

PLAN CHECK APPLICATION

Building and Safety Division {805}875-8220

gary4161
@hotmail.com

APN#		LOT#	LOM	DATE:
Plan check #	Valuation of Improvement-\$ <u>100K</u>			
Building Address <u>204 N. Cst Lompoc CA 93436</u>			Use Zone	
Name of person who will make corrections on plans				
Use of Exist Bldg.(s) <u>N/A - Residential</u>			Existing Floor Area <u>0</u>	
Use of Proposed Bldg.(s) <u>Rental unit</u>			Proposed Floor Area <u>2320</u>	
Telephone # <u>805 6212972</u>	Account # <u>40010-46230</u>	Plan Check Despoit \$	Received By City Treasurer Use:	Date
Type of Construction	<input type="checkbox"/> I	<input type="checkbox"/> II-FR	<input type="checkbox"/> II-1Hr	<input type="checkbox"/> II-N
SPRINKLERED <u>YES</u> _ NO	<input type="checkbox"/> III-1HR	<input type="checkbox"/> III-N	<input type="checkbox"/> V-1Hr	<input type="checkbox"/> V-N <u>(VB)</u>

{3} Three sets / Single Family Dwelling OR {4} Four sets / Commercial and Multi-Family

Including:	Structural Calculation	<input checked="" type="checkbox"/>	Heating & Air Cond. Plan	<input checked="" type="checkbox"/>
Plot Plan	Ceiling & Roof Frame	<input checked="" type="checkbox"/>	Specification	<input checked="" type="checkbox"/>
Foundation Plan	Architectural & Structural	<input checked="" type="checkbox"/>	Engineer's Signature on plan	<input checked="" type="checkbox"/>
Floor Plan	Electrical Plan	<input checked="" type="checkbox"/>	Architect's Signature on plan	<input checked="" type="checkbox"/>
Soil Investigation	Plumbing Plan	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>

PROJECT NOTIFICATION INFORMATION

The City of Lompoc makes every effort to keep all interested parties to any project informed as to the status of plan review activity. Further, during plan check it is often necessary to contact the owner or contractor for more information. So that we can make those contacts, we ask you to fill out the requested information below. Application for which no permit is issued within 180 days following the date of application shall expire by limitation, and plans submitted for review may be thereafter be destroyed by the Building Official.

LEGAL OWNER OF PROPERTY

NAME <u>Gary Hulsey</u>	ADDRESS <u>423 N 740 N Hst 211</u>
PHONE NUMBER <u>805 6212972</u>	CITY, STATE, ZIP CODE <u>Lompoc 93436 CA</u>

PROJECT OWNER

NAME <u>Same</u>	ADDRESS
PHONE NUMBER	CITY, STATE, ZIP CODE

PROJECT DESIGN PROFESSIONAL OR CONTRACTOR

NAME <u>owner builder</u>	ADDRESS <u>same</u>
PHONE NUMBER	CITY, STATE, ZIP CODE

OTHER

NAME	ADDRESS
PHONE NUMBER	CITY, STATE, ZIP CODE

APPLICATION COMPLETED BY Designer Owner Contractor Other

Name Signature <u>[Signature]</u>	Date <u>8-4-16</u>
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B2016-01407