



**DEPARTMENT OF BUILDING AND SAFETY**  
**APPLICATION FOR**  
**ELECTRICAL PERMIT**

(Use E<sub>PC</sub> Application for Electrical Plan Check)

**FOR OFFICE USE ONLY**

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     Electric Vehicle  
 Apartment/Condo     Public Right of Way  
 Retail, Office, Warehouse     Equipment     Other

**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 Number \_\_\_\_\_ State License Number \_\_\_\_\_ \*\* Class \_\_\_\_\_ Email \_\_\_\_\_  
 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: \_\_\_\_\_

**For Cashier's Use Only**

<b>Permit Fee – Subtotal</b>	
<b>Permit Issuing Fee</b>	
<b>Permit Supplemental Issuing Fee</b>	
<b>Permit Investigation Fee</b>	
<b>Plan Check Fee – Subtotal</b>	
<b>Additional Plan Check Hours</b>	
<b>Off-Hour Plan Check</b>	

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

For Single or Duplex Family Dwellings Less than 30,000 square feet of area only answer questions 1,6,10 and 12. Fire/Life Safety permit only, just answer question number 9. Events, Miscellaneous, Special Inspections or Communication permits, skip all questions and the indicated quantity limitations.

Yes <input type="checkbox"/> No <input type="checkbox"/>	1. Is this an installation of a renewable energy system (i.e., Solar Photovoltaic, Wind, Fuel Cell, etc.)?
Yes <input type="checkbox"/> No <input type="checkbox"/>	2. Is this a theater or motion picture theater?
Yes <input type="checkbox"/> No <input type="checkbox"/>	3. Is this a place of assembly with more than 99 occupants?
Yes <input type="checkbox"/> No <input type="checkbox"/>	4. Is this a health care facility?
Yes <input type="checkbox"/> No <input type="checkbox"/>	5. Is this a new building with more than 30,000 square feet?
Yes <input type="checkbox"/> No <input type="checkbox"/>	6. Is the equipment to be installed rated 600 amperes or more?
Yes <input type="checkbox"/> No <input type="checkbox"/>	7. Is the installation in a hazardous classified area?
Yes <input type="checkbox"/> No <input type="checkbox"/>	8. Is the installation over 600 volts?
Yes <input type="checkbox"/> No <input type="checkbox"/>	9. Is this installation for a fire alarm (new), emergency, legally required standby, or gas detection system?
Yes <input type="checkbox"/> No <input type="checkbox"/>	10. Is the total new connected load of installation over 400 amperes?
Yes <input type="checkbox"/> No <input type="checkbox"/>	11. Are you installing any light circuit or any lights in a new building greater than 2 dwelling units?
Yes <input type="checkbox"/> No <input type="checkbox"/>	12. Is this installation for a Storage Battery system?

If you answered Yes to any of the above questions, you are required to submit an electrical plan to Electrical Plan Check for review. Use E<sub>PC</sub> Application for Electrical Plan Check.

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

<b>New Branch Circuits</b> 15 or 20 A, 120 V Gen. Use Rec. & Dwell Appliance & Non-Dwell Appliances or motors ≤3 HP or KVA, and 15 to 40 A PV Dwelling Circuits <85 <input style="width: 100px; height: 20px;" type="text"/>	<b>Existing Branch Circuits or Temporary Lighting</b> <table style="width: 100%; text-align: center;"> <tr> <td style="width: 25%;">Permanent Landscape Lighting</td> <td style="width: 25%;">Lamp Holder for Temporary Lighting</td> <td style="width: 25%;">Number of Units (Lights, Outlets, &amp; Switches)</td> <td style="width: 25%;">Utilization Equipment (other than Luminaires) Not over 3 HP-KVA</td> </tr> <tr> <td><input style="width: 100px; height: 20px;" type="text"/></td> <td><input style="width: 100px; height: 20px;" type="text"/></td> <td><input style="width: 100px; height: 20px;" type="text"/></td> <td><input style="width: 100px; height: 20px;" type="text"/></td> </tr> </table>	Permanent Landscape Lighting	Lamp Holder for Temporary Lighting	Number of Units (Lights, Outlets, & Switches)	Utilization Equipment (other than Luminaires) Not over 3 HP-KVA	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>
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<b>Motors, Transformers, Heating Appliances, Studio effect Lighting &amp; Misc. Equipment or Appliances (HP, KW or KVA)</b>				
3.1 thru 5	5.1 thru 20	20.1 thru 50	50.1 thru 100	100.1 thru 150
<40 <input style="width: 100px; height: 20px;" type="text"/>	<11 <input style="width: 100px; height: 20px;" type="text"/>	<5 <input style="width: 100px; height: 20px;" type="text"/>	<3 <input style="width: 100px; height: 20px;" type="text"/>	<2 <input style="width: 100px; height: 20px;" type="text"/>

<b>Services</b> 0 to 200 Amp      201 to 400 Amp <4 <input style="width: 100px; height: 20px;" type="text"/> <2 <input style="width: 100px; height: 20px;" type="text"/>	<b>Panelboards and Switchboards</b> 0 to 200 Amp      201 to 400 Amp <4 <input style="width: 100px; height: 20px;" type="text"/> <3 <input style="width: 100px; height: 20px;" type="text"/>
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<b>Fire Alarm, Communication and Control</b>					
Number of Communication Devices	Number of Communication Panels	Number of Control Devices	Fire Alarm Devices	Guest Room Smoke Detectors	Single Family Dwelling & Apt. Smoke Detectors
<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>

<b>Events</b> <input type="checkbox"/> Carnivals <input type="checkbox"/> Trade Shows	<b>Special Inspections</b> <table style="width: 100%; text-align: center;"> <tr> <td style="width: 25%;">Existing Building</td> <td style="width: 25%;">Reconnect Existing Service</td> <td style="width: 25%;">Special Equipment</td> <td style="width: 25%;">Witnessing Test</td> </tr> <tr> <td><input style="width: 100px; height: 20px;" type="text"/></td> <td><input style="width: 100px; height: 20px;" type="text"/></td> <td><input style="width: 100px; height: 20px;" type="text"/></td> <td><input style="width: 100px; height: 20px;" type="text"/></td> </tr> </table>	Existing Building	Reconnect Existing Service	Special Equipment	Witnessing Test	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>
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<b>Miscellaneous</b>					
Change of Address	Extra Trip	Misc. Permit	Moved Building	Swimming Pools	Transfer of Permit
<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>	<input style="width: 100px; height: 20px;" type="text"/>