Small Business Permit Assistance Program

To request an appointment timeframe Email: smallbusiness@oxnard.org



Due to the time constraints, the following are types of projects NOT allowed in Small Business Program:

- Code Compliance
- Change of Occupancy
- New Restaurants or significant restaurant modification •
- Small projects that involve 4 or fewer departments
- Projects larger than 3,000 square feet Fire Sprinkler Plans

Project Information

Project Address	
Contact Name	Contact Phone ()
Contact Email Address	
Describe Project	
☐ Information Only Scope Of Work: (Check All That Apply)	Meeting Purpose ☐ Review (Pre-submittal) ☐ Permit (during meeting)
Partitions	☐ Sprinklers (Alteration? ☐ Yes ☐ No)
☐ Electrical	☐ Food Establishments
Mechanical	☐ Exterior Modifications
Rooftop Equipment Specify	☐ Plumbing Specify
Change of Use. Specify	
Medical X-Ray? Yes No Other? Specify	Medical Gas? Yes No OSHPD Clinic? Yes No
☐ Single tenant ☐ Multi Building Square Footage (Sq.ft.): Des	Building Information ple tenant ☐ This building requires structural calculations sign Professional Name
	Submitting Plans
Complete this form below and email it tSubmit plans by Thursday, the week be	o smallbusiness@oxnard.org efore the scheduled meeting (if not meeting subject to cancellation).
requirement applies to all businesses	is required for anyone doing work in the City of Oxnard. This including: d Party Agents •Architects •Surveyors •Draftsmen •Developers •Contractors
DEPARTMENT USE ONLY	
Date: Time	e: Set by:
Building	Planning Electrical Fire Source Control