



# REQUEST FOR MODIFICATION OF BUILDING ORDINANCES

UNDER AUTHORITY OF L.A.M.C. SECTION 98.0403

<b>PERMIT APP. #:</b>	<b>DATE:</b>	<b>For City Dept. Use Only</b>
<b>JOB ADDRESS:</b>		
<b>Tract:</b>	<b>Block:</b>	<b>Electrical</b>
	<b>Lot:</b>	
<b>Owner:</b>	<b>Petitioner:</b>	
<b>Address:</b>	<b>Address:</b>	
City                      State    Zip            Phone	City                      State    Zip            Phone	

REQUEST (SUBMIT PLANS OR ADDITIONAL SHEETS AS NECESSARY)	CODE SECTIONS: N.E.C. 215.2
Permission to apply a demand factor of 0.65 to a group of reefer receptacles and the associated transformer feeder(s).	

JUSTIFICATION (SUBMIT PLANS OR ADDITIONAL SHEETS AS NECESSARY)

Owner/Petitioner Name (Print) \_\_\_\_\_ (Signature) \_\_\_\_\_ Position \_\_\_\_\_

**FOR CITY DEPARTMENT'S USE ONLY BELOW THIS LINE**

Concurrences required from the following Department(s)			Approved	Denied
<input type="checkbox"/> Los Angeles Fire Department	Print Name _____ Sign _____		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Public Works Bureau of Engineering	Print Name _____ Sign _____		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Department of City Planning	Print Name _____ Sign _____		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Department of County Health	Print Name _____ Sign _____		<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Other _____	Print Name _____ Sign _____		<input type="checkbox"/>	<input type="checkbox"/>

<b>DEPARTMENT ACTION</b>	<i>Reviewed by: (Staff) (Print)</i> _____	<i>Sign</i> _____	<i>Date</i> _____
<input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED	<i>Action taken by: (Supervisor) (Print)</i> _____	<i>Sign</i> _____	<i>Date</i> _____

**NOTE: IN CASE OF DENIAL, SEE PAGE #2 OF THIS FORM FOR APPEAL PROCEDURES**

<b>CONDITIONS OF APPROVAL (Continued on Page 2):</b>
1. Permission is granted to apply a demand factor of 0.65 to size the transformer and its feeder only. This demand factor shall not apply to the branch circuits.
2. The power distribution transformer shall be periodically maintained and serviced.
All such work shall be recorded and done by qualified personnel.

**For Cashiers Use Only**  
(PROCESS ONLY WHEN FEES ARE VERIFIED)

FEES (DEPARTMENT USE ONLY)			
Appeal Processing Fee ..(No. of Items) =	1	X \$130 + \$39/addl	= _____
Inspection Fee .....(No of Insp.) =		X \$ 84.00	= _____
Research Fee ... (Total Hours Worked) =		X \$104.00	= _____
Subtotal .....			= _____
Development Services Center Surcharge	X	3%	= _____
Systems Development Surcharge .....	X	6%	= _____
Total Fees .....			= _____
Fees verified by: _____			
Print and Sign _____			

Permit App #:

Job Address:

CONDITIONS OF APPROVAL (Continued from Page 1)

- 3. If frequent tripping of an overcurrent device or abnormal temperature rise is noticed in conductors and transformer, the approval of this variance shall be considered void...
4. The transformer feeding the reefer outlet distribution board shall be equipped with an audible over temperature alarm...
5. The distribution board feeder shall be constantly monitored with an approved device(s) for its actual demand use...
6. When maintaining liquid field transformers, the replaced fluid shall be of an approved, less or non-flammable liquid...

CITY OF LOS ANGELES BOARD OF BUILDING AND SAFETY/DISABLED ACCESS COMMISSION APPEAL FORM

(Must be Attached to the Modification Request Form, Page 1)

AFFIDAVIT - LADBS BOARD OF BUILDING AND SAFETY COMMISSIONERS - RESOLUTION NO. 832-93

I, \_\_\_\_\_ do state and swear as follows:

(Print or Type Name of the Person Signing this Form)

- 1. The name and mailing address of the owner of the property (as defined in the resolution 832-93) at \_\_\_\_\_ as shown on the appeal application (LADBS Com 31) are correct, and
2. The owner of the property as shown on the appeal application will be made aware of the appeal and will receive a copy of the appeal.

I declare under PENALTY OF PERJURY that the forgoing is true and correct.

Owner's Name(s) \_\_\_\_\_ (Please Type or Print)

Owner's Signature(s) \_\_\_\_\_ (Please Sign) (Two Officers' Signatures Required for Corporations)

Name of Corporation \_\_\_\_\_ (Please Print Name of Corporation)

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

CALIFORNIA ALL-PURPOSE ACKNOWLEDGEMENT-----SIGNATURE(S) MUST BE NOTARIZED

State of CALIFORNIA County of \_\_\_\_\_ on \_\_\_\_\_

before me, \_\_\_\_\_, personally appeared \_\_\_\_\_ Name, Title of Officer (e.g. Jane Doe, Notary Public) Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument in person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing is true and correct.

WITNESS my hand and official seal. \_\_\_\_\_ Signature \_\_\_\_\_

As a covered entity under Title II of the Americans with Disabilities Act, the City of Los Angeles does not discriminate on the basis of disability and, upon request, will provide reasonable accommodation to ensure equal access to its programs, services and activities.

APPEAL OF DEPARTMENT ACTION TO THE BOARD OF BUILDING AND SAFETY COMMISSIONERS/DISABLED ACCESS APPEALS COMMISSION

Applicant's Name \_\_\_\_\_ Applicant's Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Table with 5 columns: Fee Name, Quantity, Unit Price, Total Price, and Verification. Rows include Board Fee, Inspection Fee, Research Fee, Subtotal, Development Services Center Surcharge, Systems Development Surcharge, Total Fees, and Fees verified by.

For Cashiers Use Only (PROCESS ONLY WHEN FEES ARE VERIFIED)