



BUILDING PERMIT

BUILDING PERMIT
To be completed by Applicant

Permit Number: _____

Date Filed: _____

Applicant's Name: _____

Phone Number: _____

Issue Date: _____

Location of Work (Building Name and Room Number) _____

Permit expires if work is not started within 180 days of Permit issuance or 180 days from last inspection.

Description of all work to be performed:

Are plans and specifications provided: Yes No
If no, give reason:

Permit To: _____

Work to be performed by:
 Contractor Campus Trades Dept. Staff Other

Building Information

Stories _____

Type Const. _____

PLAN REVIEW
To be completed by Building Official

Occupancy _____

Sq. Ft. _____

University projects are required by statute to be reviewed by other agencies to assure compliance with current code requirements. Provide documentation of approval from the agencies listed below, if box is checked.

- State Fire Marshal (SFM), C.C.R. Title 19 & 24
- Division of State Architect (DSA), C.C.R., Title 24
- Code Compliance Plan Review
- Seismic Review Board
- Los Angeles County Department of Public Health

Approvals/Date

SFM _____
DSA _____
Code _____
Seismic _____
Health _____

This application is being returned to the Applicant and issuance of Permit is withheld until above-noted agency approval is provided or the following conditions are met:

Conditions: _____

Reviewed: _____
Campus Deputy Building Official Date

Inspections:

- As noted above
- SFM
- Plumbing
- Electrical
- Special

Project Value: \$ _____ 2% Fee \$ _____

The above-named project has been reviewed and found in conformance with the applicable codes and standards by those authorities having jurisdiction established by statute and University policy. If noted above that particular outside reviews are determined to be inapplicable, I have determined through direct review and personal knowledge that the project is compliant with all governing codes and standards.

Approved: _____
Campus Deputy Building Official Date