



**CITY OF LODI**  
 COMMUNITY DEVELOPMENT DEPARTMENT  
 Building Inspection Division

**PERMIT APPLICATION**  
**Apartments**  
**Commercial - Industrial**

A permit application WILL NOT BE ACCEPTED unless all of the following items are submitted or complied with:

- \_\_\_ 1. **PLAN REVIEW FEE: To be paid at time of application.**
- \_\_\_ 2. **PERMIT APPLICATION FORM (attached): Completed and signed by the applicant.**
- \_\_\_ 3. **COMPLETED SAN JOAQUIN AIR POLLUTION COMPLIANCE QUESTIONNAIRE (attached)**
- \_\_\_ 4. **COMPLETED HAZARDOUS MATERIALS DISCLOSURE SURVEY FORM (attached)**
- \_\_\_ 5. **COMPLETED WATER/WASTEWATER QUESTIONNAIRE (attached)**
- \_\_\_ 6. **SIX (6) COMPLETE SETS OF PLANS (TWO (2) OF THE SETS MUST BE WET-SIGNED)**
  - \_\_\_ a. **Title Sheet**
  - \_\_\_ b. **Site plan**
  - \_\_\_ c. **Architectural *(if applicable)***
  - \_\_\_ d. **Civil site plan for sites requiring on-site hydrants, storm drain, sewer, water, etc. *(if applicable)***
  - \_\_\_ e. **Structural *(if applicable)***
  - \_\_\_ f. **Existing and proposed floor plans**
  - \_\_\_ g. **Plumbing (including gas, water and sewer line sizing, *if applicable*)**
  - \_\_\_ h. **Mechanical *(if applicable)***
  - \_\_\_ i. **Electrical (including load calculations & one-line diagram, *if applicable*)**
  - \_\_\_ j. **Civil plot plan for sites requiring on-site hydrants, storm drain, sewer, water, etc. systems**
  - \_\_\_ k. **Fire Sprinklers (if applicable, to be submitted on separate permit)**
- \_\_\_ 7. **SIX (6) ADDITIONAL SITE PLANS: Submitted on 8 1/2" x 11" paper. Indicate ALL existing and proposed structures on the lot with actual and/or proposed distances to all property lines.**
- \_\_\_ 8. **ONE (1) ADDITIONAL FLOOR PLAN (For San Joaquin County Assessor's Office)**
- \_\_\_ 9. **ENERGY CALCULATIONS: (Two (2) copies required, if applicable)**
- \_\_\_ 10. **TRUSS PLANS, CALCULATIONS, AND LAYOUT: (Two (2) copies required, if applicable). Manufacturer's truss plans and calculations must be identified and cross-referenced to layout plan. Calculations shall have the Engineers stamp and include a Wet signature of a California Licensed Engineer.**
- \_\_\_ 11. **SOILS REPORT: (Two (2) copies required, if applicable)**
- \_\_\_ 12. **JOB SPECIFICATIONS: (One (1) copy required, if applicable)**
- \_\_\_ 13. **STRUCTURAL CALCULATIONS: (Two (2) copies required, if applicable). All Engineering submittal documents shall have the appropriate stamp and include a Wet signature of a California Licensed Engineer or Architect.**

APPLICATION ACCEPTED BY: \_\_\_\_\_ DATE: \_\_\_\_\_



**CITY OF LODI**  
**COMMUNITY DEVELOPMENT DEPARTMENT**  
**221 WEST PINE STREET**  
**LODI, CA 95240**  
**(209) 333-6714      FAX (209) 333-6842**

### **TITLE SHEET**

1. Provide assessor's parcel number, site address with tenant space number (if applicable) and legal property owner on the Title Sheet.
2. Provide a detailed scope of work.
3. **A. PROJECTS REQUIRED BY STATE LAW TO BE PREPARED BY ENGINEER OR ARCHITECT:** All plans, specifications, reports and calculations shall be prepared by a licensed architect or registered civil or structural engineer. The final documents shall bear the seal and wet signature of said responsible person along with the license or registration number and expiration date on each sheet of drawings. Calculations, specifications, and reports may be so endorsed on the first page only on bound documents showing page number and total number of pages.  
  
