



CHECKLIST AND GUIDELINES FOR Administrative Conditional Use Permit

Community Development Department – Planning Division

125 East College Street • Covina, California 91723 • (626) 384-5450 / Fax: (626) 384-5479

The City of Covina requires sponsors of temporary, occasional activities conducted outside of buildings in commercial, industrial, school, residential and other areas to receive an Administrative Conditional Use Permit (ACUP). Typical functions that require an ACUP include:

1. Temporary Fund-Raising Activities such as but not limited to K-run, K-walk, car show, carnival, etc., when sponsored by a civic, religious, educational, fraternal or charitable organization. Such activity does not exceed three total days of operation per nonprofit organization within a six-month period
(Application must be submitted at least 60 days prior to the schedule event)
2. Promotional Sales Activities
 - a. Such activity does not exceed ten (10) consecutive days of operation within a six-month period and is a temporary extension of the store's normal retail sales upon the same premises of a shopping center
 - b. Such activity does not exceed three (3) consecutive days of operation within a three-month period and conducted at a neighborhood shopping center, and the product being sold is not sold by any retailers in the shopping center
3. Seasonal Sales Activities
 - a. Where said activities do not exceed three days of operation within any three-month period when conducted as an advertising feature in connection with a retail commercial business
 - b. Certain seasonal activities which occur only once during the year such as Christmas tree lot/pumpkin patch may be conducted for a period not to exceed fourteen (14) consecutive days within a twelve-month calendar period
4. Special public or quasi-public events such as Bingo and Monte Carlo nights

SECTION 1: FILING REQUIREMENTS

- ☐ Administrative Use Permit (ACUP) Application Form & Questionnaire
- ☐ 3 copies of a Site Plan, 1 flash-drive
- ☐ Filing Fees (See Fee Schedule)
- ☐ Certificate of Liability and/or Workers' Compensation Insurance and Indemnity and Hold Harmless Agreement

SECTION 2: FEES & COSTS PER COUNCIL APPROVED FEE SCHEDULE

- ☐ Administrative Conditional Use Permit.....**REFER TO FEE SCHEDULE**
The fee for fundraising events held by civic, religious, fraternal and educational organizations may be waived, if a copy of non-profit 501(c)(3) is provided
- ☐ Additional fees/costs based on the proposed temporary/special event may be charged
 - ☐ Public Works Department – Engineering
 - ☐ Public Works Department – Environmental Services
 - ☐ Police Department

SECTION 3: SAMPLE SITE PLAN FOR EVENT AND EQUIPMENT LAYOUT

Draw a general layout of your event below that should include the following (see attached sample site plan):

- ☐ An outline of the event site including names of streets or areas surrounding the event. If the event involves a moving route (such as a parade or race), indicate a direction of travel
- ☐ Any street closures and/or parking tow zones

- ☐ Location of fencing, barriers or barricades
- ☐ Location of staff
- ☐ Location of all stages, platforms, tents, booths, events activities/attractions, etc.
- ☐ Cooking area configuration including location of flammable gases and barbecue grills
- ☐ Location of trash receptacles and recycling bins
- ☐ Location of portable toilets/restroom facilities
- ☐ Location of first-aid facilities
- ☐ Generator locations and/or sources of electricity
- ☐ Placement of vehicles or trailers used for the event
- ☐ Anticipated parking locations (staff and attendees)
- ☐ Placement of promotional signs or banners

Guidelines for Obtaining an Administrative Conditional Use Permit

The purpose of the Administrative Conditional Use Permit (ACUP) process is to ensure such temporary or special events or activities are safe and do not significantly disrupt the welfare of surrounding residents and businesses. Planning a successful event or activity involves cooperation and participation from many people, including City of Covina employees. City staff will begin reviewing your application once it is submitted to the Planning Division. You can help speed the process along by completing your ACUP application and Questionnaire in full before submitting it for review. Your application will be circulated to affected department and division heads who may contact you for clarification or additional information. Event or activity organizers recognize the benefits of planning ahead and keeping everyone informed. The ACUP application and questionnaire will help you identify equipment, services and activities early in the planning stages to help minimize last minute surprises that could be a problem for you or your organization. The below guidelines will assist you through the ACUP process.

