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

**PERMIT**

**APP. #:**

**DATE:**

**For City Dept. Use Only**

**JOB ADDRESS:**

<table>
<thead>
<tr>
<th>Tract:</th>
<th>Block:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Lot:</th>
</tr>
</thead>
</table>

**Owner:**

**Petitioner:**

**Address:**

**Address:**

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Phone</th>
</tr>
</thead>
</table>

| City | State | Zip | Phone |

**REQUEST (SUBMIT PLANS OR ADDITIONAL SHEETS AS NECESSARY)**

**CODE SECTIONS: L.A.M.C 91.104.2.6, 98.0501**

To allow the use of epoxy manufactured by for epoxy injection of cracks up to in width.

**JUSTIFICATION (SUBMIT PLANS OR ADDITIONAL SHEETS AS NECESSARY)**

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**Owner/Petitioner Name (Print) (Signature) Position**

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

**Concurrences required from the following Department(s)**

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

<table>
<thead>
<tr>
<th>Reviewed by: (Staff) (Print)</th>
<th>Sign</th>
<th>Date</th>
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<tbody>
<tr>
<td>Action taken by: (Supervisor) (Print)</td>
<td>Sign</td>
<td>Date</td>
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</tbody>
</table>

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

**CONDITIONS OF APPROVAL (Continued on Page 2):**

See Sheet 3 for conditions of Approval. Conditions that are crossed out on the attached sheet will not be applicable to this approval.

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**DEPARTMENT USE ONLY**

**FEES**

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
<th>Rate</th>
<th>Quantity</th>
<th>Total</th>
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<tbody>
<tr>
<td>Appeal Processing Fee.. (No. of Items)</td>
<td>$130 + $39/adjl</td>
<td>1</td>
<td></td>
<td>130.00</td>
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<tr>
<td>Inspection Fee .......... (No of Insp.)</td>
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<td></td>
<td>0.00</td>
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<tr>
<td>Research Fee(Total Hours Worked)</td>
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<td>1</td>
<td></td>
<td>104.00</td>
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<tr>
<td>Development Services Center Surcharge</td>
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<td></td>
<td></td>
<td>7.02</td>
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<tr>
<td>Development Services Center Surcharge</td>
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<td>14.04</td>
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<tr>
<td>Total Fees</td>
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<td></td>
<td></td>
<td>255.06</td>
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</tbody>
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Fees verified by:

Print and Sign

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PC-STR.Mod 39 (Rev 10-28-2019)

Page 1 of 3

www.ladbs.org
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)  ____________________________________________    __________________________________________________
(Please Type or Print) (Please Type or Print)

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

Name of Corporation  __________________________________________________    ________________________________________________________
(Please Print Name of Corporation) (Please Type or Print)

Dated this __________ day of __________________________________________ 20______

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

State of _______________________ on ______________, Name, Title of Officer (e.g. Jane Doe, Notary Public) Name(s) of Signer(s)
before me, ______________________________________, personally appeared  ______________________________________________ ,
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

Signature

FEES (DEPARTMENT USE ONLY)

Board Fee ......................... (No. of Items)  1 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
Development Services Center Surcharge  X 3%  =               0.00
Systems Development Surcharge ............ X 6%  =               0.00
Total Fees ........................................................................ =               0.00

For Cashiers Use Only

(PROCESS ONLY WHEN FEES ARE VERIFIED)

Print and Sign

### CONDITIONS OF APPROVAL FOR USE OF EPOXY INJECTION

1. A Deputy Concrete or Masonry Inspector shall be employed during all phases of the repair process.

2. All work shall be performed in accordance with the epoxy manufacturer’s recommendations.

3. Use of epoxy injection for cracks exceeding 1/8 inch in fire rated elements requires that the epoxy be protected by fireproofing materials that provide the required fire rating of the element being repaired.

4. Core tests shall be taken in accordance with procedures of ASTM C42. Cores shall be visually inspected to verify a minimum of 90% penetration of epoxy into the cracked sections. Cores shall be tested for compression capacity to verify that the repaired cores have roughly the same compressive strength as the undamaged portions of the element being repaired. Cores shall be taken, as a minimum, at the rate of 3 cores per the first 100 feet of crack repair, and at a rate of 1 for each 500 additional length of crack repair. A minimum 3 tests shall be taken for each job. A minimum of 3 cores per day will be required.

5. Copies of the Approval for Alternate Materials, these conditions, and the manufacturer’s recommendations shall be on the jobsite during all repair operations.

6. If the cores taken show that the required penetration or compressive strengths have not been achieved, additional cores shall be taken at the same ratio indicated in term 4. These additional cores shall be taken at locations selected by the deputy inspector and as agreed upon by the LADBS inspector.

7. Epoxy injection shall not be used to repair cracks in any elements where the process of obtaining cores with the required height to diameter ratios needed for compression tests would damage the elements.

8. Core locations shall be repaired with materials having the same compressive strengths and modulus of elasticity of the elements being repaired by pressure injections.

9. Epoxy injections for columns to be on a case-by-case basis.