**B. PROJECTS EXEMPT FROM REQUIREMENTS OF ENGINEER OR ARCHITECT TO PREPARE PLANS:** Provide name of person responsible for the preparation of the plans. A wet ink signature is required on all instruments of service.
4. Show on the Title Sheet all buildings, structures, and adjacent occupancies that may affect the proposed construction. Any portion of the project shown on the Site Plan that is not included with the building permit application file should be clearly identified as "not included" on the Site Plan or Title Sheet.
5. Provide a building code data legend on the Title Sheet. Include the following code information for each building or areas proposed:
  - a. Description of use
  - b. Occupancy group(s)
  - c. Type of construction
  - d. Sprinklers (yes or no)
  - e. Stories
  - f. Floor area
  - g. Occupant load
6. Show on Title Sheet the Special Inspection requirements per CBC Sec. 1704.
7. Provide the statement "This project shall comply with the 2019 California Building Code, 2019 California Plumbing Code, 2019 California Mechanical Code, 2019 California Electrical Code and the 2019 California Energy Code" on the Title Sheet.



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## Plan Check Routing Instructions

**Your plans will be accepted for plan review by the Building Inspection Division. The Building Inspection Division will distribute the plans to the appropriate City Departments.**

**Each Department will notify the project manager when their respective plan reviews have been completed and corrections are required and plans are ready to be picked up by applicant.**

**You, as the applicant, will be responsible to return a set of corrected plans along with the red lined plans back to the appropriate departments. The return of corrected plans and re-submittal(s) will be handled by each City Department.**

**Each City Department will return the “approved” plans to the Building Inspection Division.**

**It is very important to provide accurate information regarding your Project Manager. This person will be the contact for all departments.**

**The following department information is provided:**

DEPARTMENT	ADDRESS	CONTACT	PHONE #	E-MAIL
Public Works Dept	221 W. Pine Street		(209) 333-6706	
Electric Utility Dept	1331 S. Ham Lane		(209) 333-6763	
Planning Division	221 W. Pine Street		(209) 333-6711	
Code Enforcement	215 W. Elm Street		(209) 333-6823	
Building Inspection Div.	221 W. Pine Street		(209) 333-6714	



**COMMUNITY DEVELOPMENT DEPARTMENT**  
**Building Inspection Division**  
 221 West Pine St./PO Box 3006, Lodi, CA 95241-1910  
 (209) 333-6714

**CONSTRUCTION PERMIT APPLICATION**

**#1 IDENTIFY YOUR BUILDING PROJECT** Application Number: \_\_\_\_\_ Intake Person(office use only) \_\_\_\_\_

APN: \_\_\_\_\_ Job Site Address: \_\_\_\_\_ Suite or Space # \_\_\_\_\_

**This permit is to be issued in the name of the ( ) Licensed Contractor or ( ) the Property Owner as the permit holder of record who will be responsible and liable for the construction.**

Property Owner Information: Name \_\_\_\_\_ Tel No \_\_\_\_\_

Mailing Address \_\_\_\_\_

**Contact Name:** \_\_\_\_\_ **Ph#** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Project Type:** \_\_\_\_\_ Commercial \_\_\_\_\_ Residential **Permit Type(s):** \_\_\_\_\_ BLDG \_\_\_\_\_ MECH \_\_\_\_\_ PLUMB \_\_\_\_\_ ELEC

**Scope of Work:** \_\_\_\_\_

\_\_\_\_\_

If stucco, how many SF? \_\_\_\_\_

Contract Value: \$ \_\_\_\_\_ Const. Type: \_\_\_\_\_ Occupancy Type: \_\_\_\_\_

Is Bldg. Sprinklered? Yes No Is Bldg. Conditioned? Yes No Existing/Proposed Well or Septic? Yes No

Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_ # of Stories: \_\_\_\_\_ # of Units: \_\_\_\_\_

**Comm. Sq. Ftg.:** Office: \_\_\_\_\_ Retail: \_\_\_\_\_ Warehouse: \_\_\_\_\_ Other: \_\_\_\_\_

**Res. Sq. Ftg.:** Total Sq. Ftg. \_\_\_\_\_ Dwelling: \_\_\_\_\_ Gar: \_\_\_\_\_ # of cars \_\_\_\_\_ Patio/Porch: \_\_\_\_\_ Deck: \_\_\_\_\_

**#2 IDENTIFY WHO WILL PERFORM THE WORK (Complete either 2a or 2b)**

**2a – CALIFORNIA LICENSED CONTRACTOR'S DECLARATION**

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

Contractor Name and Address: \_\_\_\_\_

License Number and Class: \_\_\_\_\_ **Contractor Signature** \_\_\_\_\_

**2b – OWNER-BUILDER'S DECLARATION**

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code: Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).):

**( ) I, as owner of the property, or my employees with wages as their sole compensation, will do ( ) all of or ( ) portions of the work,** and the structure is not intended or offered for sale (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not built or improved for the purpose of sale.).

