



CITY OF YORBA LINDA

4845 CASA LOMA, YORBA LINDA CA, 92886-3364

BUILDING DIVISION (714) 961-7120

Revised Date: 7/1/2021

CERTIFICATE OF OCCUPANCY PERMIT REQUIREMENTS

Applicants must obtain, complete and submit the following forms available at the Building Division front counter:

1. Building Permit Application must be completed with all relevant information. A \$333.00 inspection fee is required for Certificate of Occupancy permits **that do not involve tenant improvements**. Once on site, the inspectors will be observing for possible non-permitted construction, inconsistencies in the application, any change in use, or a change in occupancy, exiting and the overall site for compliance.
2. Letter of Intent. Additional submittals and approvals may be required depending upon the nature of a business and documentation provided.
3. Orange County Fire Authority "Plan Submittal Criteria for COMMERCIAL Projects." Additional approval(s) may be required depending on answers provided.
4. **Site plan showing location of unit/suite, if the business is not located in a standalone building.**
5. **Floor plan showing current layout and square footage of unit/suite.**
6. **For Restaurants that do not involve tenant improvements: Current floor plan indicating square footage and notation of fixed or movable seating.**

Applicants must furnish a Letter of Intent, which includes the following information:

1. Explain in detail the nature of the business, products, clientele, distribution, number of employees, square footage of office, warehouse or other uses separately etc.
2. State who you are, in relationship to the Business.
3. Print and sign your name, date and phone number.
4. Property owner's name, address and phone number.
5. Indicate the hours of operation.
6. Identify all hazardous materials used, stored or produced along with their quantities.
7. Identify all flammable liquids or chemicals stored or produced and their quantities.
8. Identify all toxic liquids or chemicals used, stored or produced and their quantities.
9. Identify waste materials stored or produced and their method of disposal.
10. Identify any dust produced and its removal method.
11. Identify the quantity of vehicles parked inside the building.

If foods are to be cooked, served, and or consumed, Orange County Health Care Agency's approval is required prior to issuing a permit.

Business License applications must be obtained, completed and paid at the time of issuing the Certificate of Occupancy permit.



BUILDING PERMIT SUBMITTAL FORM

***Applicant's Name:** _____ ***Phone:** _____

***Applicant's Email:** _____

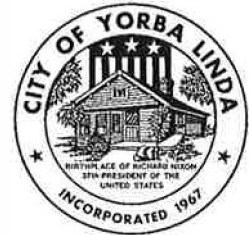
***Inspection Contact Name :** _____ ***Phone:** _____

Please fill in applicable information below and return this form to Building Division staff. If marked with *, information is required

<p>*Job Site Address _____</p> <p>*Owner's Name _____</p> <p>Mailing Address _____</p> <p>City, State, Zip _____</p> <p>Tel No _____</p>	<p style="text-align: center;">*Type of permit(s) requested</p> <p>(Be sure to fill in the work sheet for each permit discipline)</p> <p>Occupancy _____ Type of Construction _____</p> <p>Proposed Work _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Valuation: _____</p>
<p><input type="checkbox"/> Owner/Builder</p>	<p>Tenant Improvement: <input type="checkbox"/> N/A</p> <p>Type of Business _____</p> <p>Company Name _____</p> <p>Contact Person of Company _____</p> <p>Tel No _____</p>
<p><input type="checkbox"/> Architect/Designer's Name _____</p> <p>License No. _____</p> <p>Address _____</p> <p>City, State, Zip _____</p> <p>Tel No _____</p>	<p>*Square footage:</p> <p>Dwelling: _____</p> <p>Attached Garage: _____ Porch: _____</p> <p>Addition: _____</p> <p>Alteration/Remodel: _____</p> <p>Deck/Balcony: _____</p> <p>Attached Patio Cover: _____</p> <p>Reroof : _____ (sq)</p> <p>Detached Accessory structure: _____</p> <p>Pool / Spa: _____ / _____</p> <p>Fence/Retaining wall : _____ (linear feet)</p>
<p><input type="checkbox"/> Engineer's Name _____</p> <p>License No. _____</p> <p>Address _____</p> <p>City, State, Zip _____</p> <p>Tel No _____</p>	<p><input type="checkbox"/> Contractor's Company Name _____</p> <p>Contractor License No. _____</p> <p>Lic. Expiration date _____</p> <p>Contractor License Class _____</p>

