APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER
BUILDING AND SAFETY DIVISION

1

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 20510 W. Callon Dr. Topa
CITY: Topanga ZIP:
SIZE OF LOT: NO. OF BLDGS. NOW ON LOT:
TRACT: BLOCK: LOT NO.:
OWNER: Rehabilitation TEL. NO. 9747183
ADDRESS: 532 S. Vermont
CITY: Los Angeles ZIP: 90020
ARCHITECT OR ENGINEER: TEL. NO.:
ADDRESS:
CONTRACTOR: Alexander Land Clearing, Inc. TEL. NO. 7753067
ADDRESS: 21018 S. Martin LIC. NO. 300929
CITY: Carson 90745 LIC. CLASS: C21
CONSTRUCTION LENDER NAME AND BRANCH:
ADDRESS: CITY:
SQ. FT. SIZE: 3760 NO. OF STORIES: 1 NO. OF FAMILIES: 1
CHECK ONE: NEW ☐ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐
DESCRIPTION OF WORK: Demolish structure
USE OF EXISTING BLDG.: Dwelling
APPLICANT (PRINT): Loa Alexander TEL. NO. 7753067
BY (SIGNATURE): Loa Alexander

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING BUILDING CONSTRUCTION. I CERTIFY THAT IN DOING THE WORK AUTHORIZED HEREBY I WILL NOT EMPLOY ANY PERSON IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA IN RELATING TO WORKMEN'S COMPENSATION INSURANCE.

SIGNATURE OF PERMITTEE: Loa Alexander
ADDRESS: 21018 S. Martin
CITY: Carson 90745 TEL. NO. 7753067

VALUATION $ 1152.00

BUILDING ADDRESS: 20510 W. Callon Dr
LOCALITY: Topanga
NEAREST CROSS ST.: Topanga
ASSESSOR MAP BOOK: PAGE: PARCEL:
DISTRICT: 9.2 GROUP: R-3 TYPE CONST.: 5 FIRE ZONE: 4 PROCESSED BY: [signature]
STATISTICAL CLASSIFICATION: CLASS NO. 23 DWELL. UNITS -1
SEWER MAP: BK PG
USE ZONE: R-1-10, MAP NO. 153-109
SPECIAL CONDITIONS:
ROAD DEPARTMENT APPROVAL REQUIRED: YES ☐ NO ☐
BLDG. SETBACK FROM FRONT PROP. LINE OF: W. Callon (STREET)

HIGHWAY + YARD =	TOTAL SETBACK FROM FRONT PROP. LINE	TYPE OF HIGHWAY	EXISTING WIDTH
5 + 25 =	30	local	50

BLDG. SETBACK FROM SIDE PROP. LINE OF: (STREET)

HIGHWAY + YARD =	TOTAL SETBACK FROM SIDE PROP. LINE	TYPE OF HIGHWAY	EXISTING WIDTH
+ =			

CORNER CUTOFF: YES ☐ NO ☑
IN OPEN SPACE: YES ☐ NO ☑
IN COASTAL PERMIT ZONE: YES ☐ NO ☐

9-14-78 BLDG. GONE - PORTIONS OF FOOTINGS & DEBRIS REMAIN ON SITE - SEPTIC TANK ON TOP OF DRIVEWAY — Fellick

FINAL DATE: 1-22-79 BY: Fellick

P.C. Fee $:
Permit Fee:
Issuance Fee:
Total Fee: 31.00

INSPECTOR COPY

PLAN CHECK VALIDATION CK. M.O. CASH

PERMIT VALIDATION CK. M.O. CASH

3 45 6 9 14 78 1 A 31.00 #

76A638A CE #803A 6/76

6A662-CE/06 12/75

APPLICATION FOR ELECTRICAL PERMIT

1

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER
BUILDING AND SAFETY DIVISION