I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law.).

I am exempt from licensure under the Contractors' State License Law for the following reason:

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: <http://www.leginfo.ca.gov/calaw.html>.

Property Owner or Authorized Agent signature \_\_\_\_\_ Date \_\_\_\_\_

**#3 IDENTIFY WORKERS' COMPENSTATION COVERAGE AND LENDING AGENCY**

**WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.**

WORKERS' COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. Policy No. \_\_\_\_\_

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier \_\_\_\_\_ Policy No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

Name of Agent \_\_\_\_\_ Tel No \_\_\_\_\_

I certify that, in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

DECLARATION REGARDING CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Civil Code).

Lender's Name and Address \_\_\_\_\_

**#4 DECLARATION BY CONSTRUCTION PERMIT APPLICANT**

By my signature below, I certify to each of the following:

I am  a California licensed contractor or  the property owner\* or  authorized to act on the property owner's behalf\*\*.

I have read this construction permit application and the information I have provided is correct. I agree to comply with all applicable city and county ordinances and state laws relating to building construction. I authorize representatives of this city or county to enter the above-identified property for inspection purposes.

California Licensed Contractor, Property Owner\* or Authorized Agent\*\*: *\*requires separate verification form* *\*\*requires separate authorization form*

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

**SAN JOAQUIN VALLEY UNIFIED AIR POLLUTION CONTROL DISTRICT  
COMPLIANCE QUESTIONNAIRE**

4800 ENTERPRISE WAY, MODESTO, CA 95356  
(209) 557-6400 • FAX (209) 557-6475 • [asbestos.north@valleyair.org](mailto:asbestos.north@valleyair.org)

**ATTENTION:** \_\_\_\_\_ **FILE / PERMIT NUMBER:** \_\_\_\_\_

TO BE FILLED OUT BY APPLICANT FOR NEW DEVELOPMENTS OR PROJECTS INVOLVING  
DEMOLITION AND/OR RENOVATION AND SUBMITTED TO THE SJVAPCD OFFICE ABOVE

**BUSINESS/PROJECT NAME:** \_\_\_\_\_ **TODAY'S DATE:** \_\_\_\_\_

**PROJECT SITE ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_

**CONTACT NAME:** \_\_\_\_\_ **PHONE#:** \_\_\_\_\_ **FAX#:** \_\_\_\_\_

**DEVELOPER:** \_\_\_\_\_ **PHONE#:** \_\_\_\_\_ **FAX#:** \_\_\_\_\_

**PROJECT DESCRIPTION:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**NESHAP (Rule 4002- Building Demolition/Renovation)**

1. Will any load-bearing structure be removed?.....YES [ ] NO [ ]
2. Amount of existing building material to be disturbed during this project:  
Greater than **260 linear feet** of insulated or non-metallic pipe or similar material.....YES [ ] NO [ ]  
Greater than **160 square feet** of interior or exterior wall, flooring, ceiling, roofing, ducting or other material.....YES [ ] NO [ ]  
Greater than **35 cubic feet** of other building material debris.....YES [ ] NO [ ]

**Indirect Source Review (Rule 9510)** (Rules available at [www.valleyair.org](http://www.valleyair.org))

3. Type of Space To Be Constructed (check all that apply) [ ] Commercial [ ] Residential [ ] Educational [ ] Light Industrial  
[ ] Heavy Industrial [ ] Medical Office [ ] General Office [ ] Government [ ] Recreational [ ] Other/ Unidentified
4. Square Footage of Building(s) to be Constructed \_\_\_\_\_ ft<sup>2</sup> [ ] **Tenant Improvement (TI) to Existing Space Only**
5. Number of Residential Units to be Constructed \_\_\_\_\_

**Regulation VIII (Rule 8021- Dust Control at Construction and other Earthmoving Sites)**

6. Will **1 or more acres** of land be disturbed as part of this project?.....YES [ ] NO [ ]
7. Will **2500 cubic yards** of material be excavated or relocated **per day on any 3 days** during the project?..... YES [ ] NO [ ]