Letter of Intent

(Please Print Clearly)



Note: When describing the nature of your business/operation, please describe the following: Basic materials used, their storage, type and height of storage, amounts stored, waste materials generated, method of disposal, and a list of agencies involved (submit official documents from such agencies). Provide a complete list of quantities of any and all hazardous materials stored within a room at a time (on a room by room basis, with an overall total for the entire building). Such materials shall be classified per California Fire Code 307.1(1) and 307.1(2) with supporting data (MSDS/Material Safety Data Sheets) in order to classify, quantify and justify the intended materials. Indicate if fumes or dust are generated and how they are controlled. This letter of intent must be executed by the business owner or authorized representative and must be signed by such person. Failure to comply with any of the abovementioned items may require the owner to provide a "Hazardous Materials Management Plan" per the California Fire Code.

To whom it may concern,

The name of the business is: _____

The business address is: _____

The nature of this business and clientele served are: _____

The number of employees will be: _____

The hours of operation will be: _____

The square footage of the existing: (Office) _____ (Warehouse) _____

(Other) _____

The resulting square footage after T.I.: (Office) _____ (Warehouse) _____

(Other) _____

Total square footage of the T.I.: _____

The Total number of existing restrooms: _____

Are Hazardous materials stored, used or produced? (Yes) _____ (No) _____ If yes, please specify type and quantities and provide a floor plan indicating the locations of all the materials.

Are Flammable liquids or chemicals stored, used or produced? (Yes) _____ (No) _____ If yes, specify type and quantities and provide a floor plan indicating the locations of such materials.

Are Toxic Liquids or chemicals stored, used or produced? (Yes) _____ (No) _____ If yes, specify type and quantities and provide a floor plan indicating the locations of such materials.

Will vehicles be parked inside the building? (Yes) _____ (No) _____ If yes, specify the quantities and provide a floor plan indicating the locations of such vehicles.

Will any waste materials be stored, used or produced? (Yes)_____ (No)_____ If yes, specify type and quantities and provide a floor plan indicating the locations of such materials.

Will any smoke, fumes or dust be produced? (Yes)_____ (No)_____ If yes, specify in detail the generating equipment and how the by products are controlled.

To the best of my knowledge, the foregoing information and attachments are true and correct:

Name of applicant: (Print)_____ (Signature)_____

Relationship to business: _____

Date:_____ Phone number:_____

Note: When a request for a Certificate of Occupancy requires the Tenant to construct Improvements, within or around an existing building, the Legal property owner or their leasing agent must sign below.

Name of Legal Property Owner (owner or agent): _____

Signature of owner or agent: _____

Address:_____ City:_____ Zip_____

Date:_____ Phone number:_____

Applicants are required to contact the Orange County Fire Authority (OCFA) at 714-573-6100 when an answer of yes is provided on the attached forms. When OCFA approval is required, applicants are also required to contact OCFA for all required inspections at 714-573-6150.

Please attach additional pages if more space is required to explain the required information.

Describe below in detail the nature of the business and its materials, types of storage, operations and waste materials generated _____

Office Use Only	Planning Department Review: _____	Staff's Signature _____	Date _____
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ORANGE COUNTY FIRE AUTHORITY

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Plan Submittal Criteria COMMERCIAL projects, MULTIFAMILY RESIDENTIAL projects and RESIDENTIAL TRACT developments

INSTRUCTIONS:

- Fill in the project/business address and provide a brief description of the scope of work and type of business operation that will take place.
- Answer questions 1 through 10, read and initial items 11 and 12, then complete and sign the certification section.
- If you answer: - "YES" to *any part* of questions 1 through 10, submit the type of plan indicated in italics to OCFA.
- In some cases, other plan types not indicated herein may also be necessary depending on specific conditions or operations.
- Visit www.ocfa.org for submittal information and locations. If you need assistance in filling out this form or have questions regarding requirements for review, please contact OCFA at 714-573-6108 or visit us at 1 Fire Authority Road, Irvine, CA 92602.

