



# City of La Puente

15900 E. Main Street La Puente, CA 91744-4719 Telephone (626) 855-1500 Fax (626) 961-4626

## Business License Application (Application must be complete – print or type)

Mark One:  New Business  Change of Ownership  Change of Address

Business Name (dba): \_\_\_\_\_ Opening Date \_\_\_\_\_

Business Location: \_\_\_\_\_ Suite/Unit No. \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Description of Business: \_\_\_\_\_

Type of Ownership:  Sole Proprietor  Partnership  Corporation  Other (Please specify) \_\_\_\_\_

State Resale Tax No. \_\_\_\_\_ Federal I.D. No. \_\_\_\_\_

State Contractors License No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

Business Owner(s) Information				
Name	Address	Phone No.	Drivers License No.	Social Security No.

I hereby certify, under penalty of perjury, that I have read and answered the statements contained in this application and my answers are true and correct. I agree to comply with all applicable state and city laws and ordinances pertaining to my business operations, including but not limited to: Building, Fire, Zoning and other city code requirements and grant city officials the privilege and authority to conduct such inspections as may be necessary.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

### Inspection Approval

#### Agency – Phone Number

Planning & Zoning (626) 855-1500	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Approved by: _____
Community Preservation/Code (626) 855-1500	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Approved by: _____
Building and Safety (626) 855-1500	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Approved by: _____
L.A. County Health Dept. (562) 345-6800	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Approved by: _____
L.A. County Fire Dept. (626) 336-6950	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Approved by: _____

Business License No. \_\_\_\_\_

Application Received by: \_\_\_\_\_

# City of La Puente

## Business License Fee Schedule

Business Name \_\_\_\_\_

Business Location \_\_\_\_\_

### Fees:

Basic Business License Fee	\$	50.00
Multiply Number of Employees & Owners _____ X \$5	\$	_____
General Contractor	\$	50.00
Sub Contractor	\$	40.00
Business License Application Review Fee	\$	71.00
Home Occupation Inspection Fee	\$	45.00
Penalties	\$	_____
	<b>TOTAL</b>	\$ _____

Wholesale Vehicles (Multiply number of vehicles _____ X \$24)	\$	_____
Mobile Food Services (Multiply number of vehicles _____ X \$36)	\$	_____
Video Games (Multiply Gross Sales \$ _____ X 1%)	\$	_____
Pool Tables (Multiply Gross Sales \$ _____ X 1%)	\$	_____
Vending Machines (Multiply Gross Sales \$ _____ X 1%)	\$	_____
Other _____	\$	_____
	<b>TOTAL</b>	\$ _____

I hereby certify, under penalty of perjury, that I have read and answered the statements contained on this fee schedule and my answers are true and correct. The City may demand an audit of and require me to submit a copy of the state sales and use tax returns filed relative to such video games, pool tables, and vending machines and a copy of any other tax statement filed with any government entity, filed by me or by any other individual or firm owning, renting, leasing or operating such machines.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

***City of La Puente***  
Business Occupancy Permit

Business Name: \_\_\_\_\_

Business Location: \_\_\_\_\_ Phone No. \_\_\_\_\_

Property/Building Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone No. \_\_\_\_\_

Previous use of property/business: \_\_\_\_\_

How long has the building been vacant? \_\_\_\_\_

Are there existing signs on the building? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you intend to install new building signs? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you intend to change existing sign face? \_\_\_\_\_ Yes \_\_\_\_\_ No

Number of parking spaces: \_\_\_\_\_ Number of handicap spaces: \_\_\_\_\_

Is there live landscaping? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, what type? \_\_\_\_\_

Are there trash enclosures? \_\_\_\_\_ Yes \_\_\_\_\_ No

I understand that no structural alteration or additions, and/or mechanical or electrical alterations or additions, and/or signs and other advertising shall be installed or erected temporarily or permanently on any lot or parcel of land unless such construction and/or advertising are first reviewed and approved by the La Puente Planning and /or Building and Safety departments.

