1

76A563 CE-806 (6/78)

# APPLICATION FOR ELECTRICAL PERMIT

**COUNTY OF LOS ANGELES** — **BUILDING AND SAFETY**

| FOR APPLICANT TO FILL IN | EACH | NO. | FEE |
|---|---|---|---|
| New Residential Bldgs. & Pools | | | |
| 1 & 2-Family, Sq. Ft. _____ | $ .025 | — | $ |
| Multi-family Sq. Ft. _____ | .02 | — | |
| Residential Swimming Pools | 25.00 | | |
| Outlets: Rec. ___ Light ___ Sw. ___ First 20 | .50 | | |
| Total No. _____ Additional | .30 | | |
| Lighting Fixtures First 20 | .50 | | |
| Total No. _____ Additional | .30 | | |
| Fixed Appliances Not Over 1 HP | | | |
| Range ___ Heater ___ D.W. ___ | | | |
| Oven ___ Dryer ___ W.M. ___ | | | |
| Top ___ FAU ___ W.H. ___ | | | |
| Hood ___ Fan ___ Other ___ | | | |
| Disp. ___ Room Air Cond. ___ | 2.50 | | |
| Power Apparatus & Large Appliances | | | |
| Size & Type HP, KW, KVA, or KVAR | | | |
| _____ Up to 1 Incl. | 2.50 | | |
| _____ Over 1 to 10 Incl. | 5.00 | | |
| _____ Over 10 to 50 Incl. | 12.50 | | |
| _____ Over 50 to 100 Inc. | 25.00 | | |
| _____ Over 100 | 40.00 | | |
| Services | | | |
| 0 - 200 Amp. Under 600 V | 12.50 | 2 | 25 — |
| 201-1000 Amp. Under 600 V | 25.00 | | |
| Over 1000 Amp. or Over 600 V | 50.00 | | |
| Temp. Power Pole & Appurtenances | 10.00 | | |
| Sign with One Branch Circuit | 10.00 | | |
| Additional Sign Branch Circuits | 2.00 | | |
| Misc. Conduits & Conductors | 10.00 | | |
| Other (See Complete Fee Schedule) _____ | | | |
| | | | |
| | | | |
| PERMIT FEE (Sub-Total) | | | 25 — |
| PLAN CHECKING FEE (One-Fourth Permit Fee) | | | |
| PERMIT ISSUING FEE $7.00 | | | 7 — |
| TOTAL FEE | | | 32 — |

JOB ADDRESS 3110 W. 134TH PL.

LOCALITY HAWTHORNE

NEAREST CROSS ST.

OWNER OR FIRM NAME FRANCE SALAMA

MAIL ADDRESS SAME

CITY Tel. No.

PLAN CHECK APPLICANT

ADDRESS

CITY Tel. No.

PERMIT APPLICANT ALCAIN ELECTRIC

ADDRESS 15216 GREVILLEA AVE

CITY LAWNDALE Tel. No. 772-1515

LICENSE OR REG. NUMBER 308532 Class. C10

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

PERMITEE SIGNATURE

DISTRICT NO. 7

PROCESSED BY 262A

w/Con file 3-23-81

**INSPECTION INFORMATION ON REVERSE SIDE**

PLAN CHECK VALIDATION

#••••2

1••3200

••••3200

0415-80

PERMIT VALIDATION

Check

INSPECTION FINALED

date: 2/2/83 By

INSPECTOR COPY

Ps

| APPROVALS | DATE | INSPECTOR'S SIGNATURE |
|---|---|---|
| TEMP. POWER POLE | | |
| UNDERSLAB WORK | | |
| ROUGH CONDUIT | | |
| WIRING | | |
| FIXTURES | | |
| POWER AUTHORIZED | | |
| UTILITY CO. NOTIFIED | | |
| FINAL | *Enter on Front* | |

NOTES

1

76A663 CE-806 (11 / 78)

# APPLICATION FOR ELECTRICAL PERMIT

## COUNTY OF LOS ANGELES

## BUILDING AND SAFETY

**FOR APPLICANT TO FILL IN**

| | EACH | NO. | FEE | |
|---|---|---|---|---|
| New Residential Bldgs. & Pools | | | | |
| 1 & 2-Family, Sq. Ft. | $ .025 | — | $ | |
| Multi-family Sq. Ft. | .02 | — | | |
| Residential Swimming Pools | 25.00 | | | |
| Outlets: Rec. 4 Light 2 Sw. | | | | |
| First 20 | .50 | | 3 | — |
| Total No. 6 Additional | .30 | | | |
| Lighting Fixtures 2 First 20 | .50 | | 1 | — |
| Total No. Additional | .30 | | | |
| Fixed Appliances Not Over 1 HP | | | | |
| Range ___ Heater ___ D.W. ___ | | | | |
| Oven ___ Dryer ___ W.M. ___ | | | | |
| Top ___ FAU ___ W.H. ___ | | | | |
| Hood 1 Fan ___ Other ___ | | | | |
| Disp. ___ Room Air Cond. ___ | 2.50 | | 2 | 50 |
| Power Apparatus & Large Appliances | | | | |
| Size & Type HP, KW, KVA, or KVAR | | | | |
| ___ Up to 1 Incl. | 2.50 | | | |
| ___ Over 1 to 10 Incl. | 5.00 | | | |
| ___ Over 10 to 50 Incl. | 12.50 | | | |
| ___ Over 50 to 100 Inc. | 25.00 | | | |
| ___ Over 100 | 40.00 | | | |
| Services | | | | |
| 0 - 200 Amp. Under 600 V | 12.50 | | | |
| 201 - 1000 Amp. Under 600 V | 25.00 | | | |
| Over 1000 Amp. or Over 600 V | 50.00 | | | |
| Temp. Power Pole & Appurtenances | 10.00 | | | |
| Sign with One Branch Circuit | 10.00 | | | |
| Additional Sign Branch Circuits | 2.00 | | | |
| Misc. Conduits & Conductors | 10.00 | | | |
| Other (See Complete Fee Schedule) ___ | | | | |
| PERMIT FEE (Sub-Total) | | | | |
| PLAN CHECKING FEE (One-Fourth Permit Fee) | | | | |
| PERMIT ISSUING FEE $7.00 | | | 7 | — |
| TOTAL FEE | | | 13 | 50 |

