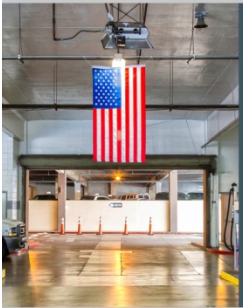


OC Public Works

Integrity, Accountability, Service, Trust



Permit A
^c

ocpublicworks.com

OC Development Services

714.667.8888 714.667.8885

myOCeServices.ocgov.com



Today's Date: _____ Permit #: _____

<input type="checkbox"/> RESIDENTIAL (RS)	<input type="checkbox"/> PLUMBING (PB)
<input type="checkbox"/> NON-RESIDENTIAL (NR)	<input type="checkbox"/> MECHANICAL (ME)
<input type="checkbox"/> GRADING (Preliminary) (GA)	<input type="checkbox"/> ELECTRICAL (EL)
<input type="checkbox"/> GRADING (Precise) (GB)	<input type="checkbox"/> SWIMMING (SW)
<input type="checkbox"/> LANDSCAPING (LS)	<input type="checkbox"/> SOLAR (SL)
<input type="checkbox"/> RESIDENTIAL TRACT (RT)*	<input type="checkbox"/> DEMOLITION (DM)
<input type="checkbox"/> FENCE, WALL, RETAINING WALL (RW)*	<input type="checkbox"/> SIGN (SB)
	<input type="checkbox"/> OTHER

*(Separate attachment required for multiple submittal)

Address of Project: _____

Address	City	Zip
Legal Description: _____	Assessors Parcel Number (APN): _____	
Location of Site (Decimal Degrees): _____ / _____		
Latitude		Longitude
Project Description: _____		

Owner Name: _____ Phone Number: _____

Owner Address: _____

Address	City	Zip
---------	------	-----

Contractor: _____ License #: _____

Address: _____ Phone Number: _____

Agent/Contact Person: _____ **Affiliation:** _____

Phone Number: _____ Fax: _____ Email: _____

ARCHITECT: / / / /

Name	License #	Street#	City	Phone #
------	-----------	---------	------	---------

ENGINEER: _____ / _____ / _____ / _____

Name	License #	Street#	City	Phone #
------	-----------	---------	------	---------

SOILS ENGINEER: / / /

Name	License #	Street#	City	Phone #
------	-----------	---------	------	---------

Permit Application

Applicable to Grading Permits ONLY

ENGINEERING

GEOLOGIST: _____ / _____ / _____ / _____ / _____
 Name License Street# City Phone#

CUBIC YARDAGE: CUT: _____ FILL: _____ EXPORT: _____

PROJECT ACERAGE: _____ WATER DISCHARGE I.D. NUMBER (WDID): _____

TOTAL SITE ACREAGE: _____ DISTRIBUTED SITE ACREAGE: _____

This section must be completed by County Property Permits (CPP) staff for grading & landscape applications

- ☐ CPP PERMIT NOT REQUIRED
 ☐ NO DECISION-ADDITIONAL INFORMATION NEEDS TO BE SUBMITTED
☐ CPP PERMIT FOR ENCROACHMENT PERMIT IS REQUIRED
☐ CPP APPLICATION HAS BEEN SUBMITTED

CPP STAFF NAME: _____

PERMIT NUMBER: _____ DATE AND INITIAL: _____

I CERTIFY NO WORK SHALL OCCUR IN COUNTY RIGHT OF WAY AND/OR EASEMENTS.

Signature

Date

Applicable to Sign Permits ONLY

TENANT/BUSINESS NAME: _____

OCCUPANCY PERMIT NUMBER: _____

SIGNAGE ☐ Wall Sign ☐ Freestanding ☐ Single Face ☐ Double Face ☐ Illuminated ☐ Non-Illuminated
 DETAIL:

Height: _____ Length: _____ Sq Ft: _____ Ground Clearance: _____

ADDITIONAL INFORMATION (i.e. Sign Copy):

DECLARATION

DECLARATION:

I declare to the best of my knowledge that the information I have presented on this form and attached material is true and correct. I also understand that additional data and information may be required prior to final approval of this application and that insufficient information/documents may delay the plan preview process.

