



City of Torrance
Community Development Department, Building and Safety Division
Electrical Permit Application
 3031 Torrance Blvd., Torrance CA 90503 (310) 618-5910

FILE

Required Information

Property/ Job Address:			
Person Preparing This Form:		Date:	
Property Owner:		Owner Phone:	
Owner's Address: (if different)			
Business / Tenant Name:		Phone :	
Architect / Engineer:		Phone:	
Architect / Engineer Address:			
Contractor: (As shown on License)	Contractor License #:	Class	Bus. Lic:
Business Address:			Phone:

Description of Work

LIST OF SUB-CONTRACTORS REQUIRED PRIOR TO FINAL

The projects General Contractor or Owner Builder shall require all sub-contractors to have a current Torrance Business License. The General Contractor or Owner Builder shall be responsible for full license fees for any unlicensed sub-contractor.

All contractors and sub-contractors must have a city business license for the dates during which they worked on the project.

I have read and understood the above, and have received the 'Sub-Contractor's List' form. I further understand that this list must be submitted to the Business License Section fifteen (15) days prior to final inspection.

I certify that no sub-contractors will be employed during the course of this project.

signature

title

date

ITEM	#	RATE	FEE
Switches / Outlets, 1 to 20, each	@	3.40	
Add'l. amount over 20, each	@	1.20	
Light Fixtures, 1 to 20, each	@	3.40	
Add'l. amount over 20, each	@	1.20	
String Lamps, 1 to 20, each	@	3.40	
Add'l. amount over 20, each	@	1.20	
Range	@	14.70	
Clothes Dryer	@	14.70	
Water Heater	@	14.70	
Garbage Disposal	@	14.70	
Dishwasher	@	14.70	
Space Heater	@	14.70	
Sta. Appliance (1/2 hp Max)	@	14.70	
Sta. Cook-Top	@	14.70	
Oven	@	14.70	
Automatic Washer	@	14.70	
Electric Motors not over 1hp	@	20.40	
Electric Motors not over 3 hp	@	20.40	
Electric Motors not over 8 hp	@	28.30	
Electric Motors not over 15 hp	@	33.80	
Electric Motors not over 50 hp	@	39.60	
Electric Motors not over 100 hp	@	48.50	
Electric Motors not over 500 hp	@	56.40	
Electric Motors Over 500hp	@	127.70	

Is signature sheet required? _____ SUBTOTAL 1 _____

ITEM	#	RATE	FEE
Service 0-600V - Not Over 200A	@	42.90	
Service 0-600V - Over 200A	@	56.40	
Service Over 600V	@	169.10	
Sub-Panel / Misc	@	28.30	
Meter Sockets	@	42.90	
Mercury Vapor Fixtures on Poles	@	28.30	
Temporary Power Pole	@	42.90	
Timer	@	9.20	
Transformers not over 1 Kv	@	14.70	
Transformers not over 3 Kv	@	22.60	
Transformers not over 8 Kv	@	28.30	
Transformers not over 15 Kv	@	37.10	
Transformers not over 50 Kv	@	42.90	
Transformers not over 100 Kv	@	56.40	
Transformers not over 500 Kv	@	84.70	
Transformers Over 500 Kv	@	112.80	

SUBTOTAL 2 _____

OTHER FEES THAT MAY APPLY			FEE
Microfilm Fee	Permit Docs: x	\$ 7.00	
Plan Storage Fee	# of sheets x	\$ 13.70	
Workers' Comp Ins Review Fee			3.60
Permit Issuing Fee			32.90
Mail-in Fee (if applicable)		\$ 4.40	

SUBTOTAL 1 _____

SUBTOTAL 2 _____

TOTAL PERMIT FEES _____



City of Torrance
Community Development Department, Building and Safety Division
Mechanical Permit Application
 3031 Torrance Blvd., Torrance CA 90503 (310) 618-5910

MEC

Required Information

Property/ Job Address:			
Person Preparing This Form:		Date:	
Property Owner:		Owner Phone:	
Owner's Address: (if different)			
Business / Tenant Name:		Phone :	
Architect / Engineer:		Phone:	
Architect / Engineer Address:			
Contractor: (As shown on License)		Contractor License #:	Class
Business Address:		Bus. Lic:	Phone:

LIST OF SUB-CONTRACTORS REQUIRED PRIOR TO FINAL

The projects General Contractor or Owner Builder shall require all sub-contractors to have a current Torrance Business License. The General Contractor or Owner Builder shall be responsible for full license fees for any unlicensed sub-contractor.