1. Applicant/event organizer is encouraged to have early consultation with Planning Division staff of the proposed temporary or special event or activity. The purpose of early consultation is to ensure that the applicant is familiar with the ACUP process and requirements and to resolve any matters with City staff, business/organization personnel, etc.
2. Applicant submits a completed ACUP application and questionnaire to Planning Division **at least thirty (30) days**, prior to the schedule activity. For communitywide special event or activity such as, but are not limited to, carnival, car show, etc., which may have an estimated attendance of over 100 and plus, the applicant shall submit the ACUP application and questionnaire **at least sixty (60) days** prior to the schedule event.
3. Scaffolding, bleachers, or other structures that might collapse and cause an injury will require a building permit from the City Building and Safety Division. Flammable materials (e.g. tent) or cooking equipment will require the approval of the Los Angeles County Fire Department (Public Information Desk: 323-881-2411).
4. For Christmas Tree Lots, and Tent Sales within shopping centers, the applicant should review the Los Angeles County Fire Department Handout for additional requirements.
5. Besides the Administrative Conditional Use Permit, additional City permits may be required for such matters as a trailer placement, temporary electrical and/or water hookup, and banner or temporary signage installation. If any food and/or alcoholic drinks will be served at the temporary event or activity, then approval will be needed from, respectively, the County Health Department and/or the State Department of Alcoholic Beverage Control (ABC). Contact those agencies for their requirements and permit procedures.

(County of Los Angeles Department of Public Health: 888-700-9995)
(ABC – Southern Division: 562-402-0659)

6. Upon a review of the ACUP application and questionnaire and any information and/or site plan submitted with the application, City staff may require additional information to assist staff's review. City staff will provide a list of the required additional information to the Applicant if the application is found to be incomplete.
7. Once the application is found to be complete, City staff will make the determination whether the proposed temporary event or activity will be conducted in an adequate, safe, and functional manner with respect to the above noted areas/departments. The Planning Division will formally approve the permit and notify the applicant within (10) calendar days from the date the application is found to be complete. The City may impose reasonable conditions necessary to protect the public health, safety, and welfare.
8. Because of Covina's public safety resource limitations (i.e., the Police Department cannot serve an unlimited number of events on a particular single day), the City may not be able to approve certain ACUP requests unless changes in dates are made. This is another reason for the early consultation with the Planning Division staff about your proposed temporary event or activity as well as picking up an application as early as possible.
9. Failure to obtain an administrative conditional use permit or any related permit in conjunction with an above-described temporary activity is a misdemeanor and the operator is subject to citation and fine.

NOTES (for applicant to use):



Administrative Conditional Use Permit Application & Questionnaire

Community Development Department – Planning Division

125 East College Street • Covina, California 91723 • (626) 384-5450 / Fax: (626) 384-5479

GENERAL INFORMATION

Applicant Name:

Staff Use Only

Date:

Phone:

Email:

MUNIS NO:

FILE NO:

Applicant Address:

Property Owner Name:

Property Owner Address:

Location of Event:

Check all that apply to your event plan and services and complete the Administrative Conditional Use Permit Questionnaire

Type of Temporary Activities

- ☐ Merchandise Retail Sales/Vendors
- ☐ Trade/Craft Show
- ☐ Car Show
- ☐ Christmas Tree Lot/Pumpkin Patch
- ☐ Athletic Competition TYPE: _____
- ☐ Carnival/Mechanical Rides
- ☐ Inflatable Rides/Bounce Houses
- ☐ Live Performance
- ☐ Live Animals
- ☐ Parade on Street or Right-Of-Way
- ☐ Alcohol Service/Sales
- ☐ Food Service/Sales
- ☐ Amplified Sound/Music
- ☐ Rummage/Yard Sale
- ☐ Race/Walk
- ☐ Other: _____

Type of Services

- ☐ Stage/Scaffolding
- ☐ Tent/Canopies
- ☐ Portable Restrooms
- ☐ Portable Fencing/Barricades
- ☐ Posting of Signs/Banners
- ☐ Street Closure
- ☐ Traffic Control
- ☐ Dumpsters
- ☐ Portable Lighting
- ☐ Security: ☐ Police ☐ Private Security
- ☐ Electrical: ☐ Generator ☐ City
- ☐ Water: ☐ Private Sources ☐ City
- ☐ Vehicle Access
- ☐ Car Wash
- ☐ Fireworks

OWNER CERTIFICATION

I CERTIFY THAT I AM THE LEGAL PROPERTY OWNER AND THAT THE INFORMATION CONTAINED IN THE ADMINISTRATIVE CONDITIONAL USE PERMIT QUESTIONNAIRE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Date: _____ Owner Signature: _____

Print Name and Title: _____

I CERTIFY THAT I AM THE LEGAL REPRESENTATIVE OF THE OWNER AND THAT THE INFORMATION CONTAINED IN THE ADMINISTRATIVE CONDITIONAL USE PERMIT QUESTIONNAIRE IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE

