CITY OF SAN GABRIEL
425 S. MISSION DR.
SAN GABRIEL, CA 91776
(626) 308-2806
commdevinfo@sgch.org

BUILDING DEPARTMENT PERMIT APPLICATION

Date:	Plan Check No.:	Plan Check Deposit: $

PROPERTY IDENTIFICATION

Address:		
APN:	LOT/TRACT No.:	LOT SIZE:

PROPERTY OWNER INFORMATION

Name:	Phone No.:
Address:	City/State/Zip:

CONTRACTOR INFORMATION

CA State Lic. No.:	City Business Lic. No.:	Exp. Date:
Name:		Phones No.:
Address:		City/State/Zip:

APPLICANT / CONTACT INFORMATION

Name:	Phone No.:
Email:	

ARCHITECT/DESIGNER INFORMATION

Name:	Phone No:
Email:	

PROJECT DESCRIPTION

Type: ☐ Commercial ☐ Residential Other:

Class of Work: ☐ New ☐ Addition ☐ Alteration ☐ Demo / Construction Preparation

Use of Building:	Valuation: $	Fire Sprinkler: Yes / No
Building SF:	Shade Structure SF:	Garage / Storage SF:

Masonry Walls / Fencing (Height X Linear Feet):

Scope of Work:

Applicant Signature: _____ Date: _____

☐ Owner ☐ Contractor ☐ Agent ☐ Other

ELECTRICAL

	OUTLETS ( ) LIGHTS ( ) SWITCHES ( )
	FIXED APPLIANCES UNDER 1 hp. / OVEN / DISP. / F.A.U. / A.C. UNIT/ D.W / W.M. / DRYER / W.H./
	MOTORS / TRANSFORMERS / LARGE APPLIANCES
	SIZE OR TYPE: Hp. / KVA'S
	0 - 1 ( ) 1 – 10 ( ) 10 – 50 ( ) 50 – 100 ( ) 100 + ( )
	SERVICES / SWITCHGEARS / PANELBOARDS
	0 – 200 AMP'S ( ) 201 – 1000 AMP'S ( ) 100 + ( ) TEMPORARY POER ( )

PLUMBING

	WATER CLOSETS (TOILET) URINALS
	BATH TUBS ( ) SHOWERS ( )
	FLOOR SINK / DRAIN
	LAVATORY (WASH BASIN)
	KITCHEN SINK & DISPOSAL
	WATER RE-PIPING
	WATER HEATER / GALLONS ( ) TANKLESS BTU'S ( )
	GAS PIPING
	SEWER / SEWER CAP / SEWER REPAIR
	BACKFLOW DEVICE / VACUUM BREAKER
	GREASE TRAP / INTERCEPTOR
	RAIN WATER SYSTEM
	WATER MAIN

MECHANICAL

	FORCED AIR SYSTEM – BTU'S ( )
	AIR CONDITIONING UNIT Tons ( )
	SUPPLIES ( ) RETURNS ( )
	HEATERS – FLOORS / WALL UNIT
	COMMERCIAL HOODS / RESIDENTIAL HOOD
	VENTILATION FANS
	EVAPORATE COOLERS