



# OSHPD e-Services Portal

*Public User Guide*

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Version Number: 8.0

## **Section 5 – Applications for New Projects**

## 1 Introduction

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

This section details the step-by-step instructions for creating and submitting an application for a new OSHPD construction project 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 Project Applications

### 2.1 Page Flow Overview

The predefined steps to create and submit project applications are detailed in this guide. The steps involved in submitting an Application for a New Project, or AFNP, is slightly different from those in submitting for a PADs and Building Permits. 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	Select Application for New Project on this step; to create an Expedited Building Permit for Skilled Nursing Facilities, refer to user guide #8.
2	Facility Information	Look up and select the facility from OSHPD’s facility database. eCA auto-populates the facility, address, and facility owner information.
3	Professionals and Contacts	Look up and identify each Licensed Professional(s) and Contact(s) specific to the application. eCA auto-populates the LP’s information.
4	Project Details	Record the Project Name, Scope, and other project details specific to the project.
5	Table Information	Enter estimated Project Costs, list all Enclosures, identify any Deferred Approval Items and specify the Structural Software used.
4	Facility Authorization	Enter a valid Facility PIN code. Usually entered by Facility Representative but may be entered by any user with the valid PIN.
5	Payment Options	Selects one of the application fee payment options: “Pay Now” or “Invoice Me”.
6	Review	Final review opportunity of all the data entered on the application for accuracy; edits can still be made if necessary.
7	Pay Fees	If the “Pay Now” option is selected, you must pay the outstanding fee by credit card.
8	Confirmation	Project application is submitted to OSHPD and eCA issues a project ID number. You may print project summary sheet, preliminary invoice or payment receipt as needed.

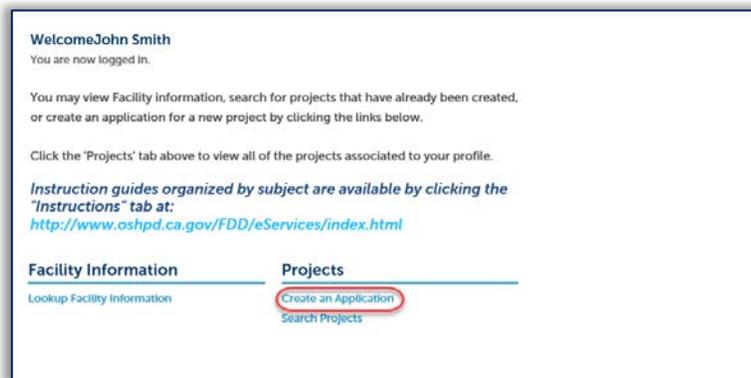
## 2.2 Basic rules of page flow

Below are some basic rules of submitting an application using the eServices Portal:

- ✓ When creating an application for a new project, follow the page flow in order to avoid errors or missed data.
- ✓ When resuming an existing in-progress application, you will be given the option to start from the beginning or continue where the application was left off.
- ✓ You can navigate back and forth within the completed pages.
- ✓ You 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, eCA will automatically Save the selection. If any edits are needed, click the Edit link for the individual (such as setting the Responsible Primary Licensed Professional). To add the next record, click **Look Up** or **Add New** as applicable.
- ✓ It is recommended that you click 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. You must correct any errors before continuing to the next page flow screen.

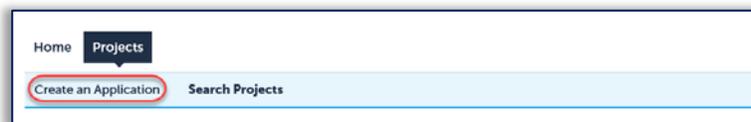
## 2.3 Create and Submit an ANFP

The following information will guide you through the steps necessary to create an Application for New Project (or ANFP).