Applicant Signature \_\_\_\_\_ Date: \_\_\_\_\_

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# COUNTY OF LOS ANGELES FIRE DEPARTMENT FIRE PREVENTION DIVISION

CITY OF LA PUENTE FPB OFFICE  
15660 STAFFORD STREET  
INDUSTRY CA 91744  
BUSINESS HOURS 7:30 – 4:30 PM M-F  
(626) 336-6950

Form 30 (8/08)

## NOTICE TO PROSPECTIVE BUSINESSES STATEMENT OF INTENDED USE

Various processes and situations in commercial and industrial establishments can create fire and life safety hazards. In order to provide a reasonable degree of safety to life and protection of property, specific requirements have been established in the Fire, Building, and Life Safety Codes. To help us assess what particular laws apply to your business, please provide the following information:

### PART I – Building Information

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Number of Buildings: \_\_\_\_\_ Type of Construction: \_\_\_\_\_ Square footage: \_\_\_\_\_

### PART II – Questionnaire

	YES	NO
1. Will you have over 500 square feet of <u>high-piled combustible storage</u> ? (> 12' or > 6' for High Hazard Commodities) See Part V of this form for more information.	<input type="checkbox"/>	<input type="checkbox"/>
2. Will you be storing more than 2500 cubic feet of miscellaneous <u>combustible materials</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
3. Will you store, transport on site, dispense, use or handle <u>hazardous materials</u> ? (FC Table 105.6.20) Also see Part IV.	<input type="checkbox"/>	<input type="checkbox"/>
4. Will you store, handle, use, apply, or dispense <u>flammable or combustible liquids or powder coating</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
5. Will you store, handle or use <u>compressed gases including liquefied petroleum gases</u> ? (FC Table 105.6.8)	<input type="checkbox"/>	<input type="checkbox"/>
6. Will you produce, store, handle, or transport onsite <u>cryogenic fluids</u> ? (FC Table 105.6.10)	<input type="checkbox"/>	<input type="checkbox"/>
7. Will you store, use or handle <u>radioactive materials</u> more than 1 microcurie or any amount that requires a permit from The Nuclear Regulatory Commission?	<input type="checkbox"/>	<input type="checkbox"/>
8. Will you store or handle more than 25 lbs of <u>pyroxylin plastics</u> or use any such material in a manufacturing process?	<input type="checkbox"/>	<input type="checkbox"/>
9. Will you melt, cast, heat treat or grind more than 10 lbs of <u>magnesium or other combustible metals</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
10. Will your store or handle an aggregate quantity <u>aerosol products</u> in excess of 500 lbs. net weight?	<input type="checkbox"/>	<input type="checkbox"/>
11. Will you manufacture more than one gallon of <u>organic coating</u> per day?	<input type="checkbox"/>	<input type="checkbox"/>
12. Will you store, handle, sell or use any <u>model rocket engines, pyrotechnic materials or fireworks</u> ?	<input type="checkbox"/>	<input type="checkbox"/>