**FOR SJVAPCD USE ONLY**

- [ ] **Asbestos/ NESHAP requirements satisfied OR in progress**  
Comments \_\_\_\_\_
- [ ] **Regulation VIII (Dust Control) requirements satisfied OR in progress**  
Comments \_\_\_\_\_
- [ ] **Indirect Source Review requirements satisfied OR in progress**  
Comments \_\_\_\_\_

**REVIEWED BY:** \_\_\_\_\_ **DATE:** \_\_\_\_\_



**San Joaquin County  
Environmental Health Department  
1868 E Hazelton Avenue  
Stockton, California 95205**

**DIRECTOR**  
Donna Heran, REHS

**PROGRAM COORDINATORS**  
Robert McClellon, REHS  
Jeff Carruesco, REHS, RDI  
Kasey Foley, REHS  
Linda Turkatte, REHS  
Rodney Estrada, REHS  
Adrienne Ellsaesser, REHS

**Website: [www.sjgov.org/ehd](http://www.sjgov.org/ehd)  
Phone: (209) 468-3420  
Fax: (209) 468-3433**

**HAZARDOUS MATERIALS DISCLOSURE SURVEY**

A separate survey form is required for each business name and/or address in San Joaquin County.

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

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

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

Business Owner(s) Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

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

Nature of Business: \_\_\_\_\_ Fire District: \_\_\_\_\_

- Q1.       Yes     No      Does your business handle a hazardous material in any quantity at any one time in the year? See the definition of hazardous material on page 2 of this form.
- Yes     No      Does your business generate, treat, or store a hazardous waste in any quantity? (used oil, used antifreeze, waste solvent, etc.)

**If your answer is "No" to both questions in Q1, please print, sign, and date the bottom of this form and return to the address above.**

- Q2.       Yes     No      Does your business handle a hazardous material, or a mixture containing a hazardous material, in a quantity equal to or greater than 55 gallons, 500 pounds, or 200 cubic feet at any one time in the year?
- If "Yes", how long have you handled these materials at your business? \_\_\_\_\_
- If "Yes", check any of the following conditions that apply to your business:
- A.      The hazardous materials handled by this business are contained solely in a consumer product packaged for direct distribution to and use by the general public.
- B.      This business operates a farm for purposes of cultivating the soil, raising or harvesting an agricultural or horticultural commodity.

- Q3.       Yes     No      Does your business handle an Acutely Hazardous Material? See definition on page 2.
- Q4.       Yes     No      Is your business within 1,000 feet of the outer boundary of a school? (Grades K-12)

I have read the information on this form and understand my requirements under Chapter 6.95 of the California Health and Safety Code (HSC). I understand that if I own a facility or property that is used by tenants, it is my responsibility to notify the tenants of the requirements which must be met prior to issuance of a Certificate of Occupancy or beginning of operations. I declare under the penalty of perjury that the information provided on this disclosure survey is true and accurate to the best of my knowledge.

Owner or Authorized Agent:

Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

## San Joaquin County Environmental Health Department

# HAZARDOUS MATERIALS PROGRAM

This survey form is intended to identify businesses which need to comply with the hazardous materials emergency planning and reporting requirements of the California Health and Safety Code (HSC) Chapter 6.95. This Chapter requires businesses which handle hazardous materials to prepare emergency plans for their employees to use in an emergency. Businesses must submit a copy of this plan, along with an annual inventory of their hazardous materials, to public safety agencies for use in protecting emergency responders and the general public. In San Joaquin County, the Environmental Health Department (EHD) has been authorized to administer this program as the Certified Unified Program Agency or CUPA. Should you have any questions about the CUPA program or this form, please contact EHD at (209) 468-3420.

Please consider the following guidelines when completing the questions on page 1:

### Question 1:

The (HSC) section 25501(p) defines a "Hazardous Material" 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 or to the environment if released into the workplace or the environment. "Hazardous Materials" include but are not limited to, hazardous substances, hazardous waste, and any material that a handler or the administering agency has a reasonable basis for believing that it would be injurious to the health and safety of persons or harmful to the environment if released into the workplace or the environment. This includes, but is not limited to, fuels, petroleum products, paints, propane, oxygen, ammonia, chlorine, pesticides, fertilizers, and used oil. If a business generates any amount of hazardous waste they must enroll in the EHD Hazardous Waste Generator Program. Answer "Yes" if you use a material that meets the definition above in any quantity at least once in the year. If you are unsure, contact the EHD at (209) 468-3420 for assistance. If you answer "No" and at a later date your business, or a tenant on your property, begins handling hazardous materials, you must inform the EHD within 30 days.

