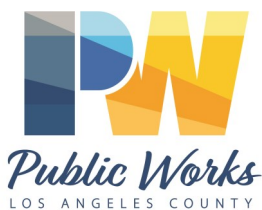


**THE INFORMATION CALLED FOR IN THIS EXAMPLE APPLICATION IS IDENTICAL TO THE INFORMATION REQUIRED IN LA COUNTY'S ONLINE APPLICATION.**

**APPLICANTS MAY SUBMIT AN ONLINE APPLICATION AT [EPICLA.LACOUNTY.GOV](http://EPICLA.LACOUNTY.GOV)**



**Los Angeles County  
Building and Safety**

Plan Check/Permit No. UNC-\_\_\_\_\_

*Disclaimer: Permits are public records and may be posted to the internet.*

**APPLICATION FOR PLUMBING PERMIT**

JOB ADDRESS: 123 Example St UNIT \_\_\_\_\_

CITY/LOCALITY: ExampleTown APN: \_\_\_\_\_

SCOPE OF WORK:  
Plumbing work for 10,432 sf, 6-unit townhomes

**PROPERTY OWNER**

NAME: Jane Example OWNER BUILDER: YES  NO

ADDRESS: 123 Example St PHONE: ( 111 ) 111-1111

CITY: ExampleTown STATE/ZIP: CA EMAIL: Example@internet.com

**APPLICANT INFORMATION (if different from owner)**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE: ( \_\_\_\_\_ ) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE/ZIP: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**CONTRACTOR INFORMATION**

NAME: Construction Company Name

ADDRESS: 123 Construction St PHONE: ( 222 ) 222-2222

CITY: ConstructionTown STATE/ZIP: CA EMAIL: Example@construction.com

LICENSE #: 123456 CLASSIFICATION: B EXP DATE: DEC / 2025

WORK COMP CARRIER: Insurance Company Name POLICY #: ABCD123456 EXP DATE: DEC / 2025

**ARCHITECT / ENGINEER / DESIGNER INFORMATION**

NAME: Design Company Name

ADDRESS: 123 Design St PHONE: ( 333 ) 333-3333

CITY: DesignTown STATE/ZIP: CA EMAIL: Example@design.com

STATE LICENSE #: C-12345 EXP DATE: DEC / 2025

I, the applicant/owner of the property located as noted as project address, acknowledge that I am aware that if the Plumbing plans have been reviewed 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: Jane Example DATE: 01/01/2024

<b>PL01</b> BACKWATER VALVES	_____	Each	<b>PL19</b> WATER HEATER	_____	<u>6</u> Each
<b>PL02</b> BACKFLOW PREV. DEVICE/SPRINKLER	_____	Each	<b>PL20</b> WATER TREATING EQUIPMENT	_____	Sys(s)
<b>PL03</b> BATHTUB / SHOWER	_____	<u>16</u> Each	<b>PL21</b> LOW PRES GAS SYSTEM W/<= 5 OUTLETS	_____	Sys(s)
<b>PL04</b> CLOTHESWASHER (TRAY / STANDPIPE)	_____	<u>6</u> Each	<b>PL22</b> ADDITIONAL LOW PRES. OUTLETS > 5	_____	Each
<b>PL05</b> DISHWASHER	_____	<u>6</u> Each	<b>PL23</b> MED/HIGH PRESSURE GAS SYSTEM	_____	<u>6</u> Sys(s)
<b>PL06</b> DRINKING FOUNTAIN	_____	Each	<b>PL24</b> ADDITIONAL FEE FOR EACH OUTLET	_____	Each
<b>PL07</b> FLOOR DRAIN	_____	Each	<b>PL25</b> GAS METER (PRIVATE)	_____	<u>6</u> Mtr(s)
<b>PL08</b> FLOOR SINKS	_____	Each	<b>PL26</b> GAS REGULATOR	_____	<u>6</u> Reg(s)
<b>PL09</b> HOSE BIBB	_____	<u>6</u> Each	<b>PL27</b> DRAINAGE/VENT PIPE REPAIR/ALT	_____	Sys(s)
<b>PL10</b> INTERCEPTOR (CLARIFIER)	_____	Sys(s)	<b>PL28</b> GREYWATER SYSTEM	_____	Sys(s)
<b>PL11</b> LAVATORY / SINK	_____	<u>34</u> Each	<b>PL29</b> WATER PIPE REPLMNT (BRANCH / FIX)	_____	Each
<b>PL12</b> MISCELLANEOUS FIXTURE	_____	Each	<b>PL30</b> OTHER WATER PIPINIG <=1 1/2 INCH	_____	Line(s)
<b>PL13</b> PRESSURE REG.—PRV / WATER	_____	Each	<b>PL31</b> OTHER WATER PIPING 2-3 INCH	_____	Line(s)
<b>PL14</b> ROOF DRAIN	_____	Each	<b>PL32</b> OTHER WATER PIPING OVER 3 INCH	_____	Line(s)
<b>PL15</b> SOLAR WATER HEATING SYSTEM	_____	Sys(s)			
<b>PL16</b> SWIM POOL TRAP AND RECPTOR	_____	Sys(s)			
<b>PL17</b> TRAP PRIMER	_____	Sys(s)			
<b>PL18</b> WATER CLOSET / URINAL / BIDETS	_____	<u>22</u> Each			

### FOR BUILDING AND SAFTEY USE

<b>PL33</b> ADDNL PC (COMB WASTE & VENT)	_____	Sys(s)	<b>PL41</b> PC INVD GREYWATER SYSTEM	_____	Sys(s)
<b>PL34</b> ADDNL PC EARTHQUAKE VALVE ONLY	_____	Each	<b>PL42</b> SUPPLEMENTAL PLANCHECK FEE	_____	Hour(s)
<b>PL35</b> ADDNL PC (CHEMICAL WASTE)	_____	Sys(s)	<b>PL43</b> INVEST NO PERMIT R3 OWNER-BLDR	_____	Each
<b>PL36</b> ADDNL PC (RAINWATER SYSTEM)	_____	Sys(s)	<b>PL44</b> INVESTIGATION FEE (OTHER OCC)	_____	Each
<b>PL37</b> PC INVD COMBO WASTE & VENT	_____	Sys(s)	<b>PL45</b> NON-COMPLIANCE (R-3 OCCUPANCY)	_____	Each
<b>PL38</b> PC INVD EARTHQUATE VALVE GAS SY	_____	Each	<b>PL46</b> NON-COMPLIANCE (OTHER OCCUPANCY)	_____	Each
<b>PL39</b> PC INVD CHEMICAL WASTE SYSTEM	_____	Sys(s)	<b>PL47</b> BOARD OF APPEALS FEE	_____	
<b>PL40</b> PC INVD RAINWATER SYSTEM	_____	Sys(s)	<b>PL48</b> PC ALT MTL/MTH/MDF 1ST CRG 2HR MIN.	_____	Hour(s)