



COUNTY OF LOS ANGELES

Department of Public Works  
BUILDING AND SAFETY DIVISION

DATE 1-20-09

To: House Numbering Coordinator

From: District Name / No. 12.00

(choose one)

- New Address Assignment(s) on a Vacant Lot.
- Actual Address Change.
- Adding New Address(es) to existing address(es) that will remain.
- New Address Assignment(s) where old address(es) will no longer be used.
- Temporary Address
- Utility Address

Remarks / Special Circumstances AT&T Pedestal  
in public right of way

Building Permit No. \_\_\_\_\_ HN Map No.\* 108-173

Assessor Parcel No.\* \_\_\_\_\_ Locality / City\* La Brea Hts

New Address(es)\* 5703<sup>1/2</sup> La Cienega Bl Zip\* 90056  
Please write St, Ave, Blvd, etc...

Old Address(es) \_\_\_\_\_ Zip \_\_\_\_\_  
(To Be Changed) Please write St, Ave, Blvd, etc...

Existing Address(es) 5705 La Cienega Bl Zip 90056  
(To Remain) Please write St, Ave, Blvd, etc...

Lot No. \_\_\_\_\_ Block No. \_\_\_\_\_ Tract No. \_\_\_\_\_

\* Required Field

By: \* Sheryl M. Witt  
Title: BPT II

ADDRESS NUMBERS SHALL BE AT LEAST 3 INCHES IN HEIGHT AND PLACED ON THE HOUSE, FACING THE STEEET. If the numbers are not visible from the street, an additional set shall be placed on a signpost, fence, mailbox, etc. so as to be clearly visible from the street.

LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS  
DEVELOPMENT AND PERMITS TRACKING SYSTEM

DATE: 01/20/09  
TIME: 14:11:27  
ROUTE TO: BS1200

DPR4051  
PAGE 1

REQUESTED BY: XXXXXXXX

MISCELLANEOUS FEE RECEIPT

RECEIPT NUMBER: BS12000042144

THIS IS A RECEIPT FOR THE AMOUNT OF FEES COLLECTED AS LISTED BELOW. THE RECEIPT NUMBER, DATE AND AMOUNT VALIDATED HEREON HAS ALSO BEEN VALIDATED ON YOUR APPLICATION OR OTHER DOCUMENT AND HAS BECOME A PART OF THE RECORD OF THE COUNTY OF LOS ANGELES, FROM WHICH THIS RECEIPT MAY BE IDENTIFIED. PLEASE RETAIN THIS RECEIPT AS PROOF OF PAYMENT. ANY REQUEST FOR REFUND MUST REFERENCE THIS RECEIPT NUMBER.

PAYMENT ACCEPTED FOR: 5703 "U" LA CIENEGA

DATE PAYMENT RECEIVED: 01/20/09 14:11:25  
PAYOR NAME: BURGESS, JOAN  
ADDRESS: P.O. BOX 293554 PHELAN CA 92329-3554  
PHONE: (760) 868-6079

FEE ITEM FEE DESCRIPTION	STATISTICAL CODE	CALCULATION FACTOR	UNIT OF MEASURE	EXTENDED AMOUNT
16 HOUSE NUMBERING	A019236	1.00	EACH	\$50.70
TOTAL FEES PAID:				\$50.70
PAYMENT TYPE	REFERENCE	AMT TENDERED	CHANGE GIVEN	AMOUNT APPLIED
CHECK	3044	\$50.70	\$0.00	\$50.70

OFFICE: BS 1200      DRAWER: SW  
CASHIER: SM

ITEMS WITH AN ASTERISK (\*) WILL REQUIRE FURTHER DEPOSITS  
WHENEVER ACTUAL COSTS EXCEED THE DEPOSIT AMOUNT

\*\*\*\*\* END OF REPORT \*\*\*\*\*