



APPLICATION FOR
MISCELLANEOUS PERMIT
CITY OF LAKEWOOD
(562) 866-9771 – 2350

PLEASE FILL OUT THE FOLLOWING INFORMATION

JOB ADDRESS: _____ UNIT NO.: _____

CITY/LOCALITY: _____ CROSS – ST: _____

ASSESSOR INFORMATION NO.: _____ -- _____ -- _____

TENANT: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI)

OWNER'S NAME: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI)

OWNER/BUILDER: YES _____ NO _____

ADDRESS: _____

PHONE (____) _____ Ext. _____

APPLICANT: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI)

ADDRESS: _____

PHONE (____) _____ Ext. _____

CONTRACTOR: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI)

LIC. NO.: _____ CLASS: _____

ADDRESS: _____

PHONE (____) _____ Ext. _____

ARCH/ENG: _____ (LAST NAME/BUSINESS NAME) _____ (FIRST) _____ (MI)

LIC. NO.: _____ CLASS: _____

ADDRESS: _____

PHONE (____) _____ Ext. _____

WORK DESCRIPTION: _____

VALUATION: _____

BUILDINGS ON LOT: _____

PROJECT SIZE: _____ SQ.FT. NO. OF STORIES: _____ CONSTRUCTION TYPES: _____ OCCUPANCY GROUPS: _____

FOR BUILDING AND SAFETY USE ONLY

TRAILER USE: _____ INSPECTION FOR - GEOLOGY: _____ OCCUPANCY: _____ SAFETY: _____

OTHER: _____

LOT SIZE: _____ X _____ BUILDINGS ON LOT: _____

EXISTING BUILDING USE: _____

BLDG SIZE _____ (SQ. FT) NBR STORIES: _____

USE ZONE: _____ MAP NBR: _____

LIST ITEMS: _____

OCCUP GRP EXIST: _____ NEW: _____ CONSTR TYPE: _____ HIWAY TYPE: _____

SPECIAL COND'S: _____

OCCUP LOAD EXIST: _____ PROPOSED: _____ PRKG SPACES REQ'D: _____ PROV'D: _____

EXIT HARDWARE - NO SPCL KNOWLEDGE: _____ PANIC DEVICE: _____ NBR OF EXITS: _____

LIMITED TIME USE - FROM _____ TO: _____