Print Name

Signature

Date

STAFF USE ONLY

☐ OTC ☐ PLAN CHECK ☐ PLANNING APPLICATION ☐ PCRA ☐ CE

SETBACKS

ZONING: _____ ☐ Coastal ACTUAL: _____ REQUIRED: _____

APN: _____ ☐ Flood Plain FRONT _____

LEGAL: _____ SIDE (R) _____

PA/CP: _____ ☐ Required SIDE (L) _____

PLANNER'S NAME: _____ REAR _____

APPLICATION COMPLETE/
CUSTOMER CARE STAFF NAME

(per related checklist) _____ INITIAL: _____ DATE: _____

Designation of Financially Responsible Party

As stated in the Board-approved Resolution, the County's OC Development Services operates by recording actual costs against a deposit for grading and planning services. Thus, it is required that each permit or record maintained by Planning have a Financially Responsible Party (FRP) identified.

Per the County Ordinance, the FRP and the owner will receive all official communications regarding fiscal matters, including notices of low balances and additional requests for deposits and copies of permits. The FRP will also receive any refunds, if applicable. Once the FRP is identified, a confirmation notice will be sent in which the named FRP will have 10 days to notify the County of any errors. If the designation is contested, all work on the permit(s) may be stopped until this issue is resolved.

Permit / Record # (s)

Financially Responsible Party

As The ☐ Applicant* ☐ Owner ☐ Contractor ☐ Other* _____ I Designate the
(Specify)

Financially Responsible Party to be: _____

Contact Person/Agent of this application to be _____

Contact Information

☐ Applicant* ☐ Owner ☐ Contractor ☐ Other* _____

Name _____

Company / Business Name _____

Address _____

City, State, Zip _____

Phone # _____

Email Address _____

PRINT NAME

SIGNATURE

DATE

Planned Communities Reimbursement Agreement (PCRA):

☐ Y

☐ N

Trust Account Name/Number: _____ (Associated for reference)*

**Automatic Trust Account Replenishment requires a separate form.*

County Use Only

☐ New Application

☐ Revision to current Application

Received By: _____ Date: _____ Role Updated in APPS: _____

* Any FRP other than the owner or a licensed contractor must have notarized authorization to complete any form on behalf of the owner or licensed contractor.

Permit and Plan Check Process for Occupancy Permits

OCCUPANCY PERMITS WITHIN A BASIC BUILDING

Occupancy Permits: Permitted work shall be inspected and final approval granted PRIOR to the issuance of an Occupancy Permit. Note: Original, basic buildings are not checked or inspected for a specific occupancy.

PROCEDURE FOR OBTAINING OCCUPANCY PERMIT: Submit three (3) complete sets of PLANS and specifications as noted below. Clearance from each area in sequence listed below is required prior to the issuance of the occupancy permit. All documents, including each sheet of plans, are to be identified with job address and suite number.

1. LAND USE:

- A. Application (attached).
- B. Three (3) sets of PLANS showing a specific area to be occupied within the shell (including floor plan and plot plan, sample plot plan attached).
- C. Three (3) copies of a letter (sample attached) from the proposed occupant which:
 - (1) Fully describes the type of business.
 - (2) States the total number to be employed, indicating the number of each gender.
 - (3) States the quantity and flashpoint of flammable materials to be stored or used in the building, if any.
- D. A notarized letter from the property owner or a Rental / Lease agreement giving the proposed occupant permission to occupy the subject building or suite.

2. PLAN CHECK – PRELIMINARY REVIEW:

- A. Three (3) complete architectural PLANS of the occupancy showing: to scale, double line floor plan of partitions, use of each room, exits from basic building, proposed construction, all equipment, fire rating of corridors, beams, joists, etc.
- B. Specifications for materials or systems.

3. MECHANICAL AND PLUMBING:

- A. Plumbing plans showing fixtures, main drain and branches, water and gas pipes with sizes and types of materials for systems. Delineate between new and existing.
- B. Mechanical plans showing mechanical equipment, capacities, size and locations of all ducts, fire dampers and specifications for the equipment. Provide calculations and forms to show compliance with California Energy Efficiency. Delineate between new and existing.

4. ELECTRICAL:

- A. Electrical PLANS showing service diagram, wire sizes, service capacity and location, switches, fixtures, electrical equipment, and new and existing loads. Electrical plans showing: Feeder conduit and wire sizes and feeder over current protection, operating voltage, phase and load of equipment and fixtures; panel schedule(s); locations of all fixtures, outlets, utilization equipment, distribution of equipment and service equipment; distinction between existing, new or relocated fixtures or equipment: California Energy Efficiency Forms Ltg. -1 and Ltg. 2; name and phone number of designer.

