



# HCAI e-Services Portal

*Public User Guide*

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Version Number: 6.8

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






## 1 Introduction

### Welcome to HCAI 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 HCAI 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 Title	Description
<b>Application for Expedited Building Permit</b>	
Record Type	User must select <b>Expedited Building Permit</b> on this step in order to submit an application for this type of project.
Select Facility	User selects the facility from HCAI’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.
Project Information	User records the Project Name and Project Scope specific to the project.
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.
Costs	User enters project costs: Construction Cost and Fixed Equipment.
Attachments	User uploads attachments such as floor plans, workers compensation insurance certificates, IOR workload report and other documents.
Professionals	User identifies each Contractor or Owner/Builder and the IOR specific to the application. eCA auto-populates the information.
Workers Comp	User enters information for the Workers Compensation Insurance for the Contractor or Owner/Builder.
IOR Assessment	The assessment of the qualifications and acceptability of the IOR are entered by the Contractor or Owner/Builder.
Contacts	User identifies each Facility Contact specific to the application. eCA auto-populates the information.
Facility Authorization	Enter a valid Facility PIN code. Usually entered by Facility Representative but may be entered by any user with the valid PIN.
Owner Acknowledgement	Owner’s representative acknowledges acceptance of the IOR entered.



Payment Options	User selects one of the three application fee payment options: “Pay Now”, “Pay Later” or “Invoice Me”.
Review	User reviews the data entered on the application for accuracy; edits can still be made if necessary.
Pay Fees	If user selects the “Pay Now” option, user pays the outstanding fee by credit card online.
Confirmation	Project application submitted to HCAI. 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:

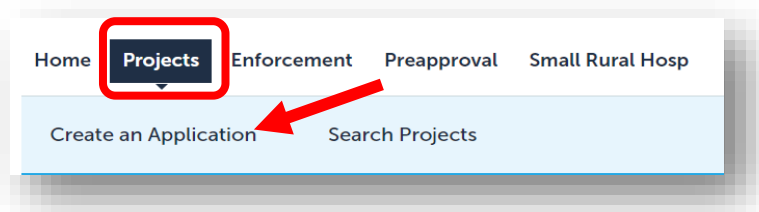
- ✓ If resuming an existing application after saving, user should select “Start from Beginning” when prompted.
- ✓ User can navigate back and forth within the completed pages.
- ✓ User must click on “Continue Application” or “Save pending submittal” button to save the data entered on the page.
- ✓ If a page contains a section that allows for multiple records to be added, for example multiple licensed professional, user must click the “Save” button in the section to save each professional to the record in order to add the next.
- ✓ It is recommended that user clicks the “Save pending submittal” at least once or before entering PIN because the data is not committed to the database so if you exit before completing or saving, the information enter is not recoverable.
- ✓ 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). This guide assumes the user is logged into eClient Access.

### Step 1. Start to Create an XBP

Only registered users may create an Application for an Expedited Building Permit. To start, navigate to the Projects module shown below. Then, begin by clicking on the “**Create an Application**” link.



### Step 2. Accept HCAI 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 HCAI eServices Portal Client Access online project tracking system. Using eCA you can submit project applications, pay fees, and track the status of your projects - all from the convenience of your home or office, 24-hours a day.

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

**HCAI Privacy Policy**

By continuing, I have read and accept the HCAI privacy policy.  
<https://hcai.ca.gov/home/privacy-policy/>

I have read and accepted the above terms.

**Continue Application »**

**Step 3. Delegation Prompt**

If you have been delegated permission from another public user, select the appropriate option and click “Continue Application”.

**Step 4. 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.

**Expedited Building Permit**

An Expedited Building Permit is a companion process to the HCAI 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 HCAI Compliance Officer.**

**Search**

▼ Construction Project Applications

- Application for New Project
- Expedited Building Permit



**Step 5. Enter Facility Information**

Enter the HCAI 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 HCAI of any errors. Remember not to enter too much information when searching.

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

### Facility

Enter the HCAI 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 HCAI at [eserv@hcai.ca.gov](mailto:eserv@hcai.ca.gov) if the current facility information is incorrect or to add a new facility.