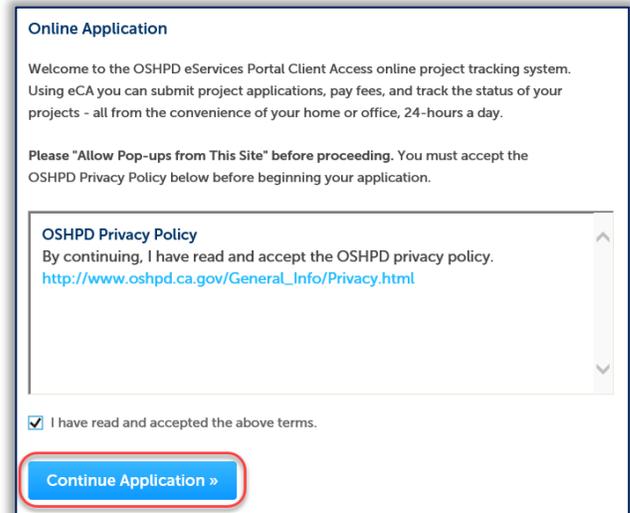
### Step 1. Start Create an ANFP

Only registered users may create an Application for a New Project. Navigate to the **Home** or **Projects** tab and begin by clicking on the **Create an Application** link.



**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 the **Continue Application** button.



**Step 3. Select a License**

If you are a Licensed Professional (Architect, Engineer, Contractor, IOR), you will be given the opportunity to select your license and have it automatically added to the Professionals section. To do this, click the down arrow and select your license; if you do not want your license listed on this application, select None Applicable. If you are not a Licensed Professional (or if your license has not been associated to your Public User account), this option will not be available.



**Step 4. Select Record Type**

Select “Application for New Project” then click the **Continue Application** button.

Expedited Building Permits is a special program permitted by law for single-story Skilled Nursing Facilities or Intermediate Care Facilities that are of wood frame construction. To complete an Application for Expedited Building Permit, refer to User Guide #8; for more information regarding projects eligible for the Expedited Building Permit, see ‘How To Guides’ at:

<http://oshpd.ca.gov/FDD/SNF-ICF>.

Click **Continue Application** to proceed with application.

**Step 5. Enter Facility Information**

Enter the OSHPD Facility ID or Facility Name then click the **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. To search for another facility, click the **Clear** button in Facility section. This clears the previous entered facility. To advance to the next page flow step, click **Continue Application**.

**Step 6. Add Licensed Professionals (LP) to the project.**

Search the OSHPD database for active LP records by entering at least one search criteria such as License Type, License Number, or Name. Click on the **Look Up** button to perform the search.

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. eCA will automatically find and add the professional to the application. 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.

When searching by name and license type, locate the correct LP in the returned list then check the box next to their license number and click **Continue**. The LP’s name, address, and other information will be automatically populated with the current information from our database.

**Look Up License**

Revise Search  
Search results:  
Showing 1-9 of 9

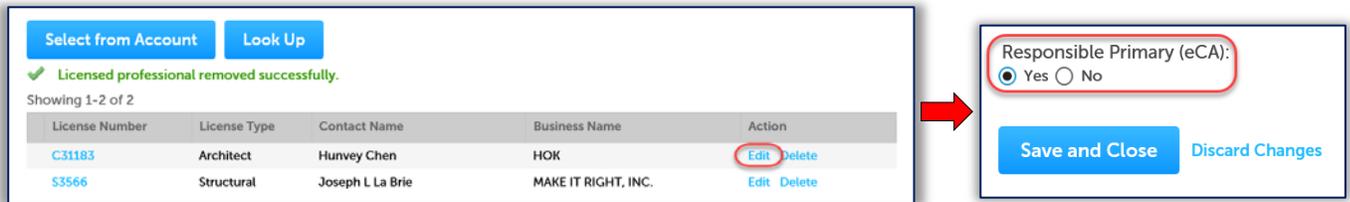
<input type="checkbox"/>	License Number	License Type	Licensed Professional Name	Business Name
<input type="checkbox"/>	C12436	Architect	Tom Lee	LDA ARCHITECTS
<input type="checkbox"/>	C14643	Architect	Al Lee	STANTEC
<input checked="" type="checkbox"/>	C16814	Architect	Alvin Lee	UCLA CAPITAL PROGRAMS
<input type="checkbox"/>	C17825	Architect	Chin-Whan Lee	HMC ARCHITECTS
<input type="checkbox"/>	C25642	Architect	Shong Leng Lee	ASPEN STREET ARCHITECTS
<input type="checkbox"/>	C26975	Architect	Michael Lee	THE BOLDY COMPANY
<input type="checkbox"/>	C27636	Architect	Kam Lee	MARSHALL LEE INC
<input type="checkbox"/>	C29310	Architect	Tachen Lee	TAYLOR DESIGN
<input checked="" type="checkbox"/>	C337	Architect	L Kam Lee	Marshall/Lee Architects