	YES	NO
13. Will you have a <u>refrigeration</u> system with >220 lbs Group A1 or 30 lbs of any other refrigerant?	<input type="checkbox"/>	<input type="checkbox"/>
14. Will you store or handle loose <u>combustible fibers</u> in excess of 100 cubic feet?	<input type="checkbox"/>	<input type="checkbox"/>
15. Will you install or operate a stationary <u>lead-acid battery system</u> with more than 100 gallons of liquid capacity?	<input type="checkbox"/>	<input type="checkbox"/>
16. Will you conduct fruit or crop ripening operations using <u>ethylene gas</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
17. Will you <u>produce combustible dust</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
18. Will you operate a <u>place of assembly</u> (drinking, dining, or gathering) with a single room occupant capacity of 50 or more people?	<input type="checkbox"/>	<input type="checkbox"/>
19. If YES to #18, Will you have <u>liquid or gas fueled vehicles or equipment</u> ; use <u>open flames or candles</u> ; or store, use or handle <u>cellulose nitrate film</u> in an assembly occupancy?	<input type="checkbox"/>	<input type="checkbox"/>
20. Will you operate a <u>carnival or a fair, or an amusement, covered mall, exhibit or trade show building</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
21. Will you use <u>dry cleaning equipment</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
22. Will you operate an <u>industrial baking oven, or a power coating or spray finish booth or room</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
23. Will you be conducting <u>welding, cutting or other hot work operations</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
24. Will you be using <u>open-flame devices including torches, candles, lanterns, or portable cooking appliances</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
25. Will you conduct any form of <u>open burning, or create a bonfire, rubbish or recreational fire</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
26. Will you be conducting activities or create a condition near a <u>hazardous fire area</u> (wildfire area) that could accidentally ignite a wildfire?	<input type="checkbox"/>	<input type="checkbox"/>
27. Will you have a <u>lumber yard or wood working plant</u> which stores or processes 100,000 board feet of lumber?	<input type="checkbox"/>	<input type="checkbox"/>
28. Will you store <u>wood chips, hogged material, lumber, or plywood</u> in excess of 200 cubic feet?	<input type="checkbox"/>	<input type="checkbox"/>
29. Will you conduct any <u>fumigation or thermal insecticidal fogging</u> operations?	<input type="checkbox"/>	<input type="checkbox"/>
30. Will you operate an <u>auto wrecking, waste handling, or commercial rubbish handling facility</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
31. Will you <u>remanufacture tires</u> or store over 2,500 cubic feet of tires or <u>tire byproduct</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
32. Will you operate a <u>repair garage</u> or <u>fuel dispensing facility</u> for automotive, marine, or fleet equipment?	<input type="checkbox"/>	<input type="checkbox"/>
33. Will you perform <u>floor finishing</u> over 350 sq ft using Class I or II liquids?	<input type="checkbox"/>	<input type="checkbox"/>
34. Will you operate a <u>temporary sales lot</u> for the sale of Christmas trees or pumpkins?	<input type="checkbox"/>	<input type="checkbox"/>
35. Will you install or use any type of <u>temporary membrane structure, tent, or canopy</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
36. Will you conduct any <u>motion picture, television, commercial, or related film production</u> ?	<input type="checkbox"/>	<input type="checkbox"/>
37. Will you be removing or using a <u>privately owned fire hydrant</u> ?	<input type="checkbox"/>	<input type="checkbox"/>

**PART II – Questionnaire continued...**

**YES NO**

38. Is your building equipped with automatic fire sprinklers?
- If your building has fire sprinklers provide the following information: *(The following information can usually be found on the main sprinkler system riser for each system or the Fire Department Connection (FDC) or can sometimes be obtained from the property owner.)*
- a) Date of last fire sprinkler system testing or maintenance as per CCR Title 19 (recorded on State Fire Marshal Forms AES 1-9): \_\_\_\_\_
- b) Below is a list of common types of sprinkler systems. Complete the information for the type of system installed in your building:
- ◆ **CALCULATED:** \_\_\_\_\_ GPM/SqFt \_\_\_\_\_ Design Area (i.e. .3/3000)
  - ◆ **PIPE SCHEDULE (non-calculated):** \_\_\_Light Hazard \_\_\_Ordinary Hazard \_\_\_Extra Hazard
  - ◆ **EARLY SUPPRESSION FAST-RESPONSE (ESFR):** \_\_\_\_\_PSI ESFR K Factor \_\_\_\_\_
- c) Is the sprinkler system electronically supervised? If YES then:
- Fire sprinkler alarm monitoring company: \_\_\_\_\_
39. Is your building equipped with a standpipe system (fire hose or fire hose connections)? If YES then:
- a) Type and location: \_\_\_\_\_  
(Certification information can usually be found on labels on the main standpipe system riser for each system)
- b) Date of last standpipe system testing or maintenance as per CCR Title 19 (recorded on State Fire Marshal Forms AES 1-9): \_\_\_\_\_
40. Is your building equipped with any other type of manual or automatic fire extinguishing system?    
*(Halon, Clean Agent, FM-200, Kitchen Hood System, Spray Booth)* If YES then:
- a) Type and location: \_\_\_\_\_
- b) Date of last automatic extinguishing system testing or maintenance as per CCR Title 19 (recorded on State Fire Marshal Forms AES 1-9): \_\_\_\_\_
41. Is your building equipped with a manual or automatic fire alarm system? If YES then:    
*(smoke detector, heat detector or manual pull)*
- a) Date of last alarm system test: \_\_\_\_\_
- b) Is the fire alarm system electronically supervised? If YES then:
- Fire alarm monitoring company: \_\_\_\_\_
42. Maximum number of employees working at one time: \_\_\_\_\_
43. Hours of operation: \_\_\_\_\_ To \_\_\_\_\_
44. Describe the method of disposing of combustible or hazardous waste materials:
- \_\_\_\_\_
- \_\_\_\_\_