Address	Suite	City
Project Scope/Business Description		

- YES NO
- Construction of a new building, a new story, or increase the footprint of an existing building? Changes to roadways, curbs, or drive aisles? Addition, relocation, or modification of fire hydrants or fences/gates? Construction within 300 feet of an active or proposed oil well? *Fire Master Plan (PR145)*
 - Property is adjacent to a wildland area or non-irrigated native vegetation? *Fire Master Plan (PR145); a Fuel Modification Plan may also be required. (PR120, PR124)*
 - Located in or < 100' from a Division of Oil, Gas, and Geothermal Resources (DOGGR) field boundary, < 300' from an oil/gas seep, or < 1000' from a landfill? *Methane Work Plan. (PR170)*
 - Installation/modification/repair of underground piping, backflow preventers, or fire department connections serving private fire hydrant/sprinkler/standpipe systems? *Underground Plan. (PR470, PR475)*
 - Drinking/dining/recreation/meetings/training/religious functions or other gatherings in a room > 750 sq.ft. (> 1,000 sq.ft. for training/adulteducation) or > 49 people? Healthcare/outpatient services for > 5 people who may be unable to immediately evacuate without assistance? Education for children (*academic tutoring for ages 5+ is exempt unless classified as an E occupancy by the Building Official*)? Adult/child daycare? 24-hour care/supervision? Incarceration or restraint? Hotel/apartment or residential facility with 3+ units and 3+ stories (*3-story townhouses/rowhouses where an independent direct exit to grade is provided for dwelling are exempt*)? Congregate housing/dormitories with 17+ people? High-rise structure (55+ feet to highest occupied floor level)? *Architectural Plan (PR200-PR285)*
 - Installation/modification of locks delaying or preventing occupants from leaving a space or requiring use of a card, button, or similar action to open a door in the direction of exit travel? *Architectural, Sprinkler, and/or Alarm Plan depending on the occupancy and type of device installed (PR200-PR280, PR420-PR425, PR500-PR520)*
 - Installation/modification/use of spray booths; dust collection; dry cleaning; industrial ovens/drying equipment; industrial/commercial refrigeration systems; compressed gasses; tanks for cryogenic or flammable/combustible liquids; vapor recovery; smoke control; battery back-up/charging systems (> 50 gal. electrolyte, > 1,000 lb. lithium ion); welding/brazing/soldering, open flame torches, cutting/grinding; or other similar operations? *Special Equipment Plan (PR315, PR340-PR382)*
 - Storage/use/research with flammable/combustible liquids or other chemicals? Motor vehicle/aircraft maintenance/repair? Cabinetry/woodworking/finishing facility? *Chem Class & floor plan (full architectural plan if H occupancy); Special Equipment Plans may be necessary. (PR315-PR360, PR232-PR240)*
 - Storage or merchandizing areas in excess of 500 sq. ft. where items are located higher than 12' (6' for high-hazard commodities, plastic, rubber, foam, etc.)? *High-piled Storage Plan (PR330)*
 - Cooking under a Type I commercial hood; installation or modification of a fire extinguishing system located in a commercial cooking hood? *Hood & Duct Extinguishing System, not just the hood mechanical plan. (PR335)*

Initial each of the following two items indicating that you have read and understand the statement:

- *Sprinklers/Alarms: Consult Building/Fire Codes and ordinances to determine sprinkler/alarm requirements; if a system is required, plans shall be submitted for OCFA review. Existing buildings undergoing remodel must be evaluated by a licensed contractor to determine if modification is needed; if so, contractor shall submit plans prior to making modifications.
Initials _____
- Fire Hazard Severity Zone: Consult maps available at building department or on OCFA website to determine if your site is located in a FHSZ. Buildings in a FHSZ may be subject to special construction requirements detailed in CBC Chapter 7A or CRC R327—the building department will determine specific requirements.
Initials _____

I certify under penalty of perjury under the laws of the State of California that the above is true:

Print Name	Signature
Phone Number ()	Date / /

Building Department: *If you have verified that all of the questions have been answered accurately as "NO", and the project does not otherwise require OCFA review of sprinkler or alarm plans*, then you may accept this signed form as a written release that OCFA review is not required. Should you still require that the applicant have plans approved by OCFA, please initial here _____ or attach an OCFA referral form and have the applicant submit the form along with the appropriate plans and fees for OCFA review.*