All contractors and sub-contractors must have a city business license for the dates during which they worked on the project.

- I have read and understood the above, and have received the 'Sub-Contractor's List' form. I further understand that this list must be submitted to the Business License Section fifteen (15) days prior to final inspection.
- I certify that no sub-contractors will be employed during the course of this project.

signature	title	date
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ITEM	#	RATE	FEE
<i>Forced Air or Gravity-type Furnace:</i>			
Up to 100,000 btu, including ducts & vents	@	28.30	
Over 100,000 btu, including ducts & vents	@	42.90	
<i>Floor Furnace</i>			
	@	28.30	
<i>Heater-suspended Type</i>			
	@	28.30	
<i>Heater-recessed Type</i>			
	@	28.30	
<i>Heater-floor Mounted</i>			
	@	28.30	
<i>Decorative Fireplace (gas only)</i>			
	@	28.30	
<i>Boiler, Compressor, Absorption System:</i>			
Not over 3 hp - Up to 100,000 btu	@	28.30	
Not over 15 hp - 100,001 to 500,000 btu	@	42.90	
Not over 30 hp - 500,001 to 1,000,000 btu	@	56.40	
Not over 50 hp - 1,000,001 to 1,750,000 btu	@	71.20	
Over 50 hp - Over 1,750,000 btu	@	112.80	
<i>Air Handling Unit, Including Ducts:</i>			
Under 10,000 cfm	@	28.30	
Over 10,000 cfm	@	42.90	
<i>Evaporative Cooler (non portable)</i>			
	@	28.30	
<i>Vent Fan / Single Duct</i>			
	@	14.70	
<i>Appliance Vent - Only</i>			
	@	14.70	
<i>Ventilation System</i>			
	@	28.30	
<i>Mechanical Exhaust System</i>			
	@	28.30	
<i>Commercial / Industrial Incinerator</i>			
	@	141.00	
<i>Repair, Alteration, Addition</i>			
	@	42.90	
<i>Misc. Appliance or Equipment</i>			
	@	28.30	
<i>Gas System for Equipment</i>			
	@	14.70	

Description of Work

OTHER FEES THAT MAY APPLY	CALCULATION	FEE
Microfilm Fee	Permit Docs: x \$ 7.00	
Plan Storage	# of sheets x \$ 13.70	
Workers' Comp Ins Review Fee		3.60
Permit Issuing Fee		32.90
Mail-in Fee (if applicable)	\$ 4.40	

SUBTOTAL 2 _____

TOTAL PERMIT FEES _____

SUBTOTAL 1 _____



City of Torrance
Community Development Department, Building and Safety Division
Plumbing Permit Application
 3031 Torrance Blvd., Torrance CA 90503 (310) 618-5910

PLM

Required Information

Property/ Job Address:			
Person Preparing This Form:		Date:	
Property Owner:		Owner Phone:	
Owner's Address: (if different)			
Business / Tenant Name:		Phone :	
Architect / Engineer:		Phone:	
Architect / Engineer Address:			
Contractor: (As shown on License)	Contractor License #:	Class	Bus. Lic:
Business Address:			Phone:

Description of Work

LIST OF SUB-CONTRACTORS REQUIRED PRIOR TO FINAL

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I have read and understood the above, and have received the "Sub-Contractor's List" form. I further understand that this list must be submitted to the Business License Section fifteen (15) days prior to final inspection.