Date: _____ Applicant Signature: _____

Print Name and Title: _____



Administrative Conditional Use Permit Application & Questionnaire

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APPLICANT/EVENT PROMOTER

Name of Organization: _____

Contact Person: _____ Title: _____

Address: _____ City: _____ Zip: _____

Phone Number: _____ Email Address: _____

Does the organization have non-profit 501(c)(3) status? Please provide a copy (for business license purposes only). ☐ Yes ☐ No

EVENT NAME: _____

EVENT LOCATION/ADDRESS: _____

EVENT DATE(S): _____

ACTUAL EVENT HOURS: START: _____ am / pm END _____ am / pm

SET UP: DATE: _____ FROM: _____ am / pm TO: _____ am / pm

STRIKE DOWN STARTS: DATE: _____ FROM: _____ am / pm TO: _____ am / pm

STRIKE DOWN COMPLETED BY: DATE: _____ TIME: _____ am / pm

A SITE PLAN IS ATTACHED WITH THIS APPLICATION AND QUESTIONNAIRE ☐ YES

EVENT DESCRIPTION: _____

MAXIMUM EXPECTED ATTENDANCE PER DAY: STAFF _____ + PARTICIPANTS _____ + SPECTATORS _____ = TOTAL _____

Is the event open to the public? ☐ Yes ☐ No

Is there an admission charge? ☐ Yes ☐ No

VENDOR AND EXHIBITORS

Will anything be sold, at the event? ☐ Yes ☐ No

If yes, how? (Check all that apply) ☐ Food beverage ☐ Auction of goods ☐ Sale of goods ☐ Services

☐ Solicitation of donations ☐ Other (Describe: _____)

Will there be retail sales by concessionaires in conjunction with this event? ☐ Yes ☐ No

How many concessionaires? _____ What types of products will be sold? _____

Will products be given away at the event? ☐ Yes ☐ No

If yes describe: _____

California State Board of Equalization No: _____

NOTE: Retail vendors and exhibitors at permitted events have to obtain a Covina business license.

FOOD / BEVERAGES

Will food be served? ☐ Yes ☐ No (If "No", move to next questionnaire topic) Served to ☐ Invited Guests ☐ General Public

Will food be cooked on site? ☐ Yes ☐ No Will non-alcoholic beverages be served? ☐ Yes ☐ No

Describe: _____

Name of Caterer: _____

If not using a professional caterer, describe food handling, preparation, distribution and clean-up procedures: _____

NOTE: If you plan to serve food to the public, you must obtain all required permits including a Health Permit from the Los Angeles County Health Department, 310-354-6473. All supply and service providers (caterers, etc.) will be required to obtain a Covina Business License.

ALCOHOL

Will alcoholic beverages be served and/or sold on site? ☐ Yes (If "Yes" A State of California Alcoholic Beverage Control (ABC) Permit will be required. Provide a copy of permit) ☐ No (If "No", move to next questionnaire topic)

If yes, describe service area and security measures planned to ensure consumption by only persons 21 years or older:

NOTE: Alcoholic beverages may not be sold or consumed at events at City parks or in public streets.

ENVIRONMENTAL SERVICES (If not applicable, move to next questionnaire topic)

Describe your plan for clean-up and for collecting and disposing of refuse.

Will the event involve water activities or washing down of item?

Describe your plans for recycling, disposal and pick up:

Will there be live animals at your event? ☐ Yes ☐ No

If yes, describe who will be responsible for pet waste removal and proper disposal:

Toilets

Will Portable toilets be used at event? ☐ Yes ☐ No If "Yes", how many? _____

NOTE: The Los Angeles County Health Department recommends one (1) chemical toilet for every 250 men and two (2) chemical for every 175 women. At least 10% of toilets must be accessible to disabled persons. If your event is planned for night, all restrooms must be properly illuminated. A refundable clean-up/damage deposit may be required. The City of Covina encourages recycling and may require a Zero Waste Management Plan. Toilets must be on secondary containment in case of spills.

LOS ANGELES COUNTY FIRE DEPARTMENT (If not applicable, move to next questionnaire topic)

Which of the following will you be using?

- | | | |
|---|-----------------|----------------------------------|
| ☐ Tents | How many? _____ | Dimensions of each _____ x _____ |
| ☐ Canopies | How many? _____ | Dimensions of each _____ x _____ |
| ☐ Generators | How many? _____ | Size/type? _____ |
| ☐ Cooking/Open Flame | | |
| ☐ First Aid Facilities | | |
| ☐ Special Effects (describe) _____ | | |
| ☐ Other (describe) _____ | | |

BUILDING & SAFETY (If not applicable, move to next questionnaire topic)

Which of the following will you be constructing or assembling?