Auto-fill with 00000

\* Facility ID  Facility Name

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### Address

\* Street No.:  \* Street Name:  City:  State:  Zip:

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### Owner

Auto-fill with 00000 - NO FACILITY - SYSTEM USE ONLY

Owner Name:

To advance to the next page flow step, click on “Continue Application”.

To search for another facility, click on “Clear” button in Facility section. This clears the previous entered facility. Enter the facility number and click “Search”.



**Step 6. Enter Project Name and Scope Details.**

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

**Step 7. Complete the Compliance Checklist.**

Expedited Building Permits are currently available for the following types of projects:

- Water heater replacement
- Handrail replacement
- TV/monitor bracket installation projects
- Roof mounted HVAC unit replacement
- Re-Roofing
- Installing a connection for Temporary Generator – Full Building Backup
- Installing a connection for Temporary Generator – Emergency Backup
- Installing a Temporary Generator
- Mobile Dialysis Unit Installation

These are referred to as “Submittal Types”.

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 HCAI 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.*

Next, select the appropriate Submittal Type. If the checklist is not displayed, switch the Submittal Type back to “Please Enter a Submittal Type”, and then back to your 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 Enter a Submittal Type
- Water Heater Replacement
- Handrail Replacement
- TV/Monitor Bracket Installation
- HVAC Unit Replacement
- Re-Roofing
- Connection for Full Building Generator Backup
- Connection for Emergency Generator Backup
- Installation of Temporary Generator
- Mobile Dialysis Unit Installation



Please select a submittal type from the dropdown list.

When the checklist is displayed, read and answer each question about the project and facility. Answering Yes or No to one question may disable another question. As you answer each question, a list of requirements is displayed at the bottom of the checklist. These requirements will be available in a report included with the building permit when it is issued.

1 Select Facility

2 Project Information

3 Professionals and Contacts

4 Security and Payment

5 Review

6

7

#### Step 2: Project Information > Project Checklist

\* indicates a required field.

#### Compliance Checklist

Submittal Type:

##### PROJECT DESCRIPTION

1. The re-roofing project is located in a single-story Skilled Nursing Facility building of wood or light steel frame construction?  Yes  No  N/A
2. The roof has been previously inspected and approved by HCAI?  Yes  No  N/A
3. Re-roofing project is for roof replacement as routine maintenance?  Yes  No  N/A
- 4.a. The work is performed and supervised by the licensed specialty contractor who prepares the construction documents, 7-115 (c) 1. California Administrative Code?  Yes  No  N/A
- 4.b. The work is performed by facility staff who shall prepare the construction documents required for approval by the Office?  Yes  No  N/A

This question has been disabled because of your answer to question 4.a



The requirements shown are not indicating the facility will not be eligible for an Expedited Building Permit. The requirements are merely reminders for the client and HCAI staff to have available.

**Requirements based on answers entered:**

4.a. Workers Compensation Insurance is required for all work. The contractor must be registered with the Department of Labor and Industries

Please answer questions: 5.c, 6, 7.a, 7.b, 7.c, 7.d, 8, 9, 10, 11, 12, 13, 14,

Also, at the bottom of the checklist is a list of questions remaining to be answered.

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. If the project is determined to be eligible for the expedited Building Permit process, the following will be displayed.

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 facility is disqualified from utilizing the Expedited Building Permit process, the project will need to be submitted as a standard project. The user guide for the [Application for New Project](#) will show you how to submit.

Next, **This Project is mitigation for:** is asking the application is for mitigation of Alternate Power or Unauthorized Construction. If neither are true, select "NA".

**APPLICATION**

If the compliance checklist above indicates 'Success', your project is eligible for the Expedited Building Permit process. Enter the field(s) below and click 'Continue Application'.

If the compliance checklist above indicates 'Your project does not meet the requirements for an expedited building permit', you can save you current data entry by clicking 'Save Pending Submittal' button. Once saved, you can resume your application at a later time.

If it is determined that your project does not meet the requirements for an Expedited Building Permit, you will be required to submit an 'Application for New Project'.

For any questions or clarification, please call our support line at (916) 440-8400 for assistance, or send an email to [eserv@oshpd.ca.gov](mailto:eserv@oshpd.ca.gov).

