



**CITY OF COMPTON
PUBLIC WORKS DEPARTMENT**

205 S. Willowbrook Ave.
Compton, CA 90220

Phone: (310) 605-5505 Fax: (310) 761-1417

Public Works Plan Review Form

Complete Site Address:		
Assessor Parcel No.:		
Book:	Page:	Parcel:
Project Description:		
Property Owner:		
Name:	Phone:	Fax:
Owner's Mailing Address:		
City:	State:	Zip:
Applicant:		
Name:	Phone:	Fax:
Applicant's Address:		
City:	State:	Zip:
Engineer:		
Name:	Phone:	Fax:
Engineer's Address:		
City:	State:	Zip:

Items Submitted:

- Grading & Drainage Plans (___ sheets)
- Erosion Control Plans (___ sheets)
- Geotechnical/Soils Report (___ sets)
- Hydrology Report (___ sets)
- SUSMP (___ sets)
- SWPPP (___ sets)
- Other: _____

Submittal:

- 1st Submittal
- 2nd Submittal
- 3rd Submittal after
- 4th or Subsequent Submittal (Note: additional fee due after 3rd Submittal)

Fee paid: \$ _____

Receipt No.: _____

I certify that I have read this application and state that the above is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of the City to enter upon the above mentioned property for inspection purposes.

Signature of Applicant

Date