- | | |
|--|--|
| ☐ Stages (How many? _____ Height: _____ inches | ☐ Tent in excess of 400 sq. ft. |
| ☐ Bleachers or other seating | ☐ Structure in excess of 120 sq. ft. area |
| ☐ Canopy (open sides) in excess of 700 sq. ft. area | ☐ Displays or other structures (describe) |
| ☐ Platform | |

NOTE: Building and Safety may require an inspection, building permit, and/or engineer drawings. Stages, platforms and decks more than 30" above grade require a Building Permit.

ACCESSIBILITY PLAN (If not applicable, move to next questionnaire topic)

Applicant must comply with all city, county, state, and federal disability access requirements applicable to the event, including the American with Disabilities Act (ADA). All indoor and outdoor sites, activities, and programs must be accessible to persons with disabilities.

Describe your accessibility plan: _____

POLICE / SECURITY (If not applicable, move to next questionnaire topic)

Will you be hiring a private security company? ☐ Yes ☐ No Total number of security personnel _____

Name of security company: _____

Will any security guards be armed? ☐ Yes ☐ No If yes, how many? _____

NOTE: Covina Police Department personnel may be required at your event and at the applicant's expense. All service providers (security, etc.) will be required to obtain a Covina Business License and Private Patrol Operator Permit.

ENTERTAINMENT / SOUND AMPLIFICATION

Will there be amplified sound/music during the event? ☐ Yes ☐ No (If "No", move to next questionnaire topic)

If yes, where? ☐ Indoors ☐ Outdoors

Hours of amplified sound/music: Date: _____ Start: _____ am / pm Finish: _____ am / pm

Date: _____ Start: _____ am / pm Finish: _____ am / pm

Number of stages: _____ Height of stages: _____

Number of bands: _____ Type of music: _____

Name of entertainers: _____

Describe other amplified sound: _____

Sound Check: Date: _____ Start: _____ am / pm Finish: _____ am / pm

NOTE: Music or other amplified sound must be an incidental component of the event and stages must be no more than 30" above grade. Depending on event site and its proximity to residential areas, the duration of amplified sound may be restricted.

SIGNAGE

What type of signage will you have at your event? Where and how will it be mounted? _____

NOTE: Temporary signs that identify or pertain to the event may be installed within the event. Restrictions on the size of the logo vary by event venue. Inflatable signage that includes advertising or promotions is prohibited. All temporary signs with or without logos must be approved by City staff in advance of the event.

PARKING / TRANSPORTATION MANAGEMENT (If not applicable, move to next questionnaire topic)

Number of vehicles expected for staff and guests? _____

Describe parking plans (specify parking location, shuttle service, etc.): _____

Describe how attendees will arrive at the event (designated drop-off area, all arrive at once; arrive at various times, etc.): _____

Will you need to reserve parking spaces? ☐ Yes ☐ No

Specify location _____

Are you hiring a valet parking service? ☐ Yes ☐ No Auto valet parking company will be required to obtain a Covina Business License. If operating on public streets, a valet parking permit and garage keeper's liability insurance will also be required.

NOTE: Event may require a Transportation Management Plan/Traffic Control Plan to be submitted by the applicant and prepared by a licensed traffic engineer. The level of detail required will be directly related to the size and scope of the event. The Transportation Management Plan/Traffic Control Plan must be reviewed and approved by the City before approval of the event.

STREET CLOSURES (If not applicable, move to next questionnaire topic)

Are you requesting a street or lane closure? ☐ Yes ☐ No Describe: _____

Are you requesting closure of more than one block? ☐ Yes ☐ No

Describe location and exact time of closure: _____

NOTE: Street closures, if authorized, require a City approved temporary traffic control plan (submitted by the applicant and prepared by a licensed traffic engineer) to be implemented at the event that may include but not limited to hiring traffic service personnel and paying for barricades, signage, bus re-routing and parking space reservations.

ADDITIONAL CITY REQUIREMENTS

Business Licenses

All supply/service providers (caterer, promoter, security, valet, rental companies, etc.) will be required to obtain a Covina Business License. Retail vendors are exempt from having to obtain a business license.

Neighbor Notification

Residents and businesses within 500 feet of an event site must be notified in writing at least 10 calendar days prior to an event held outdoors or in a tent/temporary structure if there will be amplified sound or live music or if the event requires a street closure(s). The notice will include a brief description of the event, date and time of event, the name of a contact person, and a means for reaching the person during the event in case there is a problem. There is a set fee for mailing out the notice for events at fixed venues.

