT OPTION**

Payment Option: --Select--  
Pay Now  
Invoice Me

- **Invoice Me:** OSHPD will mail an invoice to the facility billing address on file.
- **Pay Now:** facility intends to make an immediate online payment using a credit card on the next screen before the application is submitted.

**If user does not select a payment type and proceed to complete the application, the Facility PIN will be visible on the review page to any authorized user when the application is resumed later.** To prevent the Facility PIN from being displayed, user must complete this step by selecting a payment type and completing the application. When this step is completed, the Facility PIN is hidden from all users.

Click on "Continue Application" to proceed to the next page flow screen.

**Step 13. User reviews the data entered and makes edits if needed.**

On this screen, user can click on “Edit” button in each application step to make necessary changes.

**Step 5 : Review**

Save pending submittal 

[Continue Application >](#)

Please review all information below. Click the "Edit" buttons to make changes to sections or "Continue Application" to move on.

**Record Type**

Expedited Building Permit

**Facility** [Edit](#)

Facility ID 21212

Once all data is verified, click on “Continue Application” to proceed to the next page flow screen.

***If user selected “Invoice Me” or “Pay Later” option, skip to step 14 below.***

**Step 14. Pay Application Fees online.**

If user selected “Pay Now” option, this screen displays the total fees to be paid with a credit card.

Listed below are preliminary fees based upon the information you've entered. Some fees are based on the quantity of work items installed or repaired. Enter quantities where applicable. The following screen will display your total fees.

**Application Fees**

Fees	Qty.	Amount
Application Fee	1	\$250.00

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**TOTAL FEES**  
 Note: This does not include additional inspection fees which may be assessed later.

**\$250.00**

Click on “Continue Application” to proceed to the payment screen.

**Step 15. Submit online payment.**

On this screen, enter the accurate credit card information then click on “Submit Payment” button.

Amount to be charged: \$250.00

Pay with Credit Card

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**Credit Card Information:**

\* Card Type:  \* Card Number:  \* Security Code:  [?](#)

\* Name on Card:  \* Exp. Date:

**Credit Card Holder Information:**

Billing Information:

\* Street Address:

\* City:  \* State:  \* Zip:

\* Phone:

E-mail:

**Step 16. Project submission confirmation.**

On this final screen, eCA display a project submission confirmation including the project record number. User can print a project record summary from this screen, and if the fees were paid with a credit card, a payment receipt can be printed. These documents open in a PDF format and may be saved or emailed. User can view the detailed information about the project by clicking on “View Record Details” button.

Email confirmation is automatically sent to the public user that started the application (Design Professional) and to the public user that approved the application (Owner Representative).



Step 7 : Confirmation

Your application has been successfully submitted. Please print your record and retain a copy for your records.

Thank you for using eClient Access to submit your project.

**Your Project Number is X150120-01-00.**

You will need this number to check the status of your project. Please print a copy for your records.

[Print/View Project](#) [Print/View Summary](#)

A licensed professional is now authorized to proceed with work at the designated location.

Your record type requires a follow-up inspection once work is completed. You may schedule the inspection now or return to schedule the inspection upon completion of the work. Choose "View Record Details" to Schedule Inspections, check status, or make other updates.

[View Project Details »](#) (You must post the record in the work area.)

### Congratulations! You have successfully submitted an Application for an Expedited Building Permit to OSHPD!

### 3 Final Steps

As soon as your application is completed, eSP will notify the OSHPD Program Technician and the Regional Compliance Officer of the pending Application for Expedited Building Permit. The Program Technician will review the application for accuracy and confirm the required Attachments were properly uploaded. If the application is complete and accepted by the Program Technician, eSP will generate two important documents which will be attached to the project in Attachments:

- XBP Compliance Summary and Requirements Report
- Custom Test, Inspection and Observation Report

▼ Attachments						
The maximum file size allowed is 100 MB. html;htm;mht;mhtml;exe;com;pif;scr;vbs;shs;chm;bat;cmd;hta;reg are disallowed file types to upload.						
Name	Record ID	Record Type	Entity Type	Type	Size	Latest Update
/EBPTIOProgramECA_20150916_080612.pdf	X150117-10-00	Expedited Building Permit	Record	TIO	189.49 KB	09/16/2015
/EBPComplianceSummaryAndRequirementsECA_20150916_080620.pdf	X150117-10-00	Expedited Building Permit	Record	Documents	604.05 KB	09/16/2015

These two reports may be downloaded and saved or printed at any time; the contractor and IOR will need these documents prior to the start of construction.

When the Regional Compliance Officer issues the Expedited Building Permit, the EBP Approval Letter and Building Permit will be generated. These documents will be emailed directly to the Owner, Professional(s), Contractor or Owner/Builder and the IOR. They will also be available for download and saving or printing in the Attachments section of the Project Record Detail page.

▼ Attachments						
The maximum file size allowed is 100 MB. html;htm;mht;mhtml;exe;com;pif;scr;vbs;shs;chm;bat;cmd;hta;reg are disallowed file types to upload.						
Name	Record ID	Record Type	Entity Type	Type	Size	Latest Update
<a href="#">Floor Plan.pdf</a>	X150120-01-00	Expedited Building Permit	Record	Floor Plan	314.18 KB	09/18/2015
<a href="#">IOR Workload.pdf</a>	X150120-01-00	Expedited Building Permit	Record	IOR Workload Report	273.68 KB	09/18/2015
<a href="#">Workers Comp Certificate.pdf</a>	X150120-01-00	Expedited Building Permit	Record	Workers Comp Ins Cert	182.29 KB	09/18/2015
<a href="#">EBPComplianceSummaryAndRequirementsECA_20150916_080620.pdf</a>	X150120-01-00	Expedited Building Permit	Record	Documents	604.05 KB	09/18/2015
<a href="#">EBPTIOProgramECA_20150916_080612.pdf</a>	X150120-01-00	Expedited Building Permit	Record	TIO	189.49 KB	09/18/2015

When the Expedited Building Permit has been issued, the project may begin.

## 4 Construction

**Determination of Eligibility.** Final determination of eligibility and appropriate permitting process is the responsibility of the OSHPD Compliance Officer. Facilities are encouraged to work with their Compliance Officer prior to assuming eligibility or an approach to permitting. The Compliance Officer will be notified by the IOR 48 hours in advance when work is ready to begin. The Compliance Officer will review and documentation and approve the Testing, Inspection and Observation Program prior to construction.

**Inspections.** The approved Inspector of Record (IOR) shall inspect the work. Interim inspection will be required when walls, ceilings or other construction materials will cover the finished work. Any deficiencies, identified through inspection, shall be corrected before use of the handrail is permitted. A “Construction Final” issued by the Compliance Officer is required prior to use of the handrail.

Responsible parties shall file verified compliance reports in accordance with the requirements of the Testing, Inspection, and Observation (TIO) Program. (See Appendix A)



**Manufacturer's written installation instructions.** The installation shall comply with the manufacturer's written installation instructions. The installer (facility's maintenance staff/contractor) shall leave or submit to the Compliance Officer the manufacturer's installation instructions in a location on the premises where they will be readily available for reference and guidance for the IOR, OSHPD, service personnel and the owner or operator.

**Notice of Start of Construction.** In accordance with Part 1, Title 24, Section 7-137, the Owner or Owner's representative shall provide an OSH-FD-181 *Notice of Start of Construction* form to OSHPD which includes the following:

1. Name and address of the contractor.
2. Contract price.
3. Date on which contract was awarded.
4. Date of construction start.

This form may be uploaded as an attachment in eCA.

**Construction may now start.**