\* This project is mitigation for:

--Select--  
 Alternate Power Mitigation  
 NA  
 Unauthorized Construction Mitigation

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

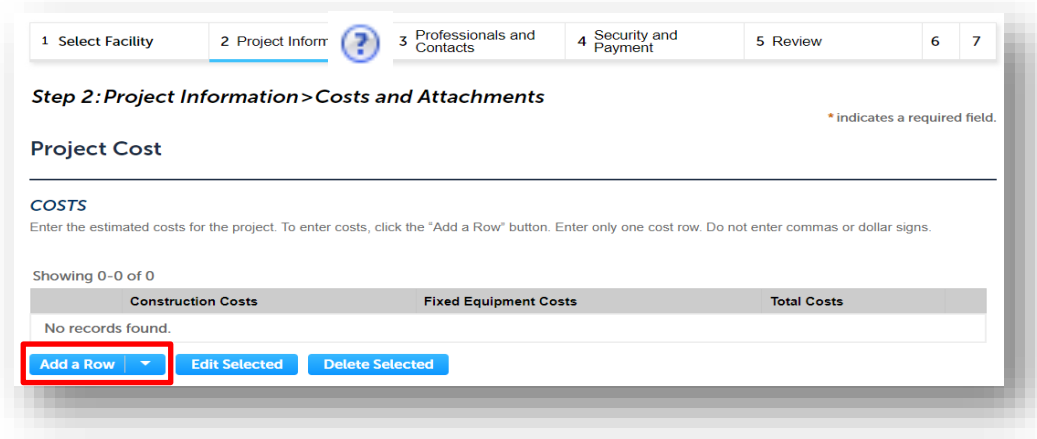
Click "Continue Application" to progress to the next page.



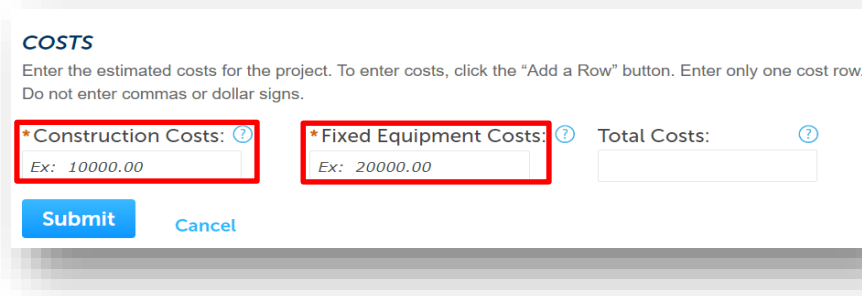


### Step 8. Enter Project Costs

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.



On the popup window, enter the estimated Construction Costs and Fixed Equipment Costs, then click on “Submit” button. For more info, click.



### Step 9. Attachments

An application for Expedited Build Permit requires the following documentation be submitted with the application:

#### All Expedited Building Permit applications:

- Site plan or sketch of the facility showing the location of work.
- Contractor or Owner/Builder’s Workman’s Compensation Insurance Certificate.
- Inspector of Record Workload report. Available in the Report Center <https://report.hcai.ca.gov>
- Application for Inspector of Record. [HCAI-FD-124](#)

#### Re-Roofing (only)

- Local Planning Department Approval letter.
- Existing roof demolition plan
- New roof plan
- Specifications or Manufacturer’s installation instructions.



Click the “Add” button to select the required documentation.

**Attachment**

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**At this step you must attach each of the following required documents:**

**All XBP Applications Need:**

- ~ Site plan sketch of the facility showing the location of work
- ~ Contractor's or Owner/Builder's Workman's Compensation Insurance Certificate
- ~ Inspector of Record Workload Report
- ~ Application for IOR - HCAI-FD-124

**Re-Roofing Application Needs in addition to the above:**

- ~ Roof Demolition Plan
- ~ New Roof Plan
- ~ Local Planning Department Approval letter, if applicable
- ~ Specifications or Manufacturer's installation instructions, if applicable

if;reg;scr;scf;shb;shs;sys;vb;vbe;vbs;vxd;v

Name	Type	Virtual Folders	Action	Size	Description	Latest Update	Upload Da
No records found.							

**Add**

**Continue Application »** **Save pending submittal**

In the popup window, click “Add” button to open the file selector page. You can select multiple documents at the

**File Upload**

The maximum file size allowed is 300 MB.  
ade;adp;bat;chm;cmd;com;cpl;exe;hta;htm;html;ins;isp;jar;js;jse;lib;lnk;mde;n are disallowed file types to upload.

