

ATTACHMENT B

**APPENDIX B
INSTRUMENTATION PROGRAM
AND ANNUAL RENEWAL**

*TO BE SUBMITTED ON INSTALLATION DATE AND EACH YEAR
BEFORE ANNIVERSARY OF ORIGINAL INSTALLATION*

Building Address: _____ San Francisco, California.

Staff Building Engineer or other local contact person:

Name: _____.

Address: _____.

Work Phone: _____.

Fax No.: _____.

Pager: _____.

Cell Phone: _____.

Home Phone: _____.

E-mail: _____.

All seismic instrumentation equipment has been checked to be in operating order

The building owner has changed. The new owner is:

Equipment or access procedures have changed as follows:

(signature) _____

Date: _____

(typed name)

The updated documentation for this building has been accepted by the Department of Building Inspection.

Accepted by: _____

Date: _____

RETURN ONE COPY OF THIS FORM TO BUILDING OWNER AFTER REVIEW & ACCEPTANCE