I certify that no sub-contractors will be employed during the course of this project.

signature	title	date
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ITEM	#	RATE	FEE
Bath Tub	@	22.60	
Shower	@	22.60	
Laundry Tub or Tray	@	22.60	
Lavatory (Wash Basin)	@	22.60	
Water Closet (Toilet)	@	22.60	
Urinal	@	22.60	
Commercial Sinks	@	22.60	
Kitchen Sink w/ Disposal	@	22.60	
Garbage Disposal	@	22.60	
Dishwasher	@	22.60	
Automatic Washer	@	22.60	
Water Heater	@	22.60	
Floor Drain	@	22.60	
Floor Sink	@	28.30	
Drinking Fountain	@	28.30	
Bar Sink	@	22.60	
Sand/Grease Trap	@	28.30	
Lawn System	@	28.30	
Water System	@	28.30	
SUBTOTAL 1			

ITEM	#	RATE	FEE
Gas Meter/Sys - up to 5 Outlets, one fee	@	22.60	
Add'l amount over 5, each	@	5.70	
Vacuum Breakers - up to 5 Outlets one fee	@	22.60	
Add'l amount over 5, each	@	5.70	
Building Sewer	@	56.40	
Connect Additional Bldg / Work to Bldg Sewer	@	42.90	
Alter or Repair Existing Sewer	@	56.40	
Rainwater System per Drain	@	14.70	
Abandon Cesspool or Cap Sewer	@	84.70	
Cesspool or Septic Tank	@	169.10	
Misc:	@	28.30	
SUBTOTAL 2			

OTHER FEES THAT MAY APPLY	CALCULATION	FEE
Microfilm Fee	Permit Docs: x \$ 7.00	
Plan Storage	# of sheets x \$ 13.70	
Workers' Comp Ins Review Fee		3.60
Permit Issuing Fee		32.90
Sewer Usage Fee (\$25 for every 15 units)		
Mail-in Fee (if applicable)	\$ 4.40	
SUBTOTAL 1		
SUBTOTAL 2		

Existing Fixture Units	
Additional Units	
Total Units	

TOTAL PERMIT FEES _____



City of Torrance
Community Development Department, Building and Safety Division
Sign Permit Application

3031 Torrance Blvd., Torrance CA 90503 (310) 618-5910

SGN

Required Information

Property / Job Address:			
Person Preparing This Form:		Date:	
Property Owner:		Owner Phone:	
Owner's Address: (if different)			
Business / Tenant Name:		Phone :	
Architect / Engineer:		Phone:	
Architect / Engineer Address:			
Contractor: (As shown on License)		Contractor License #:	Class
Business Address:		Bus. Lic:	Phone:

Valuation \$	Store Front Width
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Descriptive Drawing of Sign 1:	Special Conditions _____ _____ _____ _____ Sign Area (Total Sq Ft)	<input type="checkbox"/> non-illuminated <input type="checkbox"/> illuminated <input type="checkbox"/> replacement face <input type="checkbox"/> painted wall/awning
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Descriptive Drawing of Sign 2:	Special Conditions _____ _____ _____ _____ Sign Area (Total Sq Ft)	<input type="checkbox"/> non-illuminated <input type="checkbox"/> illuminated <input type="checkbox"/> replacement face <input type="checkbox"/> painted wall/awning
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OTHER FEES THAT MAY APPLY	CALCULATION	FEE	
Microfilm Fee	Permit Docs: x	\$ 7.00	
Plan Storage	# of sheets x	\$ 13.70	
Lamps	# lamps: x	\$ 3.35	
Timer	# timers x	\$ 42.90	
Sign with Transformer or Ballast	# signs x	\$ 42.90	
Additional Transformer or Ballast	# x	\$ 14.70	
Construction Tax	valuation x 1.5% (.015)		
Workers' Comp Ins Review Fee		\$ 3.60	
Fees Based on Project Valuation:			
Permit Fee			
Plan Check Fee			

Note: If Tenant Occupied

I acknowledge that I am the owner of the above described property and I realize that if this permit is issued, it will limit the number and size of signs which may be placed on this property and I consent to this application.

Print Name: _____

Owner Address: _____

Owner Phone: _____

Owner Signature (required)

TOTAL PERMIT FEE _____

RIGHT OF ENTRY

I Certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to signs, and hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes. If the signage includes a ground sign, I affirm that the signage is entirely on the property above and does not encroach. Its location has been verified by survey and/or by contacting the City of Torrance Engineering Department and I agree to contact "Dig Alert" (1-800-422-4133).

Signature of Applicant or Agent: _____