REQUEST FOR MODIFICATION OF BUILDING ORDINANCES
UNDER AUTHORITY OF L.A.M.C. SECTION 98.0403

PERMIT
APP. #: DATE:

JOB ADDRESS:

Tract: Block: Lot:

Owner: Petitioner: Address: Address:

City State Zip Phone City State Zip Phone

REQUEST (SUBMIT PLANS OR ADDITIONAL SHEETS AS NECESSARY)
CODE SECTIONS: L.A.M.C. 91.1027.5.2

To allow unprotected openings within 10'-0" of the floor of an exit court in an exterior wall facing an exit court less than 10'-0"
in width.

JUSTIFICATION (SUBMIT PLANS OR ADDITIONAL SHEETS AS NECESSARY)

Sprinklers will be provided over each opening to provide equivalent protection.

Owner/Petitioner Name (Print) (Signature) Position

FOR CITY DEPARTMENT'S USE ONLY BELOW THIS LINE

Concurrences required from the following Department(s)

<table>
<thead>
<tr>
<th>Department</th>
<th>Sign</th>
<th>Approved</th>
<th>Denied</th>
</tr>
</thead>
<tbody>
<tr>
<td>Los Angeles Fire Department</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public Works Bureau of Engineering</td>
<td></td>
<td></td>
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<tr>
<td>Department of City Planning</td>
<td></td>
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<tr>
<td>Department of County Health</td>
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<td></td>
<td></td>
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<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DEPARTMENT ACTION

<table>
<thead>
<tr>
<th>Reviewed by: (Staff) (print)</th>
<th>Sign</th>
<th>Date</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Action taken by: (Supervisor) (print)</th>
<th>Sign</th>
<th>Date</th>
</tr>
</thead>
</table>

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

CONDITIONS OF APPROVAL (Continued on Page 2):

1. A water curtain sprinkler system is installed over each opening on the inside of the building.

FEES

<table>
<thead>
<tr>
<th>Fee Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Appeal Processing Fee (No. of Items)</td>
<td>$130.00</td>
</tr>
<tr>
<td>Inspection Fee (No of Insp.)</td>
<td>$84.00</td>
</tr>
<tr>
<td>Research Fee ... (Total Hours Worked)</td>
<td>$104.00</td>
</tr>
<tr>
<td>Subtotal</td>
<td>$338.00</td>
</tr>
<tr>
<td>Surcharge (One Stop)</td>
<td>$6.76</td>
</tr>
<tr>
<td>Surcharge (Systems Development)</td>
<td>$20.28</td>
</tr>
<tr>
<td>Total Fees</td>
<td>$365.04</td>
</tr>
</tbody>
</table>

Fees verified by:

Print and Sign

PC-STR.Mod49 (Rev 04-19-13)
2. Mechanical plan check approval and permit shall be obtained prior to sprinkler installation.

3. A minimum 18-inch deep draft stop shall be provided immediately adjacent to the protected opening as required by Section 10.14, of Division 20 of the plumbing code.

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:

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) ___________________________________________  _________________________________________________

Owner’s Signature(s)  ___________________________________________   (Two Officers’ Signatures  Required for Corporations)

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

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

Applicant’s Name

Signature

For Cashiers Use Only

PROCESS ONLY WHEN FEES ARE VERIFIED

FEES

Board Fee .......... (No. of Items) X $130.00 = 0.00

Inspection Fee .......... (No of insp.) = X $84.00 = 0.00

Research Fee ... (Total Hours Worked) = X $104.00 = 0.00

Subtotal................................................................. = 0.00

Surcharge (One Stop) ................. X 2% = 0.00

Surcharge (Systems Development) .......... X 6% = 0.00

Total Fees ................................................................................................................ = 0.00

Fees verified by:

Print and Sign

PC-STR.Mod49 (Rev 04-19-13)  Page 2 of 2  www.ladbs.org