

REQUEST FOR MODIFICATION OF BUILDING ORDINANCES

UNDER AUTHORITY OF L.A.M.C. SECTION 98.0403

PERMIT APP. #:		DATE:																																				
JOB ADDRESS:																																						
Tract:		Block:																																				
		Lot:																																				
Owner:		Petitioner:																																				
Address:		Address:																																				
City	State	Zip	Phone																																			
REQUEST (SUBMIT PLANS OR ADDITIONAL SHEETS AS NECESSARY)		CODE SECTIONS: L.A.M.C 94.718.0; 94.721.1																																				
Request to maintain a private building sewer which crosses lot lines.																																						
JUSTIFICATION (SUBMIT PLANS OR ADDITIONAL SHEETS AS NECESSARY)																																						
A covenant and agreement has been filed with the Office of the County Recorder of Los Angeles to allow the right of access to maintain the sewer.																																						
Owner/Petitioner Name (Print)		(Signature)	Position																																			
FOR CITY DEPARTMENT'S USE ONLY BELOW THIS LINE																																						
Concurrences required from the following Department(s)																																						
☐ Los Angeles Fire Department	Print Name _____	Sign _____	Approved ☐ Denied ☐																																			
☐ Public Works Bureau of Engineering	Print Name _____	Sign _____	Approved ☐ Denied ☐																																			
☐ Department of City Planning	Print Name _____	Sign _____	Approved ☐ Denied ☐																																			
☐ Department of County Health	Print Name _____	Sign _____	Approved ☐ Denied ☐																																			
☐ Other _____	Print Name _____	Sign _____	Approved ☐ Denied ☐																																			
DEPARTMENT ACTION ☐ GRANTED ☐ DENIED Reviewed by: (Staff) (print) _____ Sign _____ Date _____ Action taken by: (Supervisor) (print) _____ Sign _____ Date _____																																						
NOTE: IN CASE OF DENIAL, SEE PAGE #2 OF THIS FORM FOR APPEAL PROCEDURES																																						
CONDITIONS OF APPROVAL (Continued on Page 2): A Covenant and Agreement shall be filed with the Office of the County Recorder of Los Angeles to allow the right of access to maintain the sewer.		For Cashiers Use Only (PROCESS ONLY WHEN FEES ARE VERIFIED)																																				
FEES <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Appeal Processing Fee.. (No. of Items) =</td> <td style="width: 10%;">1</td> <td style="width: 10%;">X \$130 + \$39/addl</td> <td style="width: 10%;">=</td> <td style="width: 30%; text-align: right;">130.00</td> </tr> <tr> <td>Inspection Fee (No of Insp.) =</td> <td>0</td> <td>X \$ 84.00</td> <td>=</td> <td style="text-align: right;">0.00</td> </tr> <tr> <td>Research Fee ... (Total Hours Worked) =</td> <td>2</td> <td>X \$104.00</td> <td>=</td> <td style="text-align: right;">208.00</td> </tr> <tr> <td>Subtotal</td> <td></td> <td></td> <td>=</td> <td style="text-align: right;">338.00</td> </tr> <tr> <td>Surcharge (One Stop).....</td> <td></td> <td>X 2%</td> <td>=</td> <td style="text-align: right;">6.76</td> </tr> <tr> <td>Surcharge (Systems Development).....</td> <td></td> <td>X 6%</td> <td>=</td> <td style="text-align: right;">20.28</td> </tr> <tr> <td>Total Fees</td> <td></td> <td></td> <td>=</td> <td style="text-align: right;">365.04</td> </tr> </table> Fees verified by: _____ Print and Sign _____				Appeal Processing Fee.. (No. of Items) =	1	X \$130 + \$39/addl	=	130.00	Inspection Fee (No of Insp.) =	0	X \$ 84.00	=	0.00	Research Fee ... (Total Hours Worked) =	2	X \$104.00	=	208.00	Subtotal			=	338.00	Surcharge (One Stop).....		X 2%	=	6.76	Surcharge (Systems Development).....		X 6%	=	20.28	Total Fees			=	365.04
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Total Fees			=	365.04																																		

Permit App #:

Job Address:

CONDITIONS OF APPROVAL (Continued from Page 1)

CITY OF LOS ANGELES BOARD OF BUILDING AND SAFETY/DISABLED ACCESS COMMISSION APPEAL FORM

(Must be Attached to the Modification Request Form, Page 1)

AFFIDAVIT – LADBS BOARD OF BUILDING AND SAFETY COMMISSIONERS – RESOLUTION NO. 832-93

I, _____ do state and swear as follows:

(Print or Type Name of the Person Signing this Form)

1. The name and mailing address of the owner of the property (as defined in the resolution 832-93) at _____ as shown on the appeal application (LADBS Com 31) are correct, and
2. The owner of the property as shown on the appeal application will be made aware of the appeal and will receive a copy of the appeal.

I declare under PENALTY OF PERJURY that the foregoing is true and correct.

Owner's Name(s) _____
(Please Type or Print) _____ (Please Type or Print)Owner's Signature(s) _____ (Two Officers' Signatures Required for Corporations)
(Please Sign)Name of Corporation _____
(Please Print Name of Corporation) _____ (Please Type or Print)

Dated this _____ day of _____ 20_____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT-----SIGNATURE(S) MUST BE NOTARIZED

State of CALIFORNIA County of _____ on _____before me, _____, personally appeared _____
Name, Title of Officer (e.g. Jane Doe, Notary Public) Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument in person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing is true and correct.

WITNESS my hand and official seal.

Signature

APPEAL OF DEPARTMENT ACTION TO THE BOARD OF BUILDING AND SAFETY COMMISSIONERS/DISABLED ACCESS APPEALS COMMISSION

Applicant's Name _____

Applicant's Title _____

Signature _____

Date _____

FEES

Board Fee	(No. of Items)	X	\$130.00	=	0.00
Inspection Fee	(No of Insp.) =	X	\$84.00	=	0.00
Research Fee ...	(Total Hours Worked) =	X	\$104.00	=	0.00
Subtotal				=	0.00
Surcharge (One Stop)		X	2%	=	0.00
Surcharge (Systems Development)		X	6%	=	0.00
Total Fees				=	0.00

Fees verified by:

Print and Sign _____

For Cashiers Use Only

(PROCESS ONLY WHEN FEES ARE VERIFIED)