



**DEPARTMENT OF BUILDING AND SAFETY**  
**APPLICATION FOR PLUMBING**  
**PERMIT OR PLUMBING PLAN CHECK**  
 For Plumbing Code questions call (213) 482-0061

**FOR OFFICE USE ONLY**

PCAM #: \_\_\_\_\_ Q-Matic #: \_\_\_\_\_

PCIS #: \_\_\_\_\_

**LADBS Express Permit may be  
 obtained online at LADBS.ORG**

**PROJECT ADDRESS**

\_\_\_\_\_

Number & Street Name City Zip Code Unit No.

**WORK DESCRIPTION** Briefly describe the scope of work: \_\_\_\_\_

Check one:

Single Family Dwelling (S.F.D.) /Duplex

Apartment/Condo

Retail, Office, Warehouse

Food & Beverage Facilities: Approval required from L.A. County Health Dept. (626) 430-5565 and L.A. City Bureau of Sanitation Industrial Waste (323) 342-6200.

**APPLICANT**

\_\_\_\_\_

Name Number & Street Name

\_\_\_\_\_

City & Zip Code Phone Number Email

**Owner/Builder Agent.** Original authorization letter and Owner-Builder Declaration is required at the permit issuance for owner occupied S.F.D.

**Contractor Agent.** A current, original notarized authorization letter dated within the past year is required at the permit issuance.

**PROPERTY OWNER**

\_\_\_\_\_

Name \* Number & Street Name \* City & Zip Code Phone Number

\*  **Same as Project Address.** The property owner may obtain a permit as Owner/Builder on a Single Family Dwelling if they can provide proof of ownership AND proof that they currently reside at the project address and have lived at that address for at least 12 months.

**CONTRACTOR**

\_\_\_\_\_

Name Number & Street Name City & Zip Code Phone Number

\_\_\_\_\_

City of L.A. Business Tax State License Number \*\* Class Email

Number

\_\_\_\_\_

Worker's Compensation Carrier Policy Number Expiration Date

\*\* **General Contractor** must obtain a permit for at least two trades (E, H, P, roofing, etc.) other than framing/carpentry for the same project address.

**ARCHITECT or ENGINEER**

\_\_\_\_\_

Name Number & Street Name City & Zip Code Phone Number

\_\_\_\_\_

State License Number Expiration Date

**APPLICATION PROCESSING INFORMATION**

OK for Cashier: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Fee – Subtotal	
Permit Issuing Fee	
Permit Supplemental Issuing Fee	
Permit Investigation Fee	
Plan Check Fee – Subtotal	
Additional Plan Check Hours	
Off-Hour Plan Check	

**For Cashier's Use Only**

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.

## PERMIT LIST OF EQUIPMENT

Please enter the number of items in each box below. Leave blank if not applicable.

Any entry in these boxes    may require plan check.

<b>Install Original (New) Fixtures – A Building Permit is Required</b>						
Bathubs <input style="width: 100%; height: 20px;" type="text"/>	Clothes Washers <input style="width: 100%; height: 20px;" type="text"/>	Dental Units/ Cuspidors <input style="width: 100%; height: 20px;" type="text"/>	Dish Washers <input style="width: 100%; height: 20px;" type="text"/>	Drinking Fountains <input style="width: 100%; height: 20px;" type="text"/>	Floor Drains/ Sinks <input style="width: 100%; height: 20px;" type="text"/>	Garbage Disposals <input style="width: 100%; height: 20px;" type="text"/>
Kitchen Sinks <input style="width: 100%; height: 20px;" type="text"/>	Other Sinks/ Lavatories <input style="width: 100%; height: 20px;" type="text"/>	Showers <input style="width: 100%; height: 20px;" type="text"/>	Toilets <input style="width: 100%; height: 20px;" type="text"/>	Urinals <input style="width: 100%; height: 20px;" type="text"/>	All Other Fixtures <input style="width: 100%; height: 20px;" type="text"/>	

<b>Replace or Remove Existing Fixtures</b>						
Bathubs <input style="width: 100%; height: 20px;" type="text"/>	Clothes Washers <input style="width: 100%; height: 20px;" type="text"/>	Dental Units/ Cuspidors <input style="width: 100%; height: 20px;" type="text"/>	Dish Washers <input style="width: 100%; height: 20px;" type="text"/>	Drinking Fountains <input style="width: 100%; height: 20px;" type="text"/>	Floor Drains/ Sinks <input style="width: 100%; height: 20px;" type="text"/>	Garbage Disposals <input style="width: 100%; height: 20px;" type="text"/>
Kitchen Sinks <input style="width: 100%; height: 20px;" type="text"/>	Other Sinks/ Lavatories <input style="width: 100%; height: 20px;" type="text"/>	Showers <input style="width: 100%; height: 20px;" type="text"/>	Toilets <input style="width: 100%; height: 20px;" type="text"/>	Urinals <input style="width: 100%; height: 20px;" type="text"/>	All Other Fixtures <input style="width: 100%; height: 20px;" type="text"/>	