Indemnity and Hold Harmless Agreement

Event organizer will be required to execute a Defense, Indemnity and Hold Harmless Agreement. Depending on the type of event such as rummage and yard sale, the intensity and the duration of the event, the Community Development Director and City's Risk Manager may authorize a waiver of the required Agreement.

Insurance

Commercial General Liability Insurance, or its equivalent, with limits not less than \$2 million per occurrence. Some events may require higher limits, auto, liquor, participant, or garage keeper's liability and depending on the type of event such as rummage and yard sales, the intensity and duration of the event, the Community Development Director and City's Risk Manager may authorize a waiver of the required insurance. Such insurance shall be primary and not contribute with insurance or self-insurance maintained by the City of Covina. Such insurance shall be endorsed to designate the City of Covina, its elected and appointed officials, employees, and volunteers as additional insured. A certificate of insurance from the vendor installing the temporary structure (e.g., stage, bleachers, etc.) providing evidence of general liability insurance coverage in the amount of \$2 million per occurrence.

APPROVAL AND APPEAL PROCESS

The action taken by the Community Development Director and/or his designee is final, unless a written appeal to the Planning Commission is filed within 10 calendar days after the date of the decision, and in accordance to Municipal Code Section 17.62.260.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I CERTIFY THAT I WILL FULLY COMPLY WITH THE SPECIFIC CONDITIONS OF THE ADMINISTRATIVE CONDITIONAL USE PERMIT.

Submitted by _____

(Please Print)

