COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

LOMITA/LENNOX # 1200
24320 NARBONNE
LOMITA CA 90717
PHONE: (310) 534-3760 EXT:

BUILDING PERMIT
DEMOLITION
BL 1200 0108290030

LEGAL ID:
ON FILE

ASSESSOR INFORMATION NUMBER:

TENANT:

OWNER: TEL. NO:
HORVATH, IRME (310) 644-8729-
5158 W 131ST ST
HAWTHORNE, CA

APPLICANT: TEL. NO:
MODESTO A BUENO (310) 677-7568-
11035 BURL AVE
LENNOX, CA 90304

CONTRACTOR: TEL. NO:
MODESTO ALBERTO BUENO (310) 677-7568-
11035 BURL AVE LIC. NO
LENNOX CA 90304 480112 B

ARCHITECT OR ENGINEER: TEL. NO:
-
LIC. NO:

MAP NO: SEWER MAP BOOK: PAGE: FIRE ZONE: CMP:
XX 01

NO. OF FAMILIES: DWELLING UNITS: APT/COND: STAT CLASS:
NO 23

AIR QUALITY:	SCHOOL WITHIN 1000 FEET	HAZARDOUS MATERIALS
NO	NO	NO

	SQ. FT	NO. OF STORIES	CONST TYPE
STRUCTURE:	900		

EXIST BLDG USE: RESID USE ZONE:
EXIST OCC GRP:

BLDGS. NOW ON LOT: VALUATION:
1 3,500

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE		20.60
AX BUILDING REVIEW FEE		60.80
02 DEMOLITION INSPECTN		121.30
TOTAL FEES		202.70

REPORT ID: DPR261 ROUTE TO: BS1200

BUILDING ADDRESS:
5158 131ST ST W
LACO CA
NEAREST CROSS STREET: LA CIENEGA
THOMAS PAGE: GRID: LOCALITY: HAWTHORNE

ISSUED ON:	PROCESSED BY:	EXPIRES ON:
08/29/01	SM	02/25/02

FINAL DATE FINAL BY CODE:
11-26-01 Ron Bow

DESCRIPTION OF WORK
DEMOLITION OF SFR 900 SQ FT

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
PEDESTRIAN PROTECTION		
SEWER DISCONNECTION		
ABANDON PRIVATE DISPOSAL		
UNDERGRND STRUCT REMOVAL AND SOIL RECOMPACTION		

LOS ANGELES COUNTY PUBLIC WORKS Public Service That Works

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Class B Lic. No. 480112

Modesto Bueno 8-29-01

Contractor's Signature Date

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars ($500).):

☐ I am exempt under Sec. _____ , B.& P.C. for this reason:

_____

_____

[Electrical, Plumbing & Sewer Permits Only]

☐ I, as owner of the property, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).

[All Other Permits]

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.).

_____ _____

Owner Signature Date

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

☐ I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

☐ I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:

Carrier STATE FUND

Policy Number 1054324-2000

☐ I certify 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, and agree that if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Modesto Bueno 8-29-01

Applicant Signature Date

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS ($100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

LOBBYIST ORDINANCE CERTIFICATION

[Complete this section for permits in unincorporated Los Angeles County only]

This is to certify that I, as permit applicant, am familiar with the requirements of Los Angeles County Code Chapter 2.160 et seq., (relating to the Los Angeles County Lobbyist Ordinance) and that all persons acting on behalf of myself complied and will continue to comply therewith through the application process.

MODESTO BUENO Modesto Bueno

Applicant (Print Name) Applicant Signature

_____ 8-29-01

Company Name (if employed by an entity/agency) Date

JOB ADDRESS 5158 131ST HAW

LOCALITY HAWTHORNE

HAZARDOUS MATERIAL DECLARATION

Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide?

Yes ☐ No ☐

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines.

Yes ☐ No ☐

I have read the hazardous materials information guide and the SCAQMD permitting checklist, I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.140 concerning hazardous material reporting and for obtaining a permit from the SCAQMD.

ASBESTOS NOTIFICATION

☐ Notification letter sent to SCAQMD or EPA

☐ I declare that notification of asbestos removal is not applicable to addressed project.

CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ.C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state under the penalty of perjury that the above information is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Modesto Bueno 8-29-01

Applicant or Agent Signature **Date**

AQMD

SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT

NOTIFICATION OF DEMOLITION OR ASBESTOS REMOVAL

21865 E. Copley Drive, Diamond Bar, CA 91765-4182 (909) 396-2000

MAIL FORM AND FEE TO SCAQMD, ASBESTOS NOTIFICATIONS, FILE # 55641, LOS ANGELES CA 90074-5641

COMPLETED BY Mavee	COMPANY Controlled Environmental Solutions		PHONE (818) 787-8935		
DATE 7-18-01	CHECK # 11548	FEE $ 27.96	PROJECT # 5686		
NOTIFICATION TYPE	ORIGINAL	REVISION DATES	~~REVISION OTHER~~ (highlight)	CANCELLATION	
PROJECT TYPE	DEMOLITION	ORDERED DEMOLITION	RENOVATION (removal)	EMERGENCY REMOVAL	PLANNED RENO (annual)
SITE INFORMATION	SITE NAME Horvath				
SITE ADDRESS 5158 W 131st St.			CROSS STREET		
CITY Hawthorne	STATE CA	ZIP 90250	COUNTY Los Angeles		
DESCRIBE WORK LOCATION Throughout house					
BUILDING SIZE (SQ FT) 860	NUMBER OF FLOORS 1	BUILDING AGE (YEARS) 60	NUMBER OF DWELLING UNITS 1		
BLDG PRIOR / PRESENT USE	COMMERCIAL	HOSPITAL	INDUSTRIAL	OTHER	OFFICE
	PUBLIC BLDG.	HOUSE	SCHOOL	SHIP	UNIV/COLLEGE
SITE OWNER Same		ADDRESS Same			
CITY Same	STATE CA	ZIP	CONTACT Imre	PHONE 310-644-8720	
REQUIRED BUILDING INFORMATION	ASBESTOS PRESENT? YES NO	ASBESTOS SURVEY? YES NO	ASBESTOS REMOVED? YES NO	BUILDING TO BE DEMOLISHED? YES NO	
PROJECT DATES	START 8-1-01	END 8-1-01	WORK SHIFT (am/pm) AM/PM		
ASBESTOS AMOUNT TO BE REMOVED (in square feet)	FRIABLE 300	CLASS I	CLASS II	TOTAL REMOVED (add row) 300	
ASBESTOS REMOVED FROM	SURFACES	PIPES	COMPONENTS		

DESCRIBE TYPE & AMOUNT OF ASBESTOS (in square feet)	ACOUSTIC CEILING	LINOLEUM	INSULATION	FIRE PROOFING	DUCTING	STUCCO	MASTIC

FLOOR TILES (VAT)	DRY WALL	PLASTER	TRANSITE	ROOFING	OTHER (describe)
	300				

CONTRACTOR INFORMATION	CSLB LICENSE # 602-880	OSHA REG # 324	AQMD ID # 086587
NAME Controlled Environmental Solutions		ADDRESS 14736 Arminta St.	
CITY Van Nuys	STATE CA ZIP 91402	SITE SUPVR ARTURO ROBLES	PHONE (818) 787-8935
WASTE TRANSPORTER #1 CONTROLLED ENVIRONMENTAL SOLUT.		LANDFILL LA PAZ COUNTY LANDFILL	
ADDRESS 14736 ARMINTA STREET		ADDRESS 26999 HIGHWAY 95, MILE POST 128	
CITY VAN NUYS	STATE CA ZIP 91403	CITY PARKER	STATE AZ ZIP 85344

SCAQMD NOTIFICATION OF DEMOLITION OR ASBESTOS REMOVAL

MAIL ORIGINAL TO SCAQMD, ASBESTOS NOTIFICATIONS, FILE # 65641, LOS ANGELES CA 90074-5641

WASTE TRANSPORTER #2 S & R SERVICES, INC.	WASTE STORAGE SITE CONTROLLED ENVIRONMENTAL SOLUTIONS
ADDRESS 19172 STEWART STREET	ADDRESS 14736 ARMINTA ST.
CITY HUNTINGTON BEACH STATE CA ZIP 92663	CITY VAN NUYS STATE CA ZIP 91402

CONTROLS: DESCRIBE WORK PRACTICES AND CONTROLS TO BE USED AT THIS RENOVATION AND DEMOLITION SITE. Procedure # (1), 2, 3, 4, 5 or Other.