JOB ADDRESS 3110 W. 134 TH PLACE

LOCALITY HAWTHORNE

NEAREST CROSS ST. 135 TH + CRENSHW

OWNER OR FIRM NAME F. SALAMA

MAIL ADDRESS 3110 W. 134 TH PL.

CITY HAWTHORNE Tel. No. 795-6942

PLAN CHECK APPLICANT

ADDRESS

CITY Tel. No.

PERMIT APPLICANT

ADDRESS

CITY Tel. No.

LICENSE OR REG. NUMBER Class.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

PERMITEE SIGNATURE [signature]

DISTRICT NO. 7

PROCESSED BY [signature]

INSPECTOR COPY

**INSPECTION INFORMATION ON REVERSE SIDE**

PLAN CHECK VALIDATION

PERMIT VALIDATION

#9308A
#•••••2
1••1350
•••1350
0417-80

INSPECTION FINALED

date: 2/2/83 By [signature]

Ps

| APPROVALS | DATE | INSPECTOR'S SIGNATURE |
|---|---|---|
| TEMP. POWER POLE | | |
| UNDERSLAB WORK | | |
| ROUGH CONDUIT | | |
| WIRING | | |
| FIXTURES | | |
| POWER AUTHORIZED | | |
| UTILITY CO. NOTIFIED | | |
| FINAL | *Enter on Front* | |

NOTES

WORKER'S COMPENSATION CERTIFICATION

I certify that I will be responsible for the work to be done under this permit and that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.

I further certify that if during the course of construction under this permit I should become subject to Worker's Compensation requirements, I will file the required certificate of insurance and realize that failure to do so will necessitate suspension of the permit. I have received an explanation of the limits and conditions of this certificate and have read and fully understand them.

Signature

Title

Date 4-17-80

76A667A
CE 817 (REV. 11/78)

1

# APPLICATION FOR PLUMBING PERMIT

## COUNTY OF LOS ANGELES BUILDING AND SAFETY

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

| NUMBER | FIXTURE OR ITEM | @ | FEE | |
|---|---|---|---|---|
| | WATER CLOSET | | | |
| | BATH TUB | | | |
| | SHOWER | | | |
| | LAVATORY | | | |
| 1 | SINK | | 3 | — |
| | DISHWASHER | | | |
| | CLOTHES WASHER | | | |
| | SWIMMING POOL RECEPTOR | | | |
| | LAWN SPRINKLER SYSTEM | | | |
| | WATER HEATER | | | |
| | GAS SYSTEM OUTLETS | | | |
| | OUTLETS OVER 5 PER SYSTEM | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Plan check fee | | | | |
| PLUMBING PERMIT ISSUING FEE $ | | | 7 | — |
| | TOTAL FEE | | 10 | — |

Plan check applicant

Name

Address

City Tel. No.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF, AND INTEND TO RESIDE IN THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

SIGNATURE OF PERMITTEE [signature]

DISTRICT NO. 7

PROCESSED BY [signature]

INDUSTRIAL WASTE APPROVAL

BUILDING ADDRESS 3110 W. 134 TH PL

LOCALITY HAWTHORNE CA.

NEAREST CROSS ST. 135TH + CRENSHW

OWNER F. Salama

MAIL ADDRESS 3110 W. 134 TH PL.

CITY HAWTHORNE TEL. NO. 795-6942

CONTRACTOR

ADDRESS

CITY TEL. NO.

STATE LICENSE NO. LIC. CLASS

| APPROVALS | DATE | INSPECTOR'S SIGNATURE |
|---|---|---|
| UNDER SLAB WORK | | |
| ROUGH PLUMBING | | |
| GAS PIPING | | |
| GAS VENT | | |
| HOT WATER HEATER | | |
| PLUMBING FIXTURES | | |
| GAS TEST | | |
| UTILITY CO. NOTIFIED | | |
| | | |
| FINAL | 2/2/83 | [signature] |

PLAN CHECK VALIDATION

PERMIT VALIDATION

INSPECTOR COPY

№ 9309A
# • • • • • 5
1 • • 10.00
• • • 10.00 TL
0417-80

## WORKER'S COMPENSATION CERTIFICATION

I certify that I will be responsible for the work to be done under this permit and that in the performance of the work for which this permit is issued I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.

I further certify that if during the course of construction under this permit I should become subject to Worker's Compensation requirements, I will file the required certificate of insurance and realize that failure to do so will necessitate suspension of the permit. I have received an explanation of the limits and conditions of this certificate and have read and fully understand them.

Signature [signature]

Title Owner

Date 4-17-80