**Continue** Discard Changes

**Please verify that the information is correct.**

Contact OSHPD at [eserv@oshpd.ca.gov](mailto:eserv@oshpd.ca.gov) to update the existing Licensed Professional's information.

To indicate which licensed professional is the ‘Design Professional in Responsible Charge’ of the project, click the Edit link to the right of the screen and set the “Responsible Primary (eCA)” button to **Yes**.

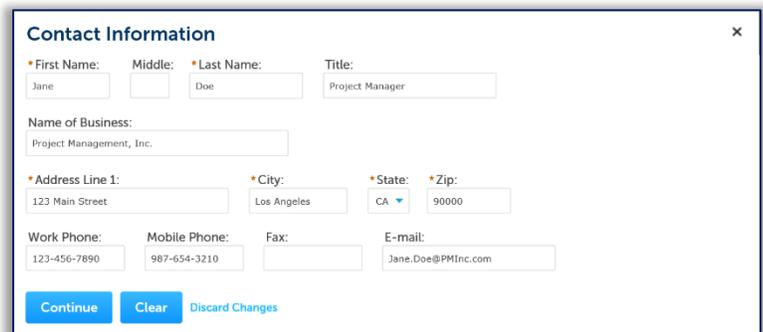
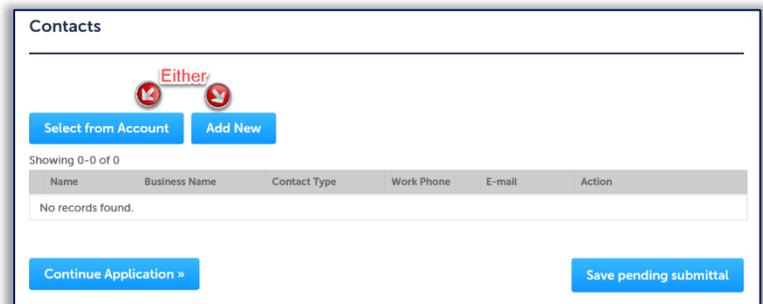


To add additional Licensed Professionals, repeat the steps above; continue these steps to add all Licensed Professionals (Delegates and Alternates) to the project. You can always delete the Licensed Professional(s) by clicking on the **Delete** link at the end of the record line.

Click **Continue Application** to proceed to the next page flow screen.

**Step 7. 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 clicking the **Add New** button and completing each applicable field **OR** by clicking the **Select from Account** button to use information contained in your Public User account. You must select a Contact Type and click on the **Continue** button to save the selected contact. When complete, click **Continue** to copy the information to the Contacts List. Multiple Contacts may be added to the project.



Click **Continue Application** to proceed to the next page flow screen.



**Step 8. Enter Project Details and Additional Details.**

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

**Step 3: Project Details > Scope and Details** \* Indicates a required field.

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**Detail Information**

\* Project Name

\* Project Scope

Complete the addition details specific to the project. For a brief description of each field, see below:

**Additional Details**

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**PLAN REVIEW**

\* Submittal Type:

\* Kind of Project:

Total Beds Before Construction:

Total Beds After Construction:

\* Square Footage of Project:

\* Use Annual Building Permit:  Yes  No

\* Managed Project Requested:  Yes  No

Seismic Compliance Construction Project:  Yes  No

Seismic Extension Qualifying Project:

Article 10 Mitigation Project:  Yes  No

\* Project includes primary gravity and/or lateral load elements/systems:  Yes  No

OSHPD Building #:

Field Review Requested:  Yes  No

- **Submittal Type:** Indicate the type of project that is being submitted for review:
  - AB 2632 – maintenance or repair project for SNFs and ICFs
  - Phased or Collaborative Review Requested – projects over \$20 million
  - Examination – Clinics and other projects reviewed on a T&M fee basis
  - Final – 100% Construction Documents review
  - Geotech Only – Geotechnical Report review by Engineering Geologist
  - Preliminary – Architectural and Fire & Life Safety review of preliminary plans
  - SB 1838 – Projects of \$50,000 or less – exempt from plan review
- **Kind of Project:** Indicate which kind of project is being submitted for review:
  - Addition – projects which increases the floor or roof area
  - Maintenance – projects necessary to repair systems or equipment, or that are undertaken for routine maintenance purposes
  - New Building
  - Remodel
  - ROCC – Re-open a closed project to close it in compliance in accordance with PIN 56
- **Total Beds Before & After Construction:** Enter the total bed count before construction and after construction. If the bed count is not being affected by this project, this information is not required.
- **Square Footage of Project** – enter the area of the project in square feet; this is a required field. See help for additional information
- **Use Annual Building Permit:** Indicate if this project will be under the facility Annual Building Permit. You cannot answer "Yes" to the question "Use Annual Building Permit" unless you have an active Annual Building Permit for the current fiscal year.
- **Managed Project Requested:** Managed projects are projects where schedules and deadlines relating to plan review and construction are negotiated between the Office and the Applicant. These projects will not follow the traditional 60-day or 80-day review goal.
- **Seismic Compliance Construction Project:** Indicate if the project is a Seismic Compliance Construction Project. If yes, the Seismic Compliance section must be completed.
- **Seismic Extension Qualifying Project:** Select 'SB 90 Extension' if this project is a Seismic Extension Qualifying Project. Select 'N/A' if not a qualifying project. Selecting any other values will display an error message and will block continue this application.
- **Article 10 Mitigation Project:** SPC-1 buildings that did not meet the January 1, 2015 Seismic Compliance deadline are prohibited from any new remodel projects except Seismic Compliance projects, maintenance and emergency repairs.
- **Project includes primary gravity and/or lateral load elements/systems:** Indicate if the project includes primary gravity and/or lateral load elements/systems. When "Yes" is selected, the project will be created as an "H" project; when "No" is selected, the project will be created as an "S" project.
- **OSHPD Building Number:** Enter the OSHPD Building Number for each building that this project affects. Building numbers are available for look-up at <http://www.oshpd.ca.gov/FDD/Forms/Keyplans/index.html>
- **Field Review Requested:** Select **Yes** if you are requesting the project to be reviewed by OSHPD Field Staff at the project site during their normal visits. **If field review is requested, you must contact the OSHPD field staff to schedule review of all documents.**

Click **Continue Application** to proceed to the next step.

**Step 9. Enter Project Tabular Information.**

**Costs**

The project estimated construction costs are entered on this step and you must enter one Costs row. To add one Costs row, click the **Add a Row** button in the COSTS section.

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

**Enclosures**

For each type of Enclosure, click Add a Row to create a new entry in the Enclosure table or click the down arrow to add up to 10 rows simultaneously.

In the pop-up window, enter the number of copies submitted, and select the Type from the dropdown list and provide a brief description of the submittal in the Enclosure Description in the text field if necessary. Enter the Date Sent, select the Method of Transmittal (Courier, Electronic, In Person, Mail), and the Courier name (FedEx, UPS, GSO, etc.). Click **Submit** to copy form to Enclosures Table.

