DEPARTMENT OF PUBLIC WORKS
CHECK LIST REQUIREMENTS AND WAIVER INFORMATION

Your building project or zoning case resulted in the requirements contained in the attached Public Works Check List. The specific requirements are contained Section 12.08.020 of the Bellflower Municipal Code. If you have questions regarding these requirements please call (562) 804-1424 x 2259 or x 2285.

You may be eligible to apply for a waiver from these requirements under the following circumstances.

1. You are applying for a building permit AND there will be no change in zoning or land use and no construction of a new structure AND the amount listed for “Total Estimated ROW Construction Cost” is more than 20% of the amount listed for “Project Valuation”.

2. You are applying for a building permit AND there will be no change in zoning or land use and no construction of a new structure AND a Check List requirement cannot be built without demolition of an existing occupied residence on the property or an existing currently operating business structure on the property. Note: most often this will occur when there is a requirement to relocate a driveway.

3. A Check List requirement cannot be accomplished without construction on neighboring property AND you do not own that other property AND you have contacted the owner of that property to obtain permission for the construction AND the owner has refused to grant permission.

If you believe you meet these any of these three circumstances, you should request a waiver application at the Planning Counter in City Hall or by telephone request to (562) 804-1424 x2259.
DEPARTMENT OF PUBLIC WORKS
CHECK LIST WAIVER APPLICATION FORM

Date________________    Applicant Name ______________________________

Check one:   ___Owner       ____Tenant       ____ Contractor

Building Permit Number _______________

OR

Planning Case Number _________________

Project Address ____________________________________________________

Mailing Address if different ___________________________________________

Telephone ________________________   Alt. phone ______________________

Fill out as many as Cases as apply. For each Case you fill out, answer every question.

Case 1. My checklist requirements are more than 20% of my permit valuation

   A. My building permit valuation is $______________

   B. My Public Works Check list deposit is $ ________

Case 2. Demolition

   A. I request to have the following check list requirement waived:

   ___________________________________________________________

   B. My request is based on the fact that in order to meet this requirement
   I would have to demolish the following structure:

   ___________________________________________________________
Case 3. Construction on other property.

A. I request to have the following check list requirement waived:

_________________________________________________________________________

B. My request is based on the fact that in order to meet this requirement I would have to construct on the following property:

_________________________________________________________________________

C. The owner of the property listed in B. above is:

Name_____________________________________________________

Mailing Address ____________________________________________

Telephone _________________    Alternate phone ______________

Email ____________________________________________________

D. I certify that I have contacted this property owner to request their permission to construct the improvement. Attached is:

___ Documentation that I made this request (copy of your request signed by the property owner or certified mail receipt or other evidence of receipt)

AND

___ Their written denial of approval

OR

___ I hereby certify that I received no response to my request for approval.

_________________________________________________________________________

Signature                                                                             Date

€ Approved         € Denied

€ Approved in part as follows:____________________________________________________

_________________________________________________________________________

Director of Public Works                                                        Date

Mail completed form to: Dept. of Public Works 9944 Flora Vista, Bellflower, CA 90706