

CITY OF MONROVIA

Community Development Department Building and Safety Division 415 South Ivy Avenue Monrovia, CA 91016-2888 CODE CYCLE

2022 CALIFORNIA CODES

AND CITY OF MONROVIA

MUNICIPAL CODE

EFFECTIVE DATE 01/01/2023

1 of **1**

Plan Review Application

PLEASE FILL OUT COMPLETELY IN BLACK OR BLUE INK AND CHECK ALL THAT APPLY PLAN CHECK #:

Project Address:							Date:		
Scope of Work:							Valuation:		
							N#:		
Occupancy Group: New Existing Detach				d ADU Phase I Pi			2	Sprinklered?	
Construction Type: Addition Tenant Impro			ovement (T.I.) HF Zone Hillside			lside		Yes No No	
Number of Plans Submitted:	Number of Stories:		Number of Dw	elling Units:	Tract #:			Lot #:	
Floor Area (Sq. Ft.):									
Addition:	Remodel:		New Structure	:	Garage:			Basement:	
Deck:	Tenant Improvement:		Alteration:		Demo:			Other:	
Project Details:									
Historic or Potential List? Yes No	HOA? Yes ☐ No [After the Fact Permit? Yes \(\subseteq \text{No} \(\supseteq \)			L.A. Co. Health Dept. Approval Req'd? Yes \(\subseteq \text{No } \(\subseteq \)		
Existing Use:			Permit Type	e Required:		Calculations Provided:		lations Provided:	
Residential Multi-family Residential Industrial Institutional Change of Use? Yes No		Mechanical Po		emolition Grading ool/Spa On-site? lar/PV Yes No		☐ Structural ☐ Energy ☐ Trusses☐ Soils report☐ Other (Please Specify):			
Applicant: Design Professional in Responsible Charge Non-Licensed Designer (when allowed by statute) Owner Authorized Agent									
Company Name:				Applicant Name:					
Email:			Phone #:		License #:				
Address:			City:			Zip Code:			
Property Owner:			Phone #:				Email:		
Property Owner Mailing Address:									
*For questions regarding fire sprinkler plan submittals, please contact the Fire Department at 626-256-8181 **For questions regarding off-site grading or work involving the public right-of-way, please contact the Public Works Department at 626-932-5575									
Office Use Only									
Building Department approval required? Yes			es 🗌 No 🗌						
Planning Department approval required?		Yes 🗌 No		CHECKER'S NAME:					
Fire Department approval required?		Yes 🗌 No		CHECKER'S NAME:					
Public Work Department approval required? Y		Yes 🗌 No		CHECKER'S NAME:					
Approval from outside agencies required?		Yes 🗌 No							
Revise valuation?		Yes 🗌 No] No						
In-house plan check?		Yes 🗌 No							
Outside consultant?		Yes 🗌 No		Plan Check Fee:					