### Question 2:

If you answer "Yes", you must meet the requirements of HSC Chapter 6.95. The EHD will be contacting you to provide assistance. These requirements must be met prior to issuance of a certificate of occupancy. If you answer "No", our office may conduct an inspection after you begin operations to verify your exemption.

The HSC establishes some modified requirements or program exemptions for certain uses of hazardous materials. If you answered "Yes" to questions 1 and 2, a determination must be made if your business meets one of the exemptions listed. Check the appropriate boxes on page 1. The EHD will contact you to make a final determination if your business meets the exemptions.

- A. Retail Exemption – Products packaged for direct distribution to the general public are exempt from the program. This exemption may not apply if any of the following conditions exist:
  - 1. The quantity handled creates an unacceptable public hazard
  - 2. The material is being used directly by the business as part of its operation in addition to being sold to the general public
  - 3. The general public doesn't have ready access to the product as stored by the business (e.g. in a warehouse).
  
- B. Modified Farm Exemption – Farms, as stated in Question 2B on page 1, must meet modified program requirements. The definition of a farm in the law doesn't include businesses providing commercial pest control services, fertilizer application services, product processing services, or packing shed services for farmers. Farms qualifying for the exemption are still required to submit an annual chemical inventory and fee to the San Joaquin County Office of the Agricultural Commissioner (OAC) along with other requirements. Please contact the OAC for further information at (209) 953-6000. Businesses operating a commercial business in addition to a farm as defined must comply with the requirements of the Hazardous Materials Program for those materials associated with the commercial business.

### Question 3:

The Federal and State governments have defined approximately 366 chemicals as an "Acutely Hazardous Material" (AHM). The most common AHM used in the county include: Chlorine, Ammonia, Sulfuric Acid, Methyl Bromide, Acrolein, Sulfur Dioxide, Formaldehyde, Nitric Acid, Vinyl Acetate Monomer, Hydrogen Peroxide, and many types of Pesticides.

Answer "Yes" if you use any of these specific chemicals in any quantity at any one time of the year. Contact the EHD if you're unsure for assistance.

### Question 4:

Answer "Yes" if the boundary of your property or facility is or will be within 1,000 feet of the boundary of a school. (Grades K – 12)



# CITY OF LODI

## DEVELOPMENT IMPACT FEES

PUBLIC WORKS DEPARTMENT

This questionnaire is for all new homes, commercial buildings and industrial buildings. Attached is the Fee and Service Charge Schedule to be used for calculation purposes.

Please type or print clearly:

Job site address of business or home: \_\_\_\_\_

\_\_\_\_\_

Mailing address: \_\_\_\_\_

\_\_\_\_\_

Person(s) to contact about questionnaire: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ or ( ) \_\_\_\_\_ FAX ( ) \_\_\_\_\_

Email: \_\_\_\_\_

### GENERAL INFORMATION

Building Size (commercial or industrial only): \_\_\_\_\_ square feet

Proposed Lot Size: \_\_\_\_\_ acres or square feet

Water Meter Size (circle one):  $\frac{3}{4}$ "    1"    1 ½"    2"    3"    Other    Unknown

Electrical Panel Size: Single Phase or Triple Phase (circle one), \_\_\_\_\_ volts \_\_\_\_\_ amps



# CITY OF LODI

PUBLIC WORKS DEPARTMENT

## WATER/WASTEWATER BUILDING PERMIT QUESTIONNAIRE

To Non-Residential Building Permit Applicants,

In order to adequately meet your water and wastewater (sewer) needs and fairly calculate appropriate charges, we are requesting information about your business.

Lodi Municipal Code, 13.12.170 specifies it is the applicant's responsibility to provide the City with a reasonable estimate of wastewater quantity and quality or other applicable units of measure as requested by the City.

Please complete and return the attached Water/Wastewater questionnaire.

The Water/Wastewater questionnaire will provide the City with information about the use of the commercial or industrial business in order to determine if the composition of discharged wastewater will differ from typical restroom use.

Please fill out the questionnaire and return to the address provided at the end of the form. The building permit will not be issued until the questionnaire is returned to the Building Department and reviewed by the Public Works Department.

If you have questions or require assistance with the questionnaire, call the office of the Laboratory Services Supervisor at (209) 333-6749.

City of Lodi  
Public Works Department



# CITY OF LODI

PUBLIC WORKS DEPARTMENT

## WATER/WASTEWATER BUILDING PERMIT QUESTIONNAIRE

Type or print clearly.