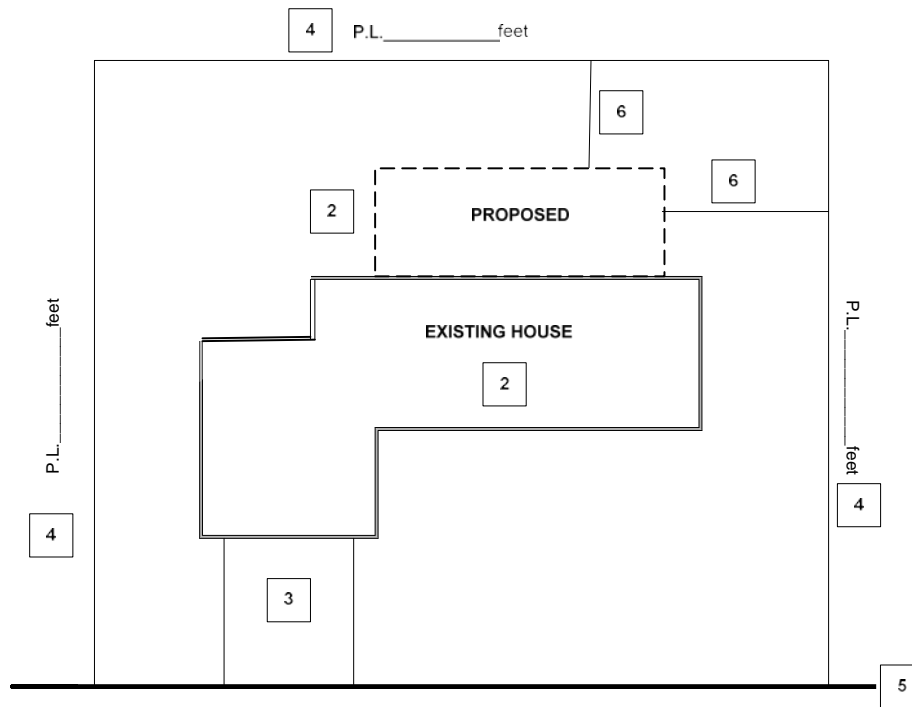
5. FEES:

- Plan check and building permit fees.

6. FINAL INSPECTION:

- After building is completed and ready for occupancy, which includes provisions for lot drainage and grading and clearances from other regulating County agencies (Health Department and Fire Marshal) involved with the project, have been obtained. The order of called final inspections may be at the builder's convenience, however, please remember that all final inspections must be made and cleared before utilities are released and certificates of Occupancy issued. This includes any zoning and/or grading final.

Typical Plot Plan



STREET NAME



Scale: _____ = _____

1. Project Location information (i.e. APN/ Tract and Lot).
2. Building footprints and rooflines – Location and use of all existing and proposed structures and landscape areas, including size, dimensions and distances to property lines.
3. Access – Including driveways, existing and proposed.
4. Property lines – Include and label all building site dimensions and ownership boundaries.
5. Ultimate street right-of-way lines – Including name, location, size and distance from property lines, and location of sidewalks, curb and gutter, and edge of pavement, public or private.
6. Show setbacks from property lines.
7. Easements – Including location, purpose, and dimensions. (i.e. Flood Plain, Utilities, Ingress/Egress, Open Space Conservation / Scenic, etc.)
8. Fencing and Walls –Include retaining walls, existing and proposed, with heights from grade inside the outside at all turning points and the center points of all straight sections.

Sample Business and Occupancy Declaration Letter

To: The County of Orange

Date: (insert date)

Permit Number: (insert permit number assigned at time of application)

It is the intention of (inset tenant's name) to begin operation of a business located at: (insert business address). The business name is (insert business name). The business phone number is (insert business phone number). The business mailing address is (insert business mailing address).

Part A. Business Information:

A description of the business is as follows: (specifically detail the business description including information such as the nature of the business and general category of business). The number of employees employed at this business is (insert number of employees and group by gender, i.e.- 5 total; 3 males and 2 females). The hours of business operation are (insert hours of operation).

A description of the adjoining tenant spaces is as follows:

To the left of this business: (describe the business to the left of this business if applicable).

To the right of this business:

Above this business:

Below this business:

In front of this business:

Behind this business:

The quantity and flashpoint of hazardous or flammable materials stored or used is as follows (insert information regarding the quantity and flashpoint of hazardous or flammable materials stored or used as a part of this business). Additional pertinent information is as follows (insert any additional pertinent information not included elsewhere in this letter).

Part B. Building Information:

The total square footage of floor area is (insert total square footage of floor area). The square footage breakdown is as follows: (insert total square footage for the following categories: office, retail, warehouse, other). This building (enter either IS or IS NOT) equipped with fire sprinklers.

(Tenant Signature and Printed Name)