### PART III – Intended Use Statement

1. **SUBMIT A LETTER:** Submit a signed, legible letter (preferably type written and on your company's letterhead) stating your intended use for the property. In the letter, describe materials you will be storing and using on the property. Explain the method of storage (e.g. racks, pallets), storage dimensions, and where the materials will be located on the property. Describe how you will be using the materials. Provide details to any item(s) marked "yes" in Part II and explain any planned alterations to the building. (See attached example.)
2. **SUBMIT SITE PLAN / FLOOR PLAN:** Submit site plan drawn to rough scale showing the property size and location, building size and location on property; both in square feet. Show all exit doors, fire extinguishers, fire hose cabinets, special fire or life safety systems, and any item(s) marked "yes" in Part II. (See attached example).

### PART IV – Hazardous Materials Non-Handler Declaration:

#### HAZARDOUS MATERIALS NON-HANDLER DECLARATION (FORM 585)

{ } THIS BUILDING WILL USE HAZARDOUS MATERIALS IN EXCESS OF NON-REPORTABLE AMOUNTS.

{ } THIS BUILDING WILL NOT USE HAZARDOUS MATERIALS OR USES NON-REPORTABLE AMOUNTS.

A hazardous material may be broadly defined as any material that because of its quantity, concentration, or physical or chemical characteristics; poses a significant, present, or potential hazard to human health and safety, property, or to the environment. A hazardous material includes, but is not limited to any substance or material which the handler or the administering agency has a reasonable basis for believing would be injurious a person's health and safety or harmful to the environment if released into the work place or surrounding areas.

**By signing below, I declare that the above named business, organization, or occupant will not handle a hazardous material or mixture containing hazardous material which has a quantity at any one time during the reporting year equal to, or greater than, a total weight of 500 pounds, or a total of 55 gallons, or 200 cubic feet at standard temperature and pressure for compressed gas.**

Print Name and Title of Declarer: \_\_\_\_\_ Date: \_\_\_\_\_

Declarer Signature: \_\_\_\_\_ Fire Department Representative: \_\_\_\_\_

### PART V – High-Piled Combustible Storage:

In Chapter 23 of the County of Los Angeles Fire Code, high-piled combustible storage is defined as: Storage of combustible materials [product and/or packaging] in closely packed piles (floor storage) or combustible materials on pallets, in racks, or on shelves where the top of storage is **greater than 12 feet in height**. High-piled combustible storage also includes certain high hazard commodities, such as; rubber tires, 'Group A' plastics, flammable liquids, idle pallets, and similar commodities, where the top of the storage is greater than 6 feet in height.

It is very important to contact a fire inspector prior to consideration of storing high-piled combustible storage. Many of the permit requirements must be built into your building. If your building is not approved for high-piled combustible storage it may be cost prohibitive. For example; if you have a pipe schedule sprinkler system – no high-piled storage is permitted until the system is calculated. A fire inspector can assist you with fire department requirements.

