

CLEARANCE OF CONDITIONS CERTIFICATE OF COMPLIANCE SUPPLEMENTAL FORM

INFORMATION:

An online DRP - Base Application - Permits and Reviews must be completed via EPIC-LA (https://epicla.lacounty.gov). Incomplete applications will not be accepted. Please refer to "File An Application" (planning.lacounty.gov/how-do-i/file-an-application).

Applicants are advised to consult with planning staff prior to applying at **213-974-6411** or info@planning.lacounty.gov.

Complete all sections (typed/legibly printed by hand) and upload this form and required documents to the Base Application. See the Certificate of Compliance Checklist for required materials.

Applicant Name		Subject property (Address or APN)
CONDITIONAL CERTIFICATE OF CO	MPLIANCE NUMBER	
OWNER'S CONSENT		
	tions without writte	ng will not accept any Clearance of Conditions n proof of clearance of recorded conditions by those
REQUIRED SIGNATURE(S) I, the owner of the subject pr this application:	operty, have reac	l, understand, and consent to the submission of
SIGNATURE (REQUIRED Owner)	PRINTNAME	DATE
	PRINTNAME	DATE
SIGNATURE (REQUIRED Owner) Staff Use Only C.C:		DATE Intake Planner: