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:

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 91.1010.1.9.7

1. To allow the installation of a special egress-control device without complying with item numbers 4, 7, & 8 and the signage and relocking requirements contained in Section 91.1010.1.9.7 of the L.A.M.C.

JUSTIFICATION (SUBMIT PLANS OR ADDITIONAL SHEETS AS NECESSARY)

Owner/Petitioner Name (Print) (Signature) Position

FOR CITY DEPARTMENT’S USE ONLY BELOW THIS LINE

Concurrences required from the following Department(s) Approved Denied

Los Angeles Fire Department
Public Works Bureau of Engineering
Department of City Planning
Department of County Health
Other

DEPARTMENT ACTION

Reviewed by: (Staff) (Print) Sign Date
Action taken by: (Supervisor) (Print) Sign Date

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

CONDITIONS OF APPROVAL (Continued on Page 2):

For Cashiers Use Only
(PROCESS ONLY WHEN FEES ARE VERIFIED)

FEES

(DEPARTMENT USE ONLY)

Appeal Processing Fee.. (No. of Items) = 1 X $130 + $39/addl = 130.00
Inspection Fee ............... (No of Insp.) = X $ 84.00 = 0.00
Research Fee(Total Hours Worked) = 1 X $104.00 = 104.00
Subtotal................................................................. = 234.00
Development Services Center Surcharge X 3% = 7.02
Systems Development Surcharge......... X 6% = 14.04
Total Fees........................................................................ = 255.06
Fees verified by:
Print and Sign

Print and Sign

PC-STR.Mod 58 (Rev.11-7-2019) 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) ____________________________________________    __________________________________________________

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

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 ________________________________    Applicant’s Title ________________________________

Signature ____________________________________________    Date ________________________________

FEES (DEPARTMENT USE ONLY)

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Fees verified by: ________________________________

For Cashiers Use Only

(PROCESS ONLY WHEN FEES ARE VERIFIED)
SUPPLEMENTAL INFORMATION AND/OR SKETCH OF JOB CONDITION

For the Superintendent of Building or his designated agent to approve a request for modification or a request for alternate material or method of construction, he must determine that special, individual reasons exist that make compliance with the strict letter of the ordinance impractical and that equivalency is provided for requests applicable to the State Housing Law. The resulting condition must be in conformance with the spirit and purpose of the ordinance involved. The applicant must provide sufficient information with this application to allow the above evaluation to be made.

INFORMATION ON PROCEDURE FOR APPEAL FROM A DETERMINATION OR ACTION BY THE DEPARTMENT OF BUILDING AND SAFETY

Appeal from the determination or action of the Superintendent of Building or his designated agency may be made to the Board of Building and Safety Commissioners. To appeal, the appellant must give special individual reasons that make compliance with the strict letter of the ordinance impractical. Appeals pertaining to State Housing Law provisions require complete evidence to substantiate that the proposed design, material, or method of construction is at least equivalent to that prescribed by the Code. State such reasons or evidence on the front of this form or on a separate attachment.

Permit App #:

Job Address:

CONDITIONS OF APPROVAL:

1. When installed in a non-sprinklered building, the egress control device shall be limited to use on the first story of the building only.

2. The egress-control device shall only be installed where a smoke-detection system is provided throughout the tenant space.

3. If a smoke-detection system does not exist, then a separate electrical permit shall be obtained for the installation of the smoke-detection system. The electrical permit must be approved by the Fire Department prior to issuance of the permit.

4. If only one exit is required from the tenant space, there shall be one code-conforming exit from the tenant space in addition to the exit with special egress-control devices. If two or more exits are required from the tenant space, then one exit with special egress device may be treated as a required exit.

5. The egress-control device shall automatically deactivate upon activation of both the sprinkler system (if provided) and the smoke-detection system.

6. The egress-control device shall automatically deactivate upon the loss of electrical power to any one of the following: the device itself, the smoke-detection system, means of egress illumination as required by Section 1008.3.

7. The egress-control device shall be capable of being deactivated by a signal from a switch located in an approved location. The signal or switch shall provide an audible and/or visual signal in the event the device will not allow exiting from the unit.

8. These conditions of approval shall be clearly shown on the approved set of plans.

9. The smoke-detection system and the egress-control device shall be field tested and approved prior to final approval of the building permit.

10. If the use of the building is changed to any other use, then the egress control device shall be removed, or a separate approval shall be obtained for the new use.

11. All electrical components of the egress control device shall be listed by an LA City approved testing agency.