Application for IOR.pdf	100%
Existing Roof Demolition Plan.pdf	100%
Local Planning Department	100%
Manufacturers Installation	100%
New Roof Plan.pdf	100%

**Continue** **Add** **Remove All** **Cancel**

new folder

Name	Status
Application for IOR.pdf	✓
Existing Roof Demolition Plan.pdf	✓
Local Planning Department Approval...	✓
Manufacturers Installation Instruction...	✓
New Roof Plan.pdf	✓
Plan_P-2011-00631-ACD0114.pdf	✓
Plan_S221202-34-00-ACD0002.pdf	✓
T_I200003-37-05 V11 Telec Plan.pdf	✓
Workmans Comp Insur.pdf	✓

File name:  All files (\*.\*) **Open**

same time. Repeat until all documents are selected. Click “Continue” to return to application.



Next, Select the document type and brief description. If a document does not have a Document Type, use “**Document**”. Click “**Save**” to complete the document upload.

\* Type: Workers Comp Ins Cert Remove

File: Workmans Comp Insur.pdf 100%

\* Description: Workers Comp Insurance

**Save** Add Remove All

Continue Application > Save pending submittal

When all documents are uploaded, click “**Continue Application**”.

**Step 10. Add Licensed Professionals, Contractor, or Owner/Builder and IOR.**

While not mandatory, HCAI 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 HCAI at [eserv@hcai.ca.gov](mailto:eserv@hcai.ca.gov) to add a new Licensed Professional to our database.

Click “**Lookup Button**”.

Licensed Professional List

**Look Up**

Showing 0-0 of 0

License Number	License Type	Contact Name
No records found.		



**Look Up License**

License Type: Contractor State License Number: OB00000

First Name: Last Name:

Name of Business:

Address Line 1: Enter professional's work address

City: State: Zip: Country: --Select--

Mobile Phone: Fax:

**Look Up** Clear Discard Changes

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 HCAI at [eserv@hcai.ca.gov](mailto:eserv@hcai.ca.gov) to update the existing or missing Licensed Professional's information.

**Licensed Professional List**

**Look Up**

✔ Licensed professional added successfully.

Showing 1-2 of 2

License Number	License Type	Contact Name	Business Name	Action
A99999	IOR	Facility Inspector		<b>Edit Delete</b>
OB00000	Contractor		FACILITY - SYSTEM USE ONLY	<b>Edit Delete</b>

Click **“Edit”** to 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.

Click on **“Continue Application”** to proceed to the next page.

**Licensed Professional Information**

\* License Type: Contractor \* State License Number: OB00000

First Name: Last Name: E-mail: eserv@oshpd.ca.gov

Name of Business: FACILITY - SYSTEM USE ONLY

\* Address Line 1: 400 R Street \* City: Sacramento

Work or Mobile: 916-440-8300 Mobile Phone: Fax:

Responsible Primary (eCA):  Yes  No

**Save and Close** Discard Changes



### Step 11. Workers Compensation Insurance

Select one of the three options in the dropdown: “Insured through carrier”, “Exempt”, or “Self-Insured”.

**Workers Compensation Insurance**

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**WORKERS COMPENSATION**  
 WARNING: FAILURE TO SECURE WORKERS’ COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY’S FEES.

\* Workers Compensation Coverage: ?

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

Complete the supplemental information based on your selection of the dropdown.

**Insured through carrier**

\* Workers Compensation Coverage: ?

\*Policy Number (required):\*

\*Insurance Carrier (required):\*

\*Expiration Date (required):\*

Insurance Agent Name:

Insurance Agent Phone:

Insurance Agent Email:

**Self-Insured**

\* Workers Compensation Coverage: ?

\*Policy Number (required):\*

**Exempt**

\* Workers Compensation Coverage: ?

\*Reason for Exemption (required):\*

When the page is complete, click “Continue Application”.

**DPOR Assessment**

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**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 HCAI, the owner and myself. \*

- Interview
- Other
- Prior OSHPD Projects

[Continue Application »](#)

### Step 12. DPOR Assessment

The Design Professional of Record must complete the fields on this page. Select from the dropdown how the DPOR assesses that the IOR is appropriate for the project.