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DISABILITY ACCESS REQUIREMENTS AND RESOURCES

NOTICE TO APPLICANTS FOR BUSINESS LICENSES AND COMMERCIAL BUILDING PERMITS:

Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies:

DEPARTMENT OF
GENERAL SERVICES,
Division of the State
Architect, CASp Program
www.dgs.ca.gov/dsa
www.dgs.ca.gov/casp

DEPARTMENT OF
REHABILITATION
Disability Access Services
www.dor.ca.gov
[www.rehab.cahwnet.gov/
disabilityaccessinfo](http://www.rehab.cahwnet.gov/disabilityaccessinfo)

DEPARTMENT OF
GENERAL SERVICES,
California Commission on
Disability Access
www.cdda.ca.gov
[www.cdda.ca.gov/resourc
es-menu/](http://www.cdda.ca.gov/resources-menu/)

CERTIFIED ACCESS SPECIALIST INSPECTION SERVICES

Compliance with state and federal construction-related accessibility standards ensures that public places are accessible and available to individuals with disabilities. Whether your business is moving into a newly constructed facility or you are planning an alteration to your current facility, by engaging the services of a Certified Access Specialist (CASp) early in this process you will benefit from the advantages of compliance and under the Construction-Related Accessibility Standards Compliance Act (CRASCA, Civil Code 55.5155.545), also benefit from legal protections.

Although your new facility may have already been permitted and approved by the building department, it is important to obtain CASp inspection services after your move-in because unintended access barriers and violations can be created. For example, placing your furniture and equipment in areas required to be maintained clear of obstructions. For planned alterations, a CASp can provide plan review of your improvement plans and an access compliance evaluation of the public accommodation areas of your facility that may not be part of the alteration.

A CASp is a professional who has been certified by the State of California to have specialized knowledge regarding the applicability of accessibility standards. CASp inspection reports prepared according to CRASCA entitle business and facility owners to specific legal benefits, in the event that a construction-related accessibility claim is filed against them.

To find a CASp, visit www.apps2.dgs.ca.gov/DSA/casp/casp_certified_list.aspx.



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DISABILITY ACCESS REQUIREMENTS AND RESOURCES - CONTINUED

GOVERNMENT TAX CREDITS, TAX DEDUCTIONS AND FINANCING

State and federal programs to assist businesses with access compliance and access expenditures are available:

Disabled Access Credit for Eligible Small Businesses

FEDERAL TAX CREDIT—Internal Revenue Code Section 44 provides a federal tax credit for small businesses that incur expenditures for the purpose of providing access to persons with disabilities. For more information, refer to Internal Revenue Service (IRS) Form 8826: Disabled Access Credit at www.irs.gov.

STATE TAX CREDIT—Revenue and Taxation Code Sections 17053.42 and 23642 provide a state tax credit similar to the federal Disabled Access Credit, with exceptions. For more information, refer to Franchise Tax Board (FTB) Form 3548: Disabled Access Credit for Eligible Small Businesses at www.ftb.ca.gov.

Architectural and Transportation Barrier Removal Deduction

FEDERAL TAX DEDUCTION—Internal Revenue Code Section 190 allows businesses of all sizes to claim an annual deduction for qualified expenses incurred to remove physical, structural and transportation barriers for persons with disabilities. For more information, refer to IRS Publication 535: Business Expenses at www.irs.gov.

California Capital Access Financing Program

STATE FINANCE OPTION—The California Capital Access Program (CalCAP) Americans with Disabilities Act (CalCAP/ADA) financing program assists small businesses with financing the costs to alter or retrofit existing small business facilities to comply with the requirements of the federal ADA. Learn more at www.treasurer.ca.gov/cpcfca/calcap/.

FEDERAL AND STATE LEGAL REQUIREMENTS ON ACCESSIBILITY FOR INDIVIDUALS WITH DISABILITIES

AMERICANS WITH DISABILITIES ACT OF 1990 (ADA) — The ADA is a federal civil rights law that prohibits discrimination against individuals with disabilities, and requires all public accommodations and commercial facilities to be accessible to individuals with disabilities. Learn more at www.ada.gov.

CALIFORNIA BUILDING CODE (CBC) — The CBC contains the construction-related accessibility provisions that are the standards for compliant construction. A facility's compliance is based on the version of the CBC in place at the time of construction or alteration. Learn more at www.bsc.ca.gov.