Title _____

Signature _____ Date _____

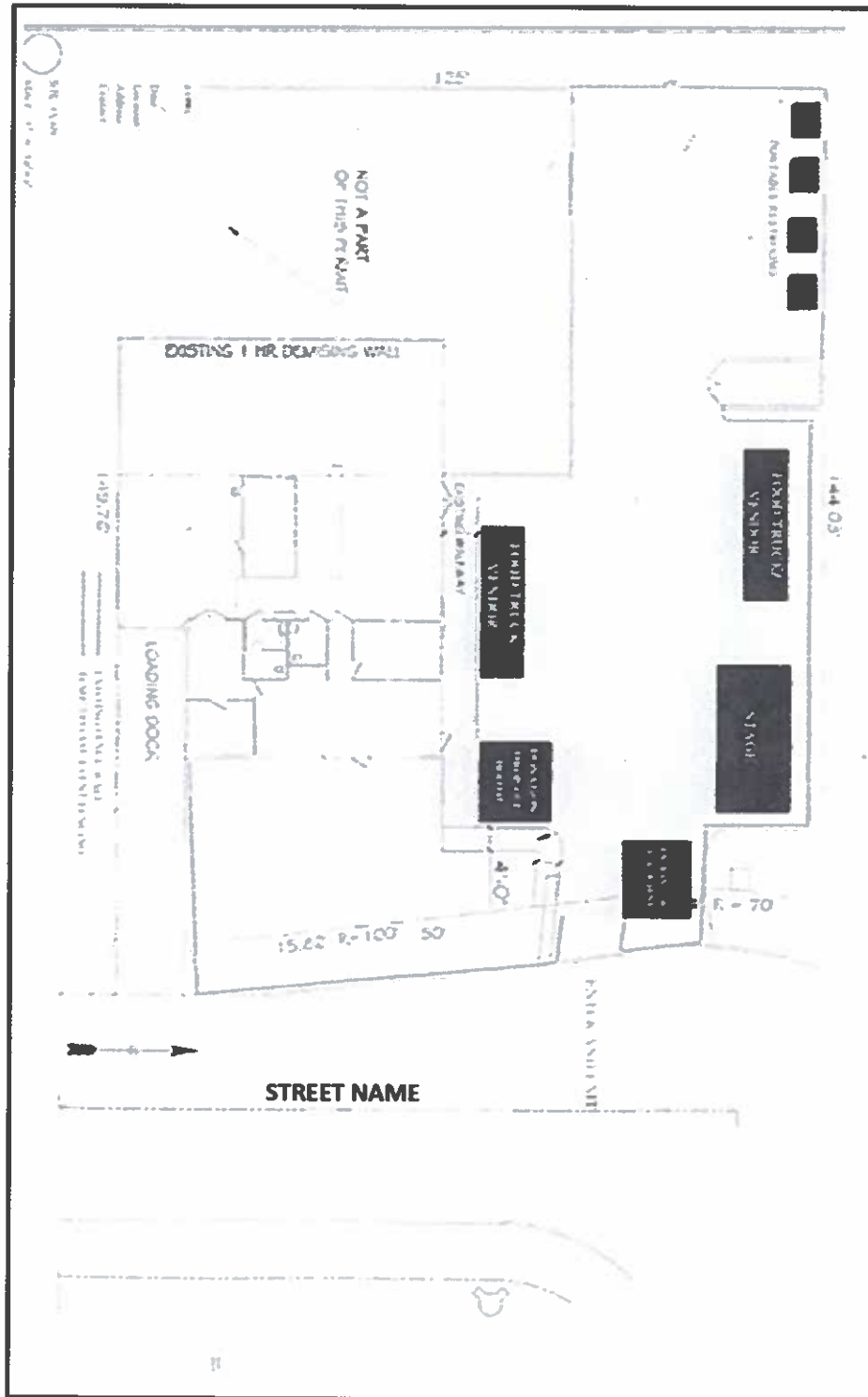


Sample Administrative Conditional Use Permit Plan

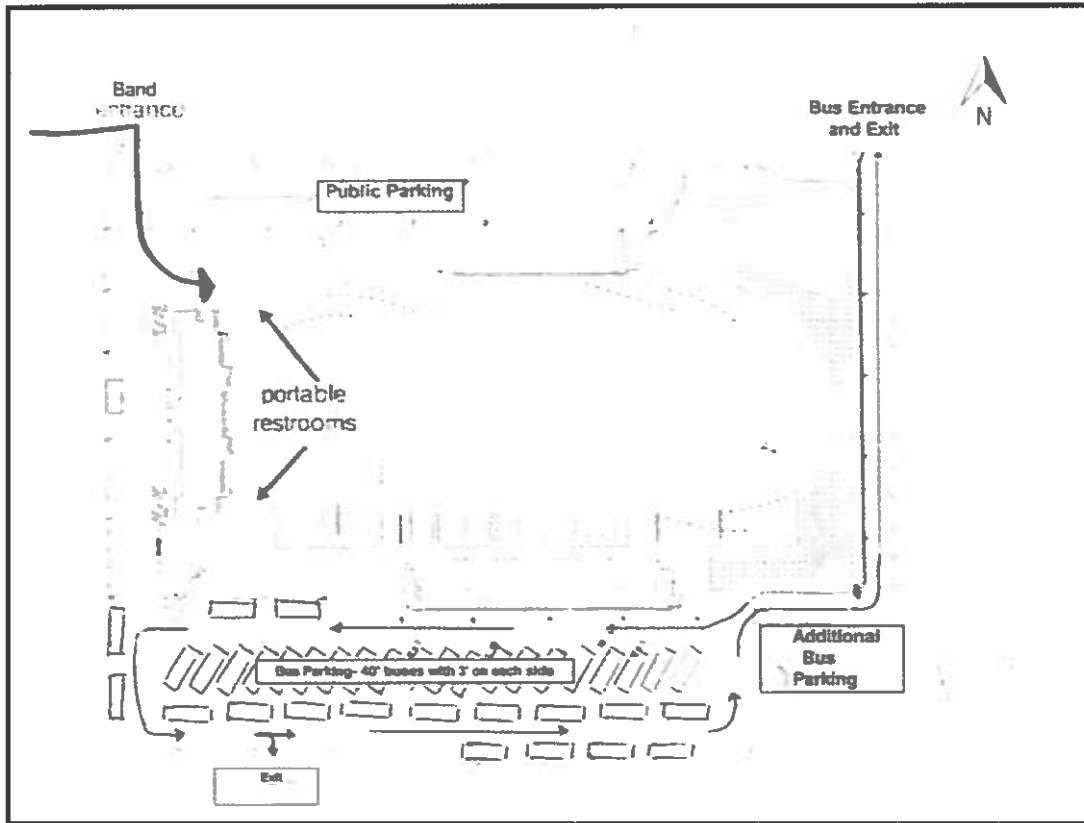
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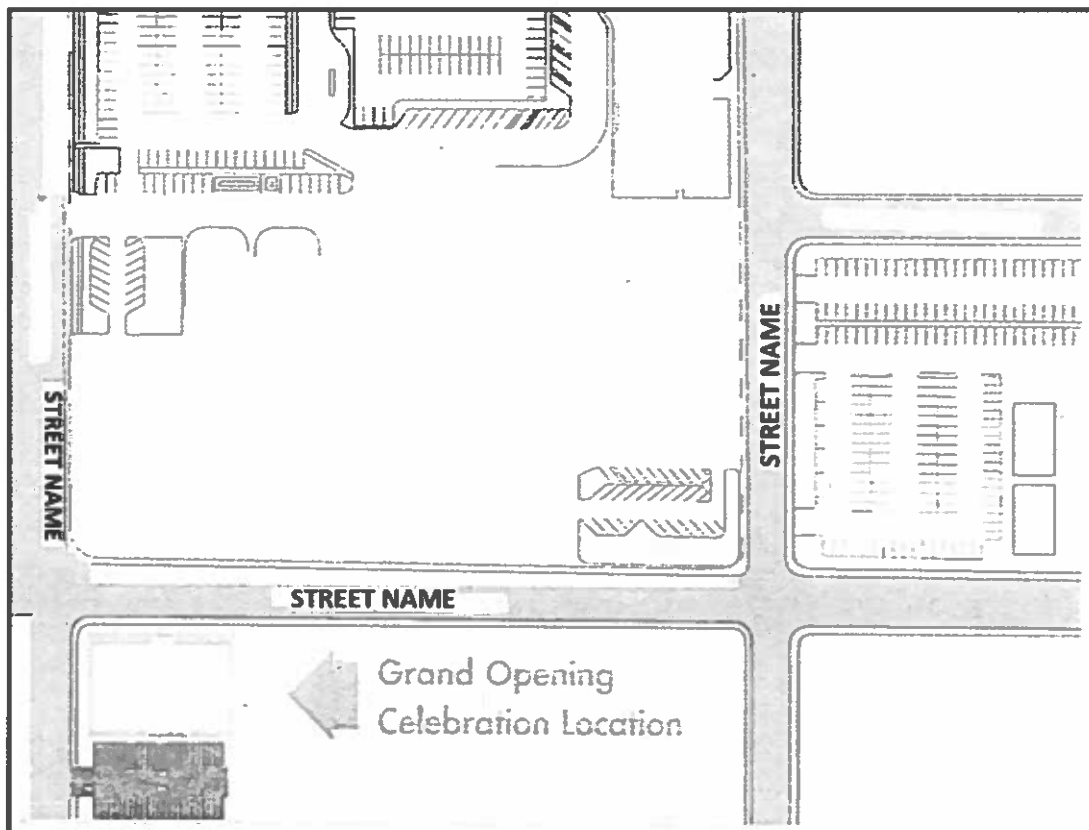
SAMPLE 1