Next, check the box to indicate the IOR has been verified by the DPOR.

Click “Continue Application”.



**Step 13. Add Contact 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. Click **“Save”** to copy the information to the Contacts List at the top of the page. Multiple Contacts may be added to the project.

The user can check the **“Auto-fill”** with checkbox and select the applicable Contact information from the adjacent dropdown box. The information of the highlighted contact will then be auto-populated in the fields below. Missing data from required fields must be completed to continue the application.

**Facility Representative**

---

Click **“Select from Account”** or **“Add New”** to complete the contact for the project.

Select from Account

Add New

**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 checked="" type="radio"/> Associated Contact	Individual	Robert D Fisher
<input type="radio"/> Associated Owner		00000 - NO FACILITY - SYSTEM USE ONLY

**Contact Information**

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

Name of Business:

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

\* Work or Mobile  Mobile Phone:  Fax:  \* E-mail:

Click on **“Continue Application”** to proceed to the next page.



**This would be a good time to click “Save Pending Submittal” to make sure your data is saved.**

Send the email received to the Owners Agent that has the facility PIN so the application can continue.



If you clicked “Save Pending Submittal”, you will receive an email that the application has been saved.

**Projects**

To pay invoices, click the Pay Fees link, or click [Shopping Cart Payment Portal](#). You must be logged in to eCA to access the payment portal. See eCA Online Payment Instructions for more information.

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

<input type="checkbox"/>	Date	Project Number	Project Type	Project Name	Status	Related	Action	Short Notes
<input type="checkbox"/>	02/04/2024	24TMP-001669	Expedited Building Permit	Re-Roofing Main Building		0	<a href="#">Resume Application</a>	

Click “Resume Application” from the projects page.

When prompted, select “Start from the beginning” and then click "OK".

**Resume Application: Select Application Page Flow Step**

Start from the beginning  
 Pick up where I left off

[OK](#) [Cancel](#)

Click “Continue Application” until to return to the appropriate page.

**Step 14. Enter Facility PIN code or Save pending submittal.**

- 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.

**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. 17TMP-00014); a confirmation email will be sent to you.

If you do not know the PIN but a PIN has been issued, forward the confirmation email to the PIN holder.

If your facility has not been issued a PIN, or you having other access issues, please contact the eCA 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](#)

Click “Continue Application”.

If user enters an invalid Facility PIN, eCA displays an error message and prevents user from proceeding to the next screen. If you need assistance, contact HCAI eCA Helpdesk at [eserv@hcai.ca.gov](mailto:eserv@hcai.ca.gov) or 916-440-8400.

**An error has occurred.**  
The facility PIN you entered is not correct. Please try your entry again. If you need to leave this project to verify the PIN, please press *Save and Resume Later*.



### Step 15. Legal Owner Acknowledgement

The legal owner’s agent must acknowledge acceptance of the selected IOR.

### Step 16. Select Payment Option.

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

- **Invoice Me:** HCAI 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 17. Final Review Page Before Submittal. (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**

[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**

---

Expedited Building Permit

**Facility** [Edit](#)

---

Facility ID 00000  
 Facility Name No Facility - System use only  
 Facility State: Closed  
 Type of Facility: Skilled Nursing and Intern. Care Facility  
 County Code: 34 - Sacramento

**Address** [Edit](#)

---

1234 Facility Address  
 Facility City CA 99999

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

*If user selected “Invoice Me” option, skip to step 20 below.*

Step 18. Pay Application Fees online.

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

**Step 6: Pay Fees**

Listed below are the fees assessed by HCAI 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 -Non-Refundable per CAC 7-133(a)3	1	\$250.00

TOTAL FEES: \$250.00  
 Note: This does not include additional Field Operation fees which may be assessed later.

[Continue Application »](#)

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



Amount to be charged: \$250.00

Pay with Credit Card

**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 19. Submit online payment.**

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

**Step 20. 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).

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

You will need this number to check the status of your project. Please print a copy for your records.  
**Your Record Number is X230021-34-00**

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

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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.

(You must post the record in the work area.)

**Congratulations! You have successfully submitted an Expedited Building Permit to HCAI!**

You will be contacted by HCAI if information is required, otherwise, the Regional Compliance Officer will issue the building permit.