### Deferred Items

Where a portion of the design cannot be fully detailed on the approved construction documents because of variations in product design and manufacture, the approval of the construction documents for such portion may be deferred until the material suppliers are selected. OSHPD has sole discretion as to the portions of the design that may be deferred. All deferred items allowed by OSHPD must be clearly described on the construction documents. Deferred submittals must comply with Title 24, California Administrative Code Section 7-126.

For each type of Deferred Submittal Item, click Add a Row to create a new entry in the Deferred Items Table or click the down arrow to add up to 10 rows simultaneously.

In the pop-up window, enter the discipline specific to the deferred item, i.e. Fire & Life Safety for a fire alarm deferred submittal item, enter the tracking number that will be used by the Applicant and provide a brief description of the deferred submittal item.

**DEFERRED ITEMS**

Enter all Deferred Submittal Items that are being requested for this project. To enter deferred submittal items, click the "Add a Row" button; you may also click the down arrow to add multiple rows at one time. Enter as many rows as needed. (Remember: Each item listed here must be shown on the title page of the plans.)

Discipline:

Applicant Tracking Number:

Description of Deferred Approval:

**Submit** **Cancel**

**Structural Analysis Software**

When applicable, indicate the type of structural design software used in the preparation of the design.

For each type of structural analysis software, click Add a Row to create a new entry in the Structural Analysis Software Table or click the down arrow to add up to 10 rows simultaneously.

**Structural Software**

**STRUCTURAL ANALYSIS SOFTWARE**

Identify the Structural Analysis Software used in the design of this project. To identify the Structural Analysis Software, click the "Add a Row" button; you may also click the down arrow to add multiple rows at one time. Enter as many rows as needed.

Showing 0-0 of 0

Structural Analysis Software Used	Other Structural Analysis Software Used
No records found.	

**Add a Row** **Edit Selected** **Delete Selected**

In the pop-up window, enter the Structural Analysis Software used.

**STRUCTURAL ANALYSIS SOFTWARE**

Identify the Structural Analysis Software used in the design of this project. To identify the Structural Analysis Software, click the "Add a Row" button; you may also click the down arrow to add multiple rows at one time. Enter as many rows as needed.

\* Structural Analysis Software Used:

Other Structural Analysis Software Used:

**Submit** **Cancel**

**Note:** If your designs were not prepared using software listed in this area, please be advised that plan review may be delayed while OSHPD develops a work-around, or purchases the software indicated.

When finished, click **Continue Application** to proceed to the next page flow screen.

**Step 10. 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 **Continue Application** button to proceed to the next page flow screen.

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

**Authorization**

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**SECURITY**  
Please enter your Facility's six digit PIN below. **You will not be able to complete this project without a valid PIN.** If you do not know your Facility's PIN, click "Save pending submittal" now. This will save your record and issue a temporary project number (e.g. 15TMP-00014).

If you do not know the PIN but a PIN has been issued, forward your temporary application number to the PIN holder.

If your facility has not been issued a PIN, or if you are having any other access issues, please contact eCA's Access Manager at [eCA.Access.Manager@oshpd.ca.gov](mailto:eCA.Access.Manager@oshpd.ca.gov) or call (916) 440-8400.

Facility PIN Code:

[Continue Application >](#) [Save pending submittal](#)

If you click the “Save pending submittal” button, the application process stops and you will be redirected to the Project List page. eCA issues a temporary Project ID and displays the application in the Project list. You or other authorized users can “Resume Application” at a later time.

