

**GPI WAIVER** 

PERMIT NUMBER

## **APPLICATION FOR GPI WAIVER**

INSTRUCTIONS

A. Address all questions to the Grading Division, LADBS, 221 N. Figueroa St., 12th Fl., Los Angeles, CA 90012

Telephone No. (213) 482-0480 or local branch office in Van Nuys or West Los Angeles.

B. Provide copies of the permit, clearance sheet and site plan with project description for GPI waiver determination.

C Please fill out this application with mit number and items "1" thr امطح المحم

| D. Check should be made to the     | =                  |                     | "1" through "6      | o" completed |                  |                   |
|------------------------------------|--------------------|---------------------|---------------------|--------------|------------------|-------------------|
| 1. LEGAL DESCRIPTION               |                    |                     | 2. PROJECT ADDRESS: |              |                  |                   |
| Tract:                             |                    |                     |                     |              |                  |                   |
| Block: Lots:                       |                    |                     | 4. APPLICANT        |              |                  |                   |
| 2. 014/0150                        | Address:           |                     |                     |              |                  |                   |
| 3. OWNER:   Address:               |                    |                     | City: Zip:          |              |                  |                   |
| City: Zip:                         |                    | Phone (Daytime):    |                     | <b>ב</b> וף: |                  |                   |
|                                    |                    |                     | E-mail address:     |              |                  |                   |
| Phone (Daytime):                   |                    |                     | E-Mdll o            | audress:     |                  |                   |
| 5. WORK DESCRIPTION:               |                    |                     |                     |              |                  |                   |
|                                    |                    |                     |                     |              |                  |                   |
|                                    |                    |                     |                     |              |                  |                   |
|                                    |                    |                     |                     |              |                  |                   |
|                                    |                    |                     |                     |              |                  |                   |
|                                    |                    |                     |                     |              |                  |                   |
| 6. Applicant Signature:            |                    |                     |                     |              | Position:        |                   |
|                                    |                    | (DEPA               | RTMENT USE          | ONLY)        |                  |                   |
| REVIEW REQUESTED                   | FEES               | REVIEW REQ          | UESTED              | FEES         | Fee Due:         |                   |
| Soils Engineering                  |                    | No. of Lots         |                     |              | Fee Verified By: | Date:             |
| Geology                            |                    | No. of Acres        |                     |              | (0               | Cashier Use Only) |
| Combined Soils Engr. & Geol.       |                    | Division of Land    |                     |              |                  |                   |
|                                    |                    | 1                   | GPI Waiver          |              | 4                |                   |
| Combined Supplemental              |                    | Expedite            |                     |              | -                |                   |
| Import-Export Route                |                    | Response to Correct | tion                |              | -                |                   |
| Cubic Yards:                       |                    | Expedite ONLY       |                     |              | -                |                   |
|                                    |                    |                     | Sub-total           |              | -                |                   |
|                                    |                    |                     | Surcharges          |              | -                |                   |
| ACTION BY (print name):            |                    |                     | TOTAL FEE           |              | -                |                   |
| THE GPI WAIVER IS:                 | APPROVED           |                     |                     |              |                  |                   |
| APPROVED WITH COM                  | □ BELOW □ ATTACHED |                     |                     |              |                  |                   |
|                                    |                    |                     |                     |              |                  |                   |
|                                    |                    |                     |                     |              | 4                |                   |
| GPI WAIVED BY (signature)          |                    |                     |                     | Date         |                  |                   |
| CONDITIONS:                        |                    |                     |                     |              |                  |                   |
| 1) Please see plan check for posti | ng requireme       | nts, if any.        |                     |              | 1                |                   |
|                                    |                    |                     |                     |              | 4                |                   |
|                                    |                    |                     |                     |              | 4                |                   |
|                                    |                    |                     |                     |              | -                |                   |

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.

PC-GRAD.App21 (Rev 04/06/2021)