City of La Mirada
County of Los Angeles
Department of Public Works
Building and Safety Division
http://dpw.lacounty.gov/bsd/

Plan Check No._____

Disclaimer: Permits are public records and may be posted to the Internet for Public review.

APPLICATION FOR BUILDING PERMIT

PLEASE FILL OUT COMPLETELY IN INK

Project Address:	**City:**
Zip:	
Assessor Parcel Number:	Cross-St:
Tenant/Project Name:	
Description of Work:	

PROPERTY OWNER

Name:		Owner builder: Yes ☐ No ☐
Address:		Phone:
City:	State:	Zip code:
E-Mail:	Fax:	

APPLICANT INFORMATION (IF DIFFERENT FROM OWNER)

Name:		E-mail:
Address:		Phone:
City:	State:	Zip Code:

CONTRACTOR INFORMATION

Name:		E-mail:
Address:		Phone:
City	State:	Zip Code:
State License No.:	Class:	Exp. Date:
Workers Compensation Carrier:	Policy No.	Exp. Date:

ARCHITECT/ENGINEER/DESIGNER INFORMATION

Name:		
Address:		E-mail:
City:	State:	Zip code:
State License No.:	Exp. Date:	Phone:

I, the applicant/owner of the property located as noted as project address, acknowledge that I am aware approval from the Department of Regional Planning, Fire Department, Health Department, and any other agencies indicated on the agency referral form are required prior to the issuance of the building/grading permit. I hereby choose to submit plans for building/grading plan check prior to obtaining the necessary approvals of the agencies provided on the agency referral form. Furthermore, I am aware that if the building/grading plans have been review and I cannot obtain the necessary approvals from the other agencies, the fees paid to Building and Safety Division for plans will be forfeited. I understand that additional plan check fees will apply if the plans submitted are modified in order to obtain approvals from other agencies. Also, plan check is valid for one year; additional fees may be required after one year for renewal.

Applicant/Owner Signature: _____ Date:

Construction Cost: (material & labor)	New building/Addition (sq. ft.):	Remodel/TI (sq. ft.):
New Garage (sq. ft.):	Patio Cover/Deck (sq. ft.):	Number of Stories:
Construction Type:	Occupancy group:	

Retaining Wall Length/Height:	Fire Zone:	Sewer Map:	Page:
Special Conditions:			

Stat Class:	New or Demo Dwell Units:	CMP Code:
Pool Size (sq. ft.):	Pool type – Residential: ☐ Commercial: ☐	Spa: Y N

DOCUMENT CHECKLIST: (SPECIFY NUMBER OF EACH SUBMITTED)		
Sets Of Plans:	Sets Of Energy Calcs:	Sets Of Structural Calcs:
Sets Of Mechanical Plans:	Sets Of Plumbing Plans:	Sets Of Electrical Plans:
Number Of Soils Reports:	On Cd:	