{ } THIS BUILDING WILL NOT BE USED FOR HIGH-PILED COMBUSTIBLE STORAGE.

{ } THIS BUILDING WILL BE USED FOR HIGH-PILED COMBUSTIBLE STORAGE. "Permit Required." Contact a Fire Inspector for permit requirements.

{ } THIS BUILDING IS A SPECULATION BUILDING WITHOUT A TENANT AT THIS TIME. The tenant will be notified to contact the fire department prior to use of the building.

**FIRE DEPARTMENT STAMP**

TO GET A STAMP FROM THE FIRE DEPARTMENT YOU MUST BRING THE FOLLOWING ITEMS TO THE JURISDICTIONAL FIRE PREVENTION OFFICE:

- THE STATEMENT OF INTENDED USE FORM 30, COMPLETELY FILLED OUT
- A SIGNED LETTER FROM THE BUSINESS OWNER, OR AUTHORIZED AGENT (SEE PAGE 4)
- A FLOOR PLAN / SITE PLAN OF THE BUILDING
- THE OCCUPANT EMERGENCY INFORMATION, COMPLETELY FILLED OUT (PAGE 7)

**FIRE DEPARTMENT STAMP:**

**THE FOLLOWING PERMITS ARE REQUIRED:**

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PERMIT INFORMATION SHEETS WILL BE PROVIDED FOR REQUIRED PERMITS. (Permit Information Sheets are also available for viewing on our website. Go to [www.fire.lacounty.gov](http://www.fire.lacounty.gov), under Fire Prevention Division look for "Permit Requirements.")

PERMITS WILL ONLY BE ISSUED BY A FIRE INSPECTOR. PLEASE CONTACT YOUR FIRE INSPECTOR TO SCHEDULE AN INSPECTION.

## **FIRE EXTINGUISHER REQUIREMENTS**

(This section to be completed by fire department personnel.)

### **Primarily Class A Fire Hazards (Ordinary Combustibles):**

- { } Light Fire Hazard Provide a minimum of (1) 2A10BC rated fire extinguisher mounted in an accessible conspicuous area. One extinguisher is required for every 6000 square feet and the travel distance to a fire extinguisher shall not exceed 75 feet from any point hazard involved. Mount in an accessible and conspicuous location.
- { } Ordinary Fire Hazard Provide a minimum of (1) 2A10BC rated fire extinguisher mounted in an accessible conspicuous area. One extinguisher is required for every 3000 square feet and the travel distance to a fire extinguisher shall not exceed 75 feet from any point of the hazard involved. Mount in an accessible and conspicuous location.
- { } Extra Fire Hazard Provide a fire extinguisher with a minimum Class A rating of 4. One extinguisher is required for every 4000 square feet. Travel distance to a fire extinguisher shall not exceed 75 feet from any point from the hazard involved. Mount in an accessible and conspicuous location.

### **Class B Fire Hazards Present (Flammable/Combustible Liquids with depths .25" or less):**

- { } Light Fire Hazard Provide a fire extinguisher with a minimum Class B rating of 10 mounted in an accessible conspicuous area. The travel distance to a fire extinguisher shall not exceed 50 feet from any point from the hazard involved. Mount in an accessible and conspicuous location.
- { } Ordinary Fire Hazard Provide a fire extinguisher with a minimum Class B rating of 10 with an allowable a maximum or 30 feet travel distance or a fire extinguisher with a minimum Class B rating of 20 with a maximum allowable travel distance of 50 feet from the hazard involved. Mount in an accessible and conspicuous location.
- { } Extra Fire Hazard Provide a fire extinguisher with a minimum Class B rating of 40 with a maximum feet travel distance of 30 feet or a fire extinguisher with a Class B rating of 80 with allowable maximum travel distance of 50 feet from the hazard involved. Mount in an accessible and conspicuous location.