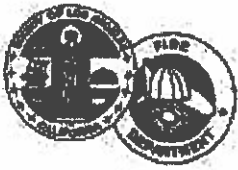


SAMPLE 2



SAMPLE 3





COUNTY OF LOS ANGELES FIRE DEPARTMENT
FIRE PREVENTION BUREAU WEST HOLLYWOOD
864 N. SAN VICENTE BLVD., CA 90069
(310) 358-2380, FAX (310) 358-2385

SPECIAL EVENT PERMIT

WITH APPROVED STAMP, PERMISSION IS HEREBY GRANTED IN ACCORDANCE WITH 105.6
CALIFORNIA FIRE CODE AND LOS ANGELES COUNTY FIRE CODE FOR THE FOLLOWING:
TO OPERATE A CARNIVAL OR SIMILAR EVENT UNDER THE FOLLOWING CONDITIONS;

1. A letter shall be submitted to the local Fire Prevention office outlining in detail the proposed event with accompanying plot plan showing all concession stands, rides (denote gas or electric), generators, tents, fencing/barricades and exits. **This is to be submitted at least 10 days prior to event.**
 2. All cooking areas shall have at least one 2A10BC fire extinguisher serviced within one year and tagged by a licensed agent. All gas cooking appliances shall have a fuel safety shutoff device.
 3. All commercial kitchens (food kitchens/trucks) shall have fixed extinguishing systems for hoods, ducts, cooking appliances and a K class extinguisher; these shall be serviced and tagged by a licensed agent.
 4. Gas or diesel equipment and generators shall have at least one serviced and tagged 2A10BC fire extinguisher within 20' feet.
 5. A field inspection will be made by the Fire Department to ensure all Fire Department requirements have been met.
 6. Additional permits are required for the following: air supported structures or tents over 400sqft and canopies over 700sqft.
- Peak Attendance of 5,000 or more, shall invoke requirements stipulated in the Department of Health Services Mass Gathering Policy
 - Additional Requirements from LACoFD Homeland Security shall be implemented for specific special events as: Marathons, biathlons, or other endurance events. Political meetings, protests, or rallies High-risk events such as auto races, skydiving, and high-angle climbing events. Large events held in high heat or inclement weather and under 5,000 people.