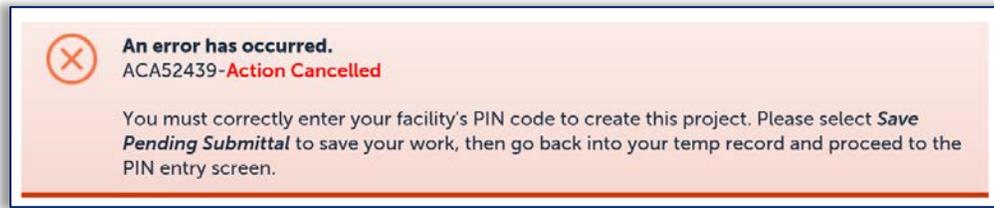
**Your partial application (16TMP-015624) has been successfully saved.**  
To resume the application(s), go to the Projects section and click the Resume Application link.

**Projects**

Showing 1-10 of 100+ | [Download results](#) | [Add to collection](#)

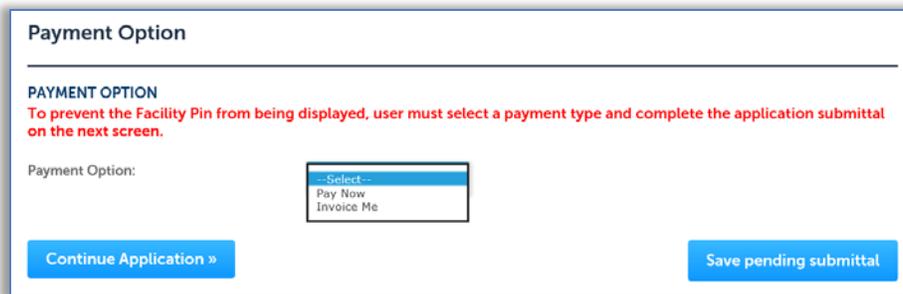
<input type="checkbox"/>	Date	Project Number	Project Type	Project Name	Status	Related	Action
<input type="checkbox"/>	10/31/2016	16TMP-015624	Application for New Project	Project Name		0	<a href="#">Resume Application</a>
<input type="checkbox"/>	10/30/2016	S162557-37-00-ACD0001	Post Approval Document	mc16088 Jacobs Sink Installation Rm LL-483	Open	3	

If you enter an invalid Facility PIN, eCA displays an error message at the review step and prevents you from completing the application. You may return to the Security page and re-enter the correct PIN; however after 3 times entering an incorrect PIN, the application will be locked.



**Step 11. Select Payment Option.**

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



- **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 you do 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, you 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 **Continue Application** to proceed to the next page flow screen.

**Step 12. Review the data entered and makes edits if needed.**

On this screen, click the **Edit** button in each application step to make necessary changes.

**Step 6: Review**

[Continue Application »](#) [Save pending submittal](#)

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

**Record Type**

---

Application for New Project

**Facility** [Edit](#)

---

Facility ID 12359  
 Facility Name University of California, San Diego Medical Center  
 Responsible Region: South Region  
 Type of Facility: General Acute Care  
 Geographic Region: South Region  
 County Code: 37 - San Diego

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

*If you selected the “Invoice Me” option, skip to step 14 below.*

**Step 13. Pay Application Fees online.**

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

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

**Step 7: Pay Fees**

Listed below are the fees assessed by OSHPD based on the information you have provided. The application fee is not refundable. The Plan Review Fee for the estimated construction costs, 1.64% for hospital buildings or 1.5% for skilled nursing facilities, will be invoiced directly to the facility.

**Application Fees**

Fees	Qty.	Amount
Application Fee	1	\$250.00

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

\$250.00

[Continue Application »](#)

**Step 14. Submit online payment.**

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

**Payment Options**

*The \$250 application fee is non-refundable per California Administrative Code, California Code of Regulations, Title 24, Part 1, Section 7-133(a)3.*

Amount to be charged: \$250.00

☑ Pay with Credit Card

**Credit Card Information:**

\* Card Type: --Select--   \* Card Number:   \* Security Code: ⓘ

\* Name on Card:   \* Exp. Date: 01 2016

**Credit Card Holder Information:**

Auto-fill with John Smith

Country: United States

\* Street Address:

\* City:   \* State: --Select--   \* Zip:

\* Phone:

E-mail:

**Submit Payment >**

**Step 15. Project submission confirmation.**

On this final screen, eCA display a project submission confirmation including the project record number. You may 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. You can also 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 by entering the PIN (Owner Representative).