### **Special Hazard Protection (Grease and Combustible Metal):**

- { } Commercial Kitchen Hood System – One Class K fire extinguisher shall be placed within 30 feet of all grease cooking operations in a commercial kitchen. Protection of a multiple deep fat fryer appliance installation shall be as per Fire Code 904.11.5.2. Mount in an accessible and conspicuous location. Care shall be used to insure that the K Class extinguisher and not the other type of extinguishers will be used in the event of a grease fire involving cooking equipment. Multi-purpose fire extinguishers may compromise the effectiveness in wet chemical kitchen hood extinguishing systems.
- { } Hazards involving the ignition of Class D combustible metals such as magnesium, titanium, zirconium, sodium, lithium, and potassium shall be protected as per NFPA 10 standard for areas where combustible metal powders, flakes, shavings, chips, or similarly sized products are generated. Travel distance to a fire extinguisher/fire extinguishing agent shall not exceed 75 feet from any point from the hazard involved. Mount in an accessible and conspicuous location.

See Fire Code Table 906.1 for additional specified areas for required fire extinguisher placement.

# Occupant Emergency Information

## GENERAL INFORMATION:

Business Name: \_\_\_\_\_

DBA/AFA/FKA: \_\_\_\_\_ Effective Date: \_\_\_\_\_

Street Address: \_\_\_\_\_ Suite/Apt \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP+4: \_\_\_\_\_

\_\_\_ new construction, name change, or ownership change: \_\_\_\_\_

\_\_\_ a new occupant moving in and the previous occupant/business has moved out \_\_\_\_\_

\_\_\_ sharing the above address with another occupant/business by the name of: \_\_\_\_\_

Mailing Address (only if different than above): \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ ext \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Generic E-mail: \_\_\_\_\_ Number of employees: \_\_\_\_\_

Senior Person: \_\_\_\_\_ Title: \_\_\_\_\_

Describe Property Use: \_\_\_\_\_

Hazardous Material: \_\_\_\_\_

Notes/Special Concerns: \_\_\_\_\_

Thomas Guide: \_\_\_\_\_ Cross Street: \_\_\_\_\_

City License/Permit #: \_\_\_\_\_ Zone: \_\_\_\_\_ Fire Station #: \_\_\_\_\_

Water Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

## PROPERTY INFORMATION:

Landlord/Property Owner Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person Name: \_\_\_\_\_ Title: \_\_\_\_\_

Occupancy Code: \_\_\_ Roof Type: \_\_\_\_\_ SQFT: \_\_\_\_\_ Stories: \_\_\_\_\_ High Piled: \_\_\_ Fire Sprinklers: \_\_\_

Basement: \_\_\_ Target Hazard: \_\_\_ HM Handler: \_\_\_ FD Permit: \_\_\_

## EMERGENCY CONTACT INFORMATION: (24 Hour number – usually home phone)

1st Person to contact: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

2nd Person to contact: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

3rd Person to contact: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Alarm Company: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

(Sample Statement of Intended Use Letter)

Big Ben Furniture company  
1000 South Anyplace  
Your City, CA 00000

April 26, 2002

To Whom It May Concern:

The following information is in answer to your request regarding the business operation to be conducted at the above address.

