



DEPARTMENT OF ENVIRONMENTAL SERVICES BUILDING AND SAFETY DIVISION

PERMIT - New Multi-Family Dwell.

Inspection Request L	ine (805) 583-6373	Requests must be n	nade before 4:0	00PM for inspect	ion on the next working	ng day.	
	ddress: PATRICIA AVE SIMI		Permit Issued On:			12/10/2020	
APN: APPLICANT:		Phone:					
Owner: Address:		Phone: City & S	State: ENCINO (CA	Zip:		
Tenant: Address:			State:		Zip:		
Contractor Name: R C I BU Address:	ILDERS INC	City & S	State:				
Architect/Designer: Engineer:		Phone: Phone:					
PROJECT SCOPE: Zoning Clearance No.:Z2020- Type of Construction: V A Occupancy Types: R-2/U Fire Sprinklers Reqd: Y Flood Zone: N WORK DESCRIPTION CONSTRUCT 63,219 SQ UNITS; 21-ONE BEDRO	No. of Stories: Number of Uni Number of Bui Wall length: FT THREE STORY R-	its; 0 Gar ildings: 1 Der 0 Alte	Iding Square Foota age Square Footag no Square Footag eration Square Foo DWELLING	e: 3806 e: 0 tage: 0		0 0 0	
CONDITIONS:							
VALUATION: an Check Fee: Addl P/C Fee: Electrical P/C Fees: Addl Elec P/C Fees: Mechanical P/C Fees: Addl Mech P/C Fees Plumbing P/C Fees: Addl Plmb P/C Fees:	\$0.00 Addl Elec \$0.00 Mechanica \$0.00 Addl Mech \$0.00 Plumbing I \$0.00 Addl Plum		\$0.00 \$64,213.44 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	New Dwelling Un New Mobile Home Fire Protection Fee S.M.I.P. Fee (State CA Green Fee (State Records Retention Permit Automation Zoning Clearance	e Unit Fee: e: e); ate): Fee: n Fee:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00	
Addl Building Insp:	\$0.00 OFFICE U Issued by:	SE ONLY	(initial)	Total Fees Payments: Balance:	: \$64,213.4 \$64,213.4 \$0.00	4	
I HEREBY AGREE, THAT FOR THE DURATION OF THE CONSTRUCTION PHASE OF THIS PROJECT, I WILL IDENTIFY ALL POTENTIAL POLLUTANT SOURCES ON THIS PROJECT THAT MAY NEGATIVELY AFFECT THE QUALITY OF DISCHARGES TO THE STORM WATER AND WILL MONITOR AND MAINTAIN APPROPRIATE BEST MANAGEMENT PRACTICES (BMP'S) TO EFFECTIVELY PREVENT THE ENTRY OF POLLUTANTS FROM THE CONSTRUCTION SITE INTO THE STORM DRAIN SYSTEM(INITIAL)							
AS STATED IN THE CALIFO AS DEFINED IN SECTION 4 INQUIRY IDENTIFICATION	216, OR ANY STATE AG	ENCY, SHALL BE VA	LID UNLESS T	HE APPLICANT I	HAS BEEN PROVIDED	AL AGENCY, AN INITIAL	
I certify that I have read this app building construction, and hereb	lication and state that the abo	ve information is correct.	I agree to comply	y with all city and co	unty ordinances and state I	aws relating to	
NOTICE: THIS PERMIT BE OR IF CONSTRUCTION OR	COMES NULL AND VOID	IF WORK OR CONS	TRUCTION AUT	HORIZED IS NOT	COMMENCED WITHI	N 180 DAYS, MMENCED.	
Signature of Applicant:	1			ne No.:			
FOR OFFICE USE ONLY: jinal Inspection By:			Dat	ie: 3-31	22		