



DEPARTMENT OF CITY PLANNING
 Environmental Analysis Unit (13-2552)
 200 N. Spring Street, Room 750
 Los Angeles, CA 90012

FIRST CLASS MAIL
 U.S. POSTAGE
PAID
 LOS ANGELES, CA
 PERMIT NO. 1494


RECEIVED
 CITY OF LOS ANGELES

DEC 09 2014

ENVIRONMENTAL
 UNIT

OCCUPANT
 1419 HAVENHURST DR #103
 WEST HOLLYWOOD CA 90046

9001208743
 900463821057

MAIL 918 LE 1009 / 212/02/14
 RETURN TO SENDER
 UNABLE TO FORWARD
 BC: 90012324375 *0262-04622-18-46


SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Construction Services Unit
 City of Los Angeles Fire Department
 200 N. Main St.
 Los Angeles, CA 90012 Mail Stop 250

2. Article Number 7014 2120 0003 7896 8666
 (Transfer from service label)
 PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
[Signature] Addressee
 B. Received by (Printed Name) C. Date of Delivery
[Signature]
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ray Saidi
 Bureau of Engineering Land
 Development/Mapping Division
 201 N. Figueroa St., Suite 200
 Los Angeles, CA 90012 Mail Stop 901

2. Article Number 7014 2120 0003 7896 8628
 (Transfer from service label)
 PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
[Signature] Addressee
 B. Received by (Printed Name) C. Date of Delivery
[Signature]
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type
 Certified Mail® Priority Mail Express™
 Registered Return Receipt for Merchandise
 Insured Mail Collect on Delivery

4. Restricted Delivery? (Extra Fee) Yes