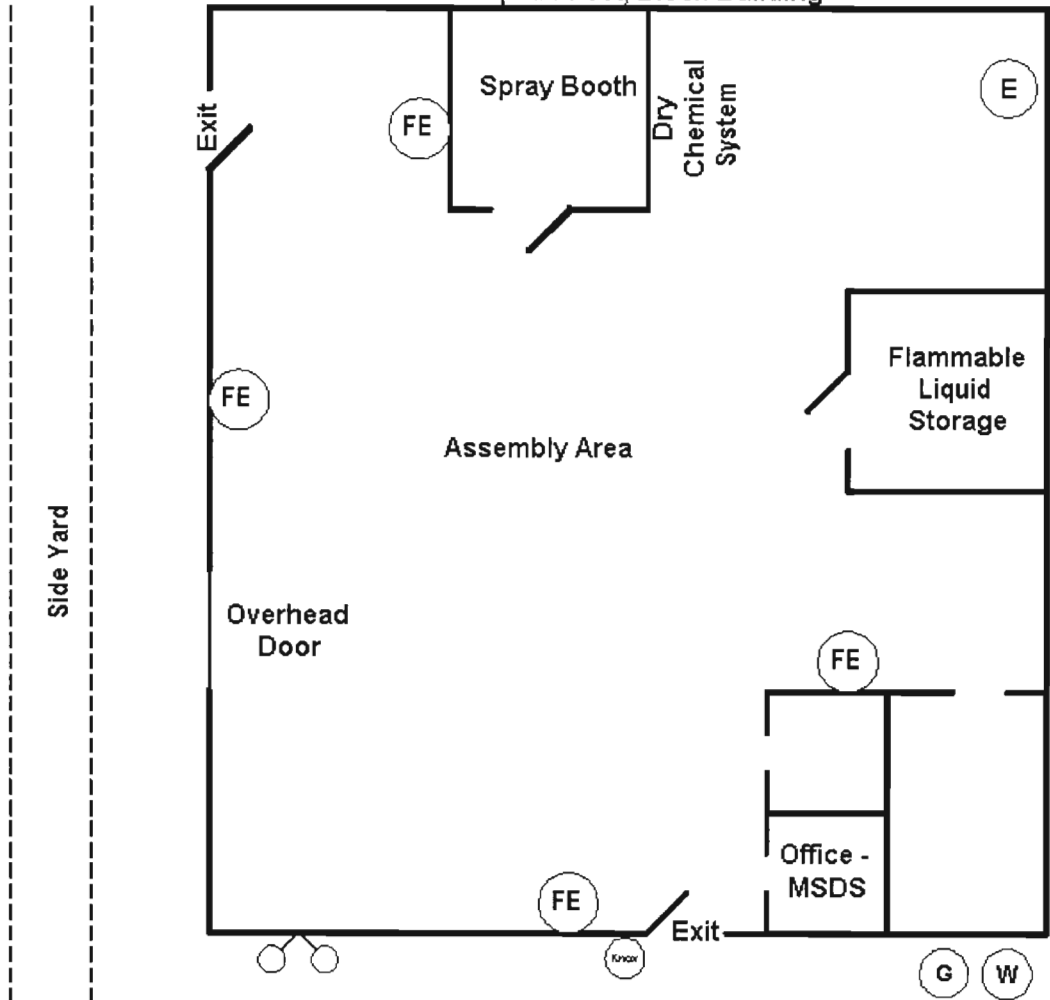
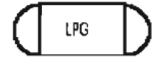
1. Operations conducted in the building are as follows:
  - a) Upholstery – manufactures loose cushions for wood and metal furniture as well as some fully upholstered furniture.
  - b) Plastic furniture – manufacture plastic furniture out of extruded plastic tubing. Operations include cutting, thermoforming and assembly.
  - c) Spray painting – painting of all necessary items. All spray painting to take place in spray booth.
  - d) Warehousing of wood and metal furniture components.
  - e) General office activities.
2. See attached plot plan.
3. Materials to be stored include the following.
  - a) Metal and wood furniture frames stacked upon themselves
  - b) Wood furniture parts palletized.
  - c) Upholstery materials in racks 6 feet high.
  - d) Plastic tubing and furniture parts in racks 6 feet high.
4. Materials are stored both in racks, on pallets, and free standing. Maximum height of storage is 10 feet.
5. No alterations are planned at this time.

Sincerely,

John J. Jones  
President

JJJ:ab

Gary's Auto Body  
 17056 Gale Ave, Industry  
 7500 Square Feet, Block Building








(P.I.V.) Post Indicator Valve

 Fire Hydrant

# SAMPLE FLOOR PLAN

Gale Avenue

-  Gas Shut-Off
-  Fire Extinguisher
-  Access Keys
-  Water Shut-Off
-  Electrical Panel