

30001 Ladyface Court Agoura Hills, CA 91301 (818) 597-7334

PERMIT WORKSHEET

Date		

	see				ype of onstruction	an .
Bldg Addre			-			
Description of Work			16-19-		ecupancy	
		•		3	quare Fee	
				ν	aluation	
Owner Nan and Addres		,		P	hone	
			City	9	itate	Zip
			Oity			
Applicant Nand Address				P	hone	
and Addres						
			City	s	tate	Zip
Contractor and Addres				Р	hone	
			City	s	State 7in	
			•			
State Licen	se No. Licens		Expire Date			
THE STREET STREET, STR	ALSYSTEM	MECHANIC # of Units	AL SYSTEM Description	PLUMBI # of Units	NG SYSTE	M
# of Units	Description (Additions, Commercial, Industrial)	# Of Units	Furnace or A/C compressor	# OI DIAIS	-	prevention device
	Receptacles, switches, outlets		up to 100,000 BTU			ewer backwater valve
	Lighting Fixtures Branch Circuits (In lieu)		100,000 to 500,000 BTU		Bathtub	CWCI DBC/Water Valve
	,		over 500,000 BTU		 	waste system
	Fixed Appliances Water Heater		Air inlets and outlets		Clothesw	<u> </u>
	Dishwasher		Air inlets and outlets by square footage		Dishwash	
	Clotheswasher		Install, relocate, replace vents		Dispensir	
	Disposal		Air handling units		Floor sink	<u> </u>
	Heater		up to 2,000 cfm		Gas syste	em low pressure
	Fan	***************************************	2,000 - 10,000 cfm		Gas syste	em medium or high pressure
· · · · · ·	FAU		over 10,000 cfm		Grey wate	er system
-	A/C		Evaporative cooler		Hose bibs	S
	Oven	-	Ventilation fans single register		Lavatory	
	Hood		Ventilation system		Lawn spri	nkler system
	Range		Spray Booth	_	Potable w	/ater
	Dryer		Hood: residential commercial	-	>1 1/	/2 in2-3 in> 3 in
	Power Apparatus		Bath fan		Rainwate	<u> </u>
	3 to 10 hp		Fire damper		· · · · · · · · · · · · · · · · · · ·	er drainage and/or vent piping
	>10 to 50 hp		Alteration of existing system			ter water piping
	>51 hp	Contract Start Sector between the			Roof drai	n
	Services, switch boards	SEWER SY # of Units	STEM Description		Shower	
	0-300 amps	# 0) Onits			Sink	
	400-1000 amps		Conn. of house sewer to public sewer		Toilet	······································
	>1000 amps		Conn. of addt't work to existing sewer		Trap prim	er
	Temporary power pole and appurtenances		Conn. of sewer to private disposal sys.		Urinal	
-	Miscellaneous conduit/conductors		Installation of private disposal sys.		Waste pr	e treatment intercepter
	Sign with branch circuit		Discon, or abandonment of disp. sys.		Water pre	essure regulator
	Other		Repair or extraction of disposal system	<u> </u>	Water tre	ating system
					Other	
	Sq. Ft. Area New Res. Bldg.				Water	Heater
	Sq. Ft. Area New Res. Accessory Bidg.	Marie 1.01 (Mr. 173 (Mr. 77 - 77				in proposing agency angent of the second of
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ZONING CLEARANCE

30001 Ladyface Court Agoura Hills, CA 91301 (818) 597-7300

Date

PROJECT INFORMATION	® 8 8 8			8 88 8		S. 3333 S. 3	8 8 8	3 8 8 8
Assessor's Parcel No.:					Map No.:		Lot No.:	
Zoning:								
Homeowners Association:	Required	Not Required D		e of HOA:				
Business License:	Required \square	Not Required]	Type:		Submitted:		
SITE PLAN					CODE REQU	REMENTS		3 8 8
Project Description:					· ·	e and Scope of	Work:	
						Retail		New
						Office		Remodel
						Medical		Addition
						Restaurant		Equipment
						Gym/Studio		Signage
						Residential		Accessibility
					Setbacks:		Rear:	
							-	
					Sides Left:		- Right:	
					Square Foota	ge:		
					Proposed:		Existing:	
					Building Heig	<u>ht:</u>		
					Proposed:		Maximum:	
					Lot Coverage	<u>.</u>		
					Proposed:		Maximum:	
					Reference Ca	se No:		
					Conditions of A	Approval Attach	ed	
					Oak Trees:			
					OTP Required			
					OTP Case No:			
					Grading:			
					Grading Quant	tities:		cu.yd.
PARKING	8 8 8 B			1 33 3		S 300 80 1	9 9 9	8 8 8
Non-Residential						Residential		
Office 1/300 sq.ft.	Medica 1/200 sq.f		Restaurant 15/1000 sq.ft.		-			closed Spaces 0'x20' clear space)
1/300 34.11.	1/200 34.1		15/1000 Sq.it.					Covered Space
Showroom	Industria	al	Retail/Gym/Studios		Other			20' min space size)
1/750 sq.ft.	1/500 sq.f	t	1/250 sq.ft.		_1/ sq.ft.		-	
I, the applicant, agree to	o the above-r	nentioned cond	ditions and certify that	at the in	formation prov	rided is true ar	nd accurat	e.
Applicant's Signature:						Date:		
Planner's Signature:						Date:		