## Congratulations! You have successfully submitted an Application for a New Project to OSHPD!

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 application for a new project.  
**Your Project Number is S162686-37-00.**

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

Print/View Project
Print/View Receipt
Print/View Summary

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Your application has been accepted and is now in the eServices Portal project tracking system.

Please click the Print/View Summary button to print the transmittal that must accompany the construction documents to the office or to your appointment with the OSHPD Field Staff. If construction documents are not received within 45 days, this application will be cancelled.

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

### 3 Submit Construction Documents to OSHPD

When the Design Professional receives the confirmation email, they must log in to eCA and click the Projects tab. The most recent project will be at the top of the list.

Home
Projects 1

Create an Application
Search Projects

## Projects

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Showing 1-10 of 100+ | [Download results](#) | [Add to collection](#)

<input type="checkbox"/>	Date	Project Number	Project Type	Project Name	Status	Related	Action
<input type="checkbox"/>	11/02/2016	S162686-37-00 <span style="background-color: red; color: white; border-radius: 50%; padding: 0 5px;">2</span>	Application for New Project	Project Name	Open	0	<a href="#">Amendment</a>
<input type="checkbox"/>	10/30/2016	S162557-37-00-ACD0001	Post Approval Document	mc16088 Jacobs Sink installation Rm LL-483	Open	3	

Click on the project number to open the Project Detail view. Below the ‘More Details’ section, click the **Print/View Summary** button – this will open the Project Summary report that must be printed and included when **paper construction documents** are submitted to OSHPD, regardless of whether the project will be submitted to the office or to field staff for a FREER review.

▶ More Details

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

[Create Amendment](#)

**OFFICE OF STATEWIDE HEALTH PLANNING AND DEVELOPMENT  
FACILITIES DEVELOPMENT DIVISION**

**Project Number:** S162686-37-00  
**Project Type:** Application for New Project  
**Parent Project Number:**  
**Facility:** 12359 - University of California, San Diego Medical Center

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**Project Description:** Project Name  
Project Scope

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**Submittal Type:** Final  
**Kind of Project:** Remodel  
**OSHPD Building Number:** BLD-12345

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**Primary Professional:** Hurvey Chen, (310) 838-9555, testingsp@oshpd.ca.gov  
**Primary Contact:** Jane Doe

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Cost Type	Cost Date	Construction Cost	Fixed Equipment Costs	Total Cost	Cost of Imaging	Reason
Estimated	11/03/2016	\$10,000.00	\$5,000.00	\$15,000.00	\$0.00	

---

**Enclosures:**

# of Copies	Enclosure Type	Description	Date Sent	Method of Transmittal	Courier Name	Backcheck	Attached

Please include this Project Application Summary form with your construction documents when submitting to OSHPD. This Project Application Summary form replaces the paper application; it is not necessary to include the paper application when project applications are created using eClient Access.

S162686-37-00

This form is the transmittal letter and is the only document that is required for a paper plans and documents; it is not necessary to include a paper application when project applications are created using eClient Access.

For electronic plan submittal and electronic plan check, click the Dropdown menu Record Info and select **Attachments**.

Home **Projects**

[Create an Application](#) [Search Projects](#)

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**Project S162686-37-00:**  
**Application for New Project**  
**Record Status: Open**

Record Info ▼

Project Details

Processing Status

Related Projects

**Attachments** ←

Field Operations

Payments ▼

Follow the instructions in User Guide #10 to attach plans and construction documents to this record for instantaneous submittal to OSHPD. Also see User Guide #11 for specific information on how to format the electronic documents prior to uploading.

**Congratulations!**  
**Your Application for a New Project is ready to be reviewed by OSHPD!**