Point of contact for event: _____ Phone number: _____
Address of event: _____ City: _____ Zip Code: _____
Date of event: _____ Start time of event: _____ End time of event: _____
Type of event: _____ Expected attendance: _____ Estimated Peak Attendance: _____

Medical Services Available on site?	☐ Yes	☐ No, Number and Qualification on letter (If Yes, please attach info).
Providing security personnel?	☐ Yes	☐ No, Number and company name on letter.
Using tents and/or canopies?	☐ Yes	☐ No, Number/size shown on plan/letter (If Yes, PERMIT REQUIRED).
Altering access roads/exits? Using	☐ Yes	☐ No, Show on the plan/letter.
Cooking/Heating equipment?	☐ Yes	☐ No, Show on the plan/letter.
Using Fireworks/SFX?	☐ Yes	☐ No, Show permit and license/letter (if Yes, please explain).
Using flammable liquids or gas?	☐ Yes	☐ No, Amount and location state on the plan/letter.
Using burning or open flame?	☐ Yes	☐ No, Show on plan/letter.
Using a temporary stage?	☐ Yes	☐ No, Show on plan/letter.

• Remarks: _____

Applicant's signature: _____

Date: _____

Inspector's signature: _____

Date: _____

Invoice Information

Customer/Company Information

Full Name: _____ Telephone: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____

Address of Location: _____

Operational Permits:

- ☐ Bonfires
- ☐ Carnival & Fair
- ☐ Cutting and Welding Permit
- ☐ Exhibits and Trade Shows
- ☐ Hot Work Operations
- ☐ Open Burning (Cooking)
- ☐ Open Flames Candles & Torches

- ☐ Places of Assembly
- ☐ Pyrotechnic Special Effects Materials
- ☐ Temporary Sales Lots
- ☐ Temporary Membrane Structures and Tents
- ☐ Tenant Improvements Projects
- ☐ Special Event
- ☐ Parade Float

Plan Review - Fire Sprinkler Plan Review:

- ☐ Tenant improvements to NFPA 13 fire sprinkler system: ≤ 20 heads with/without calculation

Plan Review - Miscellaneous Plan Review

- ☐ Additional plan review after initial review and one resubmittal (per hours)
- ☐ Pre-submittal meeting (initial two hours)
- ☐ Tank installation or removal
- ☐ Commercial kitchen hood systems (UL-300)
- ☐ Plan review time (per hour for modifications, re-stamp (minimum 1 -hour)
- ☐ Energy Storage Systems, Group R-3, and R-4 (ESS/Solar)

Field Inspection - New Construction Field Inspection

- ☐ Assembly Occupancy
- ☐ Commercial (B, F, S, M)
- ☐ High Piled Combustible Storage
- ☐ Dwelling, 1 & 2 Family
- ☐ Multi-Family Residence
- ☐ Tank Installation or Removal
- ☐ Tenant Improvements Projects Not otherwise identified
- ☐ Hazardous Occupancy

Field Inspection - Fire Alarm Field Inspection

- ☐ Fire alarm system ≤ 10 devices and/or fire sprinkler monitoring system
- ☐ Fire alarm system: 11-50 devices
- ☐ Fire alarm system: 51-90 devices
- ☐ Fire alarm system: 91-130 devices
- ☐ Fire alarm system: > 130 devices

Field Inspection - Fire Sprinkler Field Inspection

- ☐ NFPA 13D Fire Sprinkler: 1 or 2 family dwelling
- ☐ NFPA 13 R Fire Sprinkler: Multi family dwelling
- ☐ TI to NFPA 13 Fire Sprinkler: ≤ 20 heads
- ☐ TI to NFPA 13 Fire Sprinkler: > 100 heads
- ☐ NFPA 13 Fire Sprinkler: ≤ 100 Heads per system
- ☐ NFPA 13 Fire Sprinkler: > 100 Heads per system
- ☐ TI to NFPA 13 Fire Sprinkler: > 20 heads and ≤ 100 heads
- ☐ 5 - Year Sprinkler Recertification
- ☐ Underground fire protection: 1-4 connections for hydrants and/or risers
- ☐ Underground fire protection: > 5 connections for hydrants and/or risers

Field Inspection - Special Systems Field Inspection

- ☐ Commercial kitchen hood system
- ☐ Energy Storage Systems (ESS/Solar)

Field Inspection - Fire Safety Field Inspection

- ☐ State of California Form 850 - fire safety inspection report

Field Inspection - Miscellaneous Field Inspection

- ☐ Statement-of-intended-use review and inspection (Form 30)
- ☐ Additional inspection after initial inspection and one reinspection

Invoice #: _____

Date Created: _____

Comments: _____



County of Los Angeles
FIRE
DEPARTMENT

PUBLIC ASSEMBLAGES AND EVENT DECLARATION ONLINE FORM

<https://www.cognitoforms.com/LosAngelesCountyFireDepartment/PUBLICASSEMBLAGESEVENTDECLARATION>