For asbestos removals circle the combination of Rule 1403 procedures used. Procedure 4 and 5 submit plans for AQMD prior approval.

ASBESTOS DETECTION PROCEDURE: CIRCLE THE PROCEDURES AND ANALYTICAL METHODS USED TO DETERMINE ASBESTOS IN THE BUILDING:
Bulk Sampling, Inspection, Survey, PLM, PCM, TEM, Assumed as Asbestos, Describe Other:

FOR DEMOLITIONS GIVE THE COMPANY NAME AND DATES OF THE ASBESTOS REMOVAL:

FOR ORDERED DEMOLITION SEND A COPY OF THE ORDER AND GIVE THE AGENCY NAME & PHONE #
AUTHORIZING PERSON: TITLE
DATE OF ORDER: DATE ORDERED TO BEGIN:

FOR EMERGENCY ASBESTOS REMOVAL GIVE THE NAME AND PHONE NUMBER OF THE PERSON DECLARING/AUTHORIZING THE EMERGENCY, DATE AND HOUR OF EMERGENCY AND DESCRIBE THE SUDDEN, UNEXPECTED EVENT:

EXPLAIN HOW THE EVENT WOULD CAUSE UNSAFE CONDITIONS, EQUIPMENT DAMAGE OR UNREASONABLE FINANCIAL BURDEN:

CONTINGENCY PLAN: DESCRIBE ACTIONS AND PROCEDURES TO BE FOLLOWED IF UNEXPECTED ASBESTOS IS FOUND DURING DEMOLITION OR NONFRIABLE ASBESTOS MATERIAL BECOME CRUMBLED, PULVERIZED, OR REDUCED TO POWDER.
STOP WORK – STABILIZE AREA – HAVE MATERIAL SAMPLED

TRAINING CERTIFICATION: I Certify that an individual trained in the provisions of regulation AQMD Rule 1403 and NESHAP will be on site during the removal and evidence that the required training has been accomplished by this person will be available for inspection during normal business hours.

Company Name	Print name of owner/operator	Signature of owner/operator	Title of owner/operator	Date
CES	ALDEN SAWYER	A. Saw	VICE PRESIDENT	7-18-01

INFORMATION CERTIFICATION: I certify that the above information is correct and I have enclosed any required attachments.

Company Name	Print name of owner/operator	Signature of owner/operator	Title of owner/operator	Date
CES	ALDEN SAWYER	A. Saw	VICE PRESIDENT	7-18-01

Notifications are not accepted without the required asbestos fee (AQMD Rule 301). Removals of less than 100 square feet are exempt from notification and fees. Please make checks payable to "SCAQMD". Fees are per notification, not refundable, and vary according to the asbestos amount to be removed. Fees are as follows:

COMMERCIAL DEMOLITION/RENOVATION		RESIDENTIAL REMOVALS	$ 26.96
FROM 100 TO 1,000 SQUARE FEET	$ 26.96	REVISION OF NOTIFICATION	$ 10.91
FROM 1,001 TO 5,000 SQUARE FEET	$ 82.42	CANCELLATION OF NOTIFICATION	$ 0.00
FROM 5,001 TO 10,000 SQUARE FEET	$192.93	PROCEDURE 4 OR 5 PLANS	$302.53
MORE THAN 10,000 SQUARE FEET	$302.53	RETURNED CHECK CHARGE	$ 26.75
DEMOLITION OF LESS THAN 100 SQ FT	$ 26.96	SPECIAL HANDLING FEE	$ 25.73

ATTENTION: Keep a copy of your notification. State law requires that you provide a copy of the demolition notification to Building and Safety before issuance of a demolition permit. For questions call 909-396-2336. For your convenience please mail the form and fee and do not hand carry to AQMD.