

Lathrop-Manteca Fire District 19001 Somerston Parkway, Lathrop, CA 95330 Administration Office 209-941-5100 ~ Fax 209-941-5115

Application for Plan Review

Building Permit #: (Number issued by SJ County or City of Lathrop)	Date of Application:/	
BUSINESS OR RESIDENCE / SITE INFOR	MATION	
BUSINESS/RESIDENCE NAME:	PHONE:	FAX:
ADDRESS:	CITY:	STATE: ZIP CODE:
CONTRACTOR INFORMATION		
COMPANY NAME:	SITE COORDINATOR:	
COMPANY ADDRESS:	CITY:	STATE: ZIP CODE:
		EMAIL:
*** PARTY FINANCIALLY RESPONSIBLE FOR	R PLAN REVIEW FEE(S):	
THE ABOVE LISTED APPLICANT(S) HERB' (PLEASE INCLUDE DETAIL INFORMATION IN LINES PI		
[] RESIDENTIAL PURPOSE	[] COMMERCIAL PURPOSE	[] ADDITION OF SQUARE FOOTAGE
[] EXISTING STRUCTURE	[] EXISTING STRUCTURE	[] PREVIOUS SQ. FT.:
[] NEW DEVELOPMENT	[] NEW DEVELOPMENT	[] NEW SQ. FOOTAGE:
[] FIRE SPRINKLER(S) TOTAL:	[] FIRE SPRINKLER(S) TOTAL:	
[] SOLAR:KW	[] AST /UST	[] FIRE ALARM
VALUATION AMOUNT OF PROJECT SUBMITTED: \$ Details regarding the above request must be j		henever requested by the Fire Marshal. It is the
applicant's responsibility to ensure that condit	ions are in accordance with applicable	e State and Local Fire Regulations.
(APPLICANT SIGNATURE)		(DATE)
	FOR FIRE DEPARTMENT USE ONI	Y
Occupancy ID:	Date Received:/	Date Reviewed://
Valuation Amount:	Permit No	Fee(s): \$
Invoice No.:[] Paid	// Check No.:	Receipt No.:
Inspector:		