FOR APPLICANT TO FILL IN

	EACH	NO.	FEE	
ew Residential Bldgs & Pools				
1 & 2-Family, Sq. Ft.	$ .025	—	$	
Multi-family Sq. Ft.	.02	—		
Residential Swimming Pools	20.00			
utlets: Light, Switch & Receptacle				
First 20	.50			
Additional	.30			
ighting Fixtures				
First 20	.50			
Additional	.30			
ixed Appliances Not Over 1 HP				
Range___ Heater___ D.W.___				
Oven___ Dryer___ W.M.___				
Top___ FAU___ W.H.___				
Hood___ Fan___				
Disp.___ A.C.___	2.00			
ower Apparatus & Large Appliances				
Size & Type HP, KW, KVA, or KVAR				
___ Up to 1 Incl.	2.00			
___ Over 1 to 10 Incl.	5.00			
___ Over 10 to 50 Incl.	10.00			
___ Over 50 to 100 Incl.	20.00			
___ Over 100	30.00			
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	1	10	00
Sign with One Branch Circuit	10.00			
Additional Sign Branch Circuits	2.00			
(Other)				
PERMIT FEE (Sub-Total)				
PLAN CHECKING FEE (One-Fourth Permit Fee)				
PERMIT ISSUING FEE $6.00			6	00
TOTAL FEE			16	00

PLAN CHECK VALIDATION CK. M.O. CASH

JOB ADDRESS 20510 Callon DR.
LOCALITY Topanga
NEAREST CROSS ST. Cheney.
OWNER OR FIRM NAME Gary Bishop
MAIL ADDRESS 6744 Dume DR.
CITY Malibu Tel. No. 4577225
PLAN CHECK APPLICANT
ADDRESS
CITY Tel. No.
PERMIT APPLICANT Daniel Horn
ADDRESS 20616 Callon DR.
CITY Topanga Tel. No. 4552656
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 Daniel Horn

DISTRICT NO. 9-2
PROCESSED BY Kirnli

APPROVALS	DATE	INSPECTOR'S SIGNATURE
TEMP. POWER POLE	11/23/70	[signature]
UNDERSLAB WORK		
ROUGH CONDUIT		
WIRING		
FIXTURES		
POWER AUTHORIZED		
UTILITY CO. NOTIFIED		
FINAL		

NOTES

INSPECTORS COPY

PERMIT VALIDATION CK. MO. CASH

LA CO F220 11 23 76 2 A 16.00 #

Wolfe

SEE BACK OF APPLICATION FOR COMPLETE SCHEDULE

76 A364 - CE 818 - 1/75

APPLICATION FOR PERMIT
HEATING - VENTILATING - AIR CONDITIONING

1

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER
BUILDING AND SAFETY DIVISION

BUILDING ADDRESS	20510 W. Callon
LOCALITY	
NEAREST CROSS ST.	Cheney Dr.
OWNER	Gary Bishop
MAIL ADDRESS	6744 Dume Dr.
CITY	Malibu TEL. NO. 457-7225
CONTRACTOR	Len, Inc.
ADDRESS	2412 Federal Ave.
CITY	Los Angeles, TEL. NO. 391-9602
STATE LICENSE NO.	191461 LIC. CLASS C-20

DISTRICT NO.	GROUP	ZONE	PROCESSED BY
9.2	I	4	TD

FOR APPLICANT TO FILL IN
(PRINT OR TYPE ONLY)

NO.	TYPE & SIZE OF EQUIPMENT, SEE BACK OF APPLICATION	FEE
1	FORCE AIR FURNACE, BTU 100M	10 00
	COMPRESSOR, BTU	
	VENTILATION FAN	
	LIST ALL OTHERS BELOW	
	Plan check fee. See reverse.	6 00
	PERMIT ISSUING FEE $	3 00
	TOTAL FEE	16 00

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 ORDINANCES AND LAWS REGULATING HEATING, VENTILATING, AIR CONDITIONING.

I HEREBY CERTIFY THAT I AM NOT ACTING IN VIOLATION OF CHAPTER 9, DIVISION 3, OF THE BUSINESS AND PROFESSIONAL CODE OF THE STATE OF CALIFORNIA.