Name of proposed business: \_\_\_\_\_

Proposed Address of Lodi Operation: \_\_\_\_\_

Current Address of business \_\_\_\_\_

Name of Contact for questionnaire: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### General Information

Which category best describes your business? \_\_\_\_\_

- |                     |                            |                  |                                  |
|---------------------|----------------------------|------------------|----------------------------------|
| 1 Meeting place     | 9 Eating Place             | 17 Store         | 25 Apartment Building            |
| 2 Hotel             | 10 Eating Place- Deli Only | 18 Warehouse     | 26 Convalescent Home             |
| 3 Veterinary Clinic | 11 Food truck              | 19 Grocery Store | 27 Mobile Home Park              |
| 4 Post Office       | 12 Commissary              | 20 Bar           | 28 RV Dump Station               |
| 5 Funeral Parlor    | 13 Laundry                 | 21 Brewery*      | 29 Gym                           |
| 6 Service Station   | 14 Dry Cleaning            | 22 Winery*       | 30 Other, please specify         |
| 7 Car Wash          | 15 Medical Office          | 23 Barber        | *Applicant must complete         |
| 8 School            | 16 Office                  | 24 Hospital      | industrial application questions |

Give a brief description of how your proposed business may differ from the typical business in the category indicated. \_\_\_\_\_

Daily Hours of Operation \_\_\_\_\_ Number of Shifts \_\_\_\_\_ Days per Week \_\_\_\_\_

Will there be seasonal variations in operations?

Yes  No

If yes, explain \_\_\_\_\_

Does the owner operate a similar business?

Yes  No

Provide names(s) and address(es) of similar business(es) under the same ownership \_\_\_\_\_



# CITY OF LODI

PUBLIC WORKS DEPARTMENT

## WATER/WASTEWATER BUILDING PERMIT QUESTIONNAIRE

### Other Information

#### COMMERCIAL QUESTIONNAIRE (to be completed by all applicants):

Does the business have an existing grease waste interceptor?

Yes  No

Will there be or is there handling of chemicals or toxic substances? (not including packaged items to be sold)

Yes  No

If yes, list (attach Material Safety Data Sheets (MSDS)) \_\_\_\_\_

\_\_\_\_\_

Are there any special water needs of circumstances? (i.e. temperature, booster pump, minimum water pressure, etc.)

Yes  No

If yes, explain \_\_\_\_\_

\_\_\_\_\_

Are there any special wastewater (sewer) discharge needs or circumstances? (i.e. batch dumping, organics, grease, etc.)

Yes  No

If yes, explain \_\_\_\_\_

\_\_\_\_\_

Are there any special storm drain needs or circumstances? (i.e. washdowns, potential for spills, loading docks, vehicle/equipment cleaning/ repair, fuel dispensing areas). If yes, an isolation valve shall be shown on the plans.

Yes  No

If yes, explain \_\_\_\_\_

\_\_\_\_\_

#### INDUSTRIAL QUESTIONNAIRE (if not applicable proceed to signature section):

##### Water Needs

Estimated peak water requirements (in gallons per minute): \_\_\_\_\_

Estimated annual water requirements (gallons per year): \_\_\_\_\_

##### Wastewater (Sewer Needs)

Estimated peak daily discharge (in gallons per minute): \_\_\_\_\_



# CITY OF LODI

PUBLIC WORKS DEPARTMENT

## WATER/WASTEWATER BUILDING PERMIT QUESTIONNAIRE

Estimated annual wastewater discharge (in gallons per year): \_\_\_\_\_

Provide anticipated Biochemical Oxygen Demand (BOD) and Total Suspended Solids (TSS) in wastewater discharge, if known:

BOD: \_\_\_\_\_ mg/L    TSS: \_\_\_\_\_ mg/L

List components or properties of the wastewater other than restroom waste. (i.e. heavy metals, oil or grease, sand or inert materials, pH above 8.5 or below 6.5, organics, solvents, boiler or cooling chemicals, high temperature discharge, high amounts of suspended or dissolved solids, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other wastewater discharge needs or circumstances? (i.e. cooling water, sump pumps, batch discharges, etc.)

Yes  No

If yes, explain \_\_\_\_\_  
\_\_\_\_\_

**I attest that the information provided is correct to the best of my knowledge.**

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

Print name and title: \_\_\_\_\_

Return to:

Lodi City Hall  
Building Department  
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