CERTIFICATE OF COMPLIANCE

WATER CONSERVATION ORDINANCE

Property Address:	DRESS SHOWN MUST MATCH SER	VICE ADDRESS ON N	MUNICIPAL SERVICES BILL.	
City Zip Code:	Number of F	loors:		
Total number of toilets in Residence	ce or Building:			
Number of new ultra-low flush toil	ets installed:			
THIS IS TO CERTIFY THAT, BASI SHOWERHEAD IN THE ABOVE MENTINO. 172075. ALL PROPERTIES MUST ULTRA-LOW-FLUSH TOILETS PRIOR PROCESSING FEE MUST BE FILED WAFTER COMPLETION OF THE INSPECT	ONED BUILDING COMPLIE HAVE LOW-FLOW SHOWE TO THE CLOSE OF ESCRIVITH THE DEPARTMENT O	ES WITH THE RE ERHEADS. RESI OW. THIS CER	QUIREMENTS OF CITY ORDINANCE DENTIAL PROPERTIES MUST HAVE TIFICATE AND THE APPROPRIATE	
PROCESSING FEE SCHEDULE	FEE	INDICATE TYPE OF BUILDING: ☐ SINGLE FAMILY DWELLING /DUPLEX		
SINGLE FAMILY DWELLING/DUPLEX/CONDO	\$15,00		☐ CONDOMINIUM ☐ APARTMENT BUILDING:	
COMM/IND/APT.BLDG/.SM. BUS. 1-3 FLOORS	\$25.00	SPECIFY NO. OF UNITS COMMERCIAL/INDUSTRIAL BUILDING SMALL BUSINESS*		
COMM/IND/APT.BLDG. 4-9 FLOORS	\$50.00			
COMM/IND/APT. BLDG. 10 FLOORS	\$75.00 buildin		*Small business defined as Commercial/Industrial	
COMM./IND./ APT. BLDG. OVER 10 FLOORS			building with 2 or fewer tank-type toilets and 2 or fewer showers. No urinals.	
TOTAL FEE DUE	\$			
PLEASE MAKE CHECK PA	YABLE TO: LOS ANGELES	S DEPARTMENT	OF WATER AND POWER	
PRINT NAME OF RETROFITTER, CONTRACTO	DETDOETTED	CONTRACTOR OR	TELEPHONE NUMBER	
OR REAL ESTATE AGENT/ BROKER NAME		KER LICENSE#	, Eddi Holla Monager	
SIGNATURE RETROFITTER, CONTRACTOR O	R REAL ESTATE AGENT / BROKI	ER .	DATE	
PRINT NAME OF OWNER (SELLER)	SIGNATURE OF OWNER (SELLER)	DATE	
PRINT NAME OF BUYER	SIGNATURE OF BUYER		DATE	
		RETURN ORIGIN	AL WITH PAYMENT TO:	
NAME OF ESCROW COMPANY	·	LOS ANGELES D ACCOUNT SERV P.O. BOX 515406 LOS ANGELES, C (888) 284-6130	ROOM L63	
ESCROW CLOSING DATE		(000) x04-013A		