



INVESTIGATION REPORT  
BUILDING AND SAFETY/LAND DEVELOPMENT DIVISION

Location of Problem: 5877 S. Compton Ave

Locality: FLORENCE

Description of Problem: CAR RAN INTO BUILDING  
RESULTING IN SOME STRUCTURAL DAMAGES

Requested by: CAPT BO STOUT #6 Phone: 323 525-5000

Address: \_\_\_\_\_

Request call back after investigation? Yes  No

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Assigned/Referred to: C. RODGERY Date: 6-8-2002

Report of Investigation: \_\_\_\_\_

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

Investigator: [Signature] Title: BLVD Insp Date: 6-8-2002

Copy Sent to: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

Report Phoned to: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

JOB ADDRESS 5877 1/2 Compton Ave

OWNER \_\_\_\_\_

# NOTICE OF VIOLATION

The work performed is in violation of the Ordinance(s) indicated below:

<input checked="" type="checkbox"/> Building Code	_____ Plumbing Code
_____ Mechanical Code	_____ Electrical Code
_____ Grading Code	_____ Zoning Code
_____	_____

DESCRIPTION: OBTAIN PERMITS TO REPAIR YOUR BUILDING DAMAGE BY AUTOMOBILE NORTH EAST CORNER WALL DAMAGED.

## STOP ALL WORK

Submit plans for the cited work within 10 days to the office listed above and apply for a plan check for the required permit(s).

Obtain permit(s) within 10 days at the office listed above for the cited work.

\_\_\_\_\_ A referral has been made to the Enforcement Section of the Department of Regional Planning.

10-9-2000 [Signature]  
DATE INSPECTOR'S SIGNATURE