

Los Angeles County Department of Public Works

GEOTECHNICAL AND MATERIALS ENGINEERING DIVISION

GEOTECHNICAL DOCUMENT REQUEST FORM

Requested By: Date:			(Please type or print)	
I prefer to be co	ontacted by:	E-mail Telephone U.S. Mail		
DOCUMENTS REQUESTED (From Development Review Section files only): Property address(es), APN's, or Subdivision and Lot Numbers:				
(Optional)	Are the doce Yes	uments requested b	peing sought for the purpose of a claim or litigation?	
If yes, please in Firm Name:				
Case Name:				
Case Number:		Court Location:		

Please email this completed form to: GMEDRequests@dpw.lacounty.gov