<b>Water Heaters and Gas Systems</b>							
Water Heater and Vent <input style="width: 100%; height: 20px;" type="text"/>	Earthquake Valve <input style="width: 100%; height: 20px;" type="text"/>	Excess Flow Valve <input style="width: 100%; height: 20px;" type="text"/>	Gas Pressure Regulator <sup>(1)</sup> <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Number of Gas Outlets <sup>(1)</sup> <input style="width: 100%; height: 20px;" type="text"/>	Methane Gas Extract. Syst. <sup>(1)</sup> <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Thermal Expansion Tank <input style="width: 100%; height: 20px;" type="text"/>	Heat Exchanger <input style="width: 100%; height: 20px;" type="text"/>

<b>Potable Water System</b>							
Vacuum Breaker/ Hose Bibb <input style="width: 100%; height: 20px;" type="text"/>	Back Flow Device <input style="width: 100%; height: 20px;" type="text"/>	Booster Pump <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	On-Site Water Distribution <input style="width: 100%; height: 20px;" type="text"/>	Pipe Size <sup>(2)</sup> <input style="width: 100%; height: 20px;" type="text"/>	Water Service <input style="width: 100%; height: 20px;" type="text"/>	Pipe Size <sup>(2)</sup> <input style="width: 100%; height: 20px;" type="text"/>	Pressure Regulating Valve <input style="width: 100%; height: 20px;" type="text"/>
Re-Pipe (No. of Fixtures) <input style="width: 100%; height: 20px;" type="text"/>	Domestic Water Storage Tank <sup>(3)</sup> <input style="width: 100%; height: 20px;" type="text"/>	Trap Primers <input style="width: 100%; height: 20px;" type="text"/>	Water Using Device <input style="width: 100%; height: 20px;" type="text"/>	Replace Lawn Sprinkler Control Valves/AVB (Hillside) <sup>(4)</sup> <input style="width: 100%; height: 20px;" type="text"/>		Lawn Sprinkler Control Valves/AVB (Non-Hillside) <input style="width: 100%; height: 20px;" type="text"/>	

<b>Sewer and Waste</b>						
Backwater Valves <input style="width: 100%; height: 20px;" type="text"/>	Building Drains <input style="width: 100%; height: 20px;" type="text"/>	Clarifier/Sand Trap Grease Int. Number <input style="width: 100%; height: 20px;" type="text"/>	Industrial Waste Number <input style="width: 100%; height: 20px;" type="text"/>	Graywater Piping Systems <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Grease Trap <input style="width: 100%; height: 20px;" type="text"/>	Manhole <input style="width: 100%; height: 20px;" type="text"/>
Sewage Ejectors <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Sewer Alter/Repair/Cap <input style="width: 100%; height: 20px;" type="text"/>	Waste & Vent Alter/Repair <input style="width: 100%; height: 20px;" type="text"/>	Connection to Public Sewer <input style="width: 100%; height: 20px;" type="text"/>	Engineering Sewer Number (Entered by Department of Public Works) <input style="width: 100%; height: 20px;" type="text"/>		Dry Sewer <input style="width: 100%; height: 20px;" type="text"/>

<b>Pool and Spa</b>
Public Pool/Spa <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>

<b>Solar Systems</b>
Solar Water Heating System <input style="width: 100%; height: 20px;" type="text"/>

<b>Rainwater Systems</b>		
Rain Water Drains <sup>(5)</sup> <input style="width: 100%; height: 20px;" type="text"/>	Subsurface Drainage Systems <input style="width: 100%; height: 20px;" type="text"/>	Sump Pumps <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>

<b>Miscellaneous</b>			
Change of Address <input style="width: 100%; height: 20px;" type="text"/>	Extra Trip <input style="width: 100%; height: 20px;" type="text"/>	Misc. Permit <input style="width: 100%; height: 20px;" type="text"/>	Transfer of Permit <input style="width: 100%; height: 20px;" type="text"/>

<b>Plan Check Indicators</b>		
Hot and Cold Water Only <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Hot or Cold Water Only <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Waste or Vent Only <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>

<b>Plan Check Items</b>					
Combo Waste & Vent System <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Building Supply <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Irrigation Piping Square Feet <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Soil Remediation System <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Methane Gas Venting System <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>	Sump Pump or Sewage Ejector Syst. <input style="width: 100%; height: 20px; border: 1px dashed black;" type="text"/>

- (1) Medium & high pressure gas and methane systems may require Plan Check.      (4) A new device or system requires Plan Check.  
 (2) Water systems having 2" or larger service may require Plan Check.      (5) Includes roof drains, area drains, deck drains, emergency drains, etc.  
 (3) 120 gallons or less.