SIGNATURE OF PERMITTEE T.L. Sheenan

PLAN CHECK VALIDATION CK. M.O. CASH

INSPECTION RECORD

APPROVALS	DATE	INSPECTOR'S SIGNATURE
ROUGH	5/5/77	
FINAL		

PERMIT VALIDATION M.O. CASH

INSPECTOR COPY

76A667C (CE-817B) - 9/75

APPLICATION FOR PLUMBING PERMIT

1

BUILDING AND SAFETY DIVISION

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

NUMBER	FIXTURE OR ITEM		FEE
2	WATER CLOSET		6 00
1	BATH TUB		3 00
1	SHOWER		3 00
2	LAVATORY		6 00
1	SINK		3 00
1	DISHWASHER		3 00
1	CLOTHES WASHER		3 00
	SWIMMING POOL RECEPTOR		
	LAWN SPRINKLER SYSTEM		
1	WATER HEATER		3 00
1	GAS SYSTEM 2 OUTLETS		3 00
	OUTLETS OVER 5 PER SYSTEM		
	Plan check fee		
	PLUMBING PERMIT ISSUING FEE $		6 00
	TOTAL FEE		39 00

Plan check applicant

Name GARY BISHOP

Address 6744 DUME DR

City MALIBU Tel. No. 457-7225

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 Gary Bishop

PLAN CHECK VALIDATION CK. M.O. CASH

BUILDING ADDRESS 20510 W. CALLON

LOCALITY TOPANGA CANYON

NEAREST CROSS ST. CHENEY

OWNER SAME

MAIL ADDRESS

CITY TEL. NO.

CONTRACTOR SAME

ADDRESS

CITY TEL. NO.

STATE LICENSE NO. LIC CLASS

DISTRICT NO.	GROUP	ZONE	PROCESSED BY
92	I	Pom	Garrick

INDUSTRIAL WASTE APPROVAL

INSPECTION RECORD

APPROVALS	DATE	INSPECTOR'S SIGNATURE
UNDER SLAB WORK		
ROUGH PLUMBING	3/15/77	[signature]
GAS PIPING		
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES	1/16/78	[signature]
GAS TEST	1/16/78	[signature]
UTILITY CO. NOTIFIED		
FINAL	1/16/78	[signature]

PERMIT VALIDATION CK. M.O. CASH

3 29 77 1 25 77 5 A 39.00 #

GARRICK

INSPECTOR COPY

76A663C - CH806B 12/75

APPLICATION FOR ELECTRICAL PERMIT

1

BUILDING AND SAFETY DIVISION

FOR APPLICANT TO FILL IN

	EACH	NO.	FEE
New Residential Bldgs. & Pools			
1 & 2 Fmaily Sq. Ft. 1700	$ .025	-	$ 42 50
Multi-family Sq. Ft.		-	
Residential Swimming Pools			
Outlets: Light, Switch & Receptacle			
First 20			
Additional			
Lighting Fixtures			
First 20			
Additional			
Fixed Appliances Not Over 1 HP			
Range ___ Heater ___ D.W. ___			
Oven ___ Dryer ___ W.M. ___			
Top ___ FAU ___ W.H. ___			
Hood ___ Fan ___ ___ ___			
Disp. ___ A.C. ___ ___ ___			
Power Apparatus & Large Appliances			
Size & Type HP, KW, KVA, or KVAR			
___ Up to 1 Incl.			
___ Over 1 to 10 Incl.			
___ Over 10 to 50 Incl.			
___ Over 50 to 100 Incl.			
___ Over 100			
Services			
0 - 200 Amp. Under 600 V			
201 - 1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
Temp. Power Pole & Appurtenances			
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
(Other)			

PERMIT FEE	(Sub-Total)	42 50
PLAN CHECKING FEE	(One-Fourth Permit Fee)	
PERMIT ISSUING FEE		6 -
TOTAL FEE		4850

JOB ADDRESS 20510 Callon

LOCALITY Topanga

NEAREST CROSS ST. off- Cheney

OWNER OR FIRM NAME Bishop

MAIL ADDRESS

CITY Tel. No.

PLAN CHECK APPLICANT

ADDRESS

CITY Tel. No.

PERMIT APPLICANT Dodds Elec

ADDRESS 6406 Cavalleri Dr

CITY Malibu Tel. No. 457-7048

LICENSE OR REG. NUMBER 215510 Class. C 10

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PERMITEE SIGNATURE

DISTRICT NO. 9.2

PROCESSED BY HE101

APPROVALS	DATE	INSPECTOR'S SIGNATURE
TEMP. POWER POLE		
UNDERSLAB WORK		
ROUGH CONDUIT		
WIRING	3/12/77	
FIXTURES	11/16/78	
POWER AUTHORIZED		
UTILITY CO. NOTIFIED		
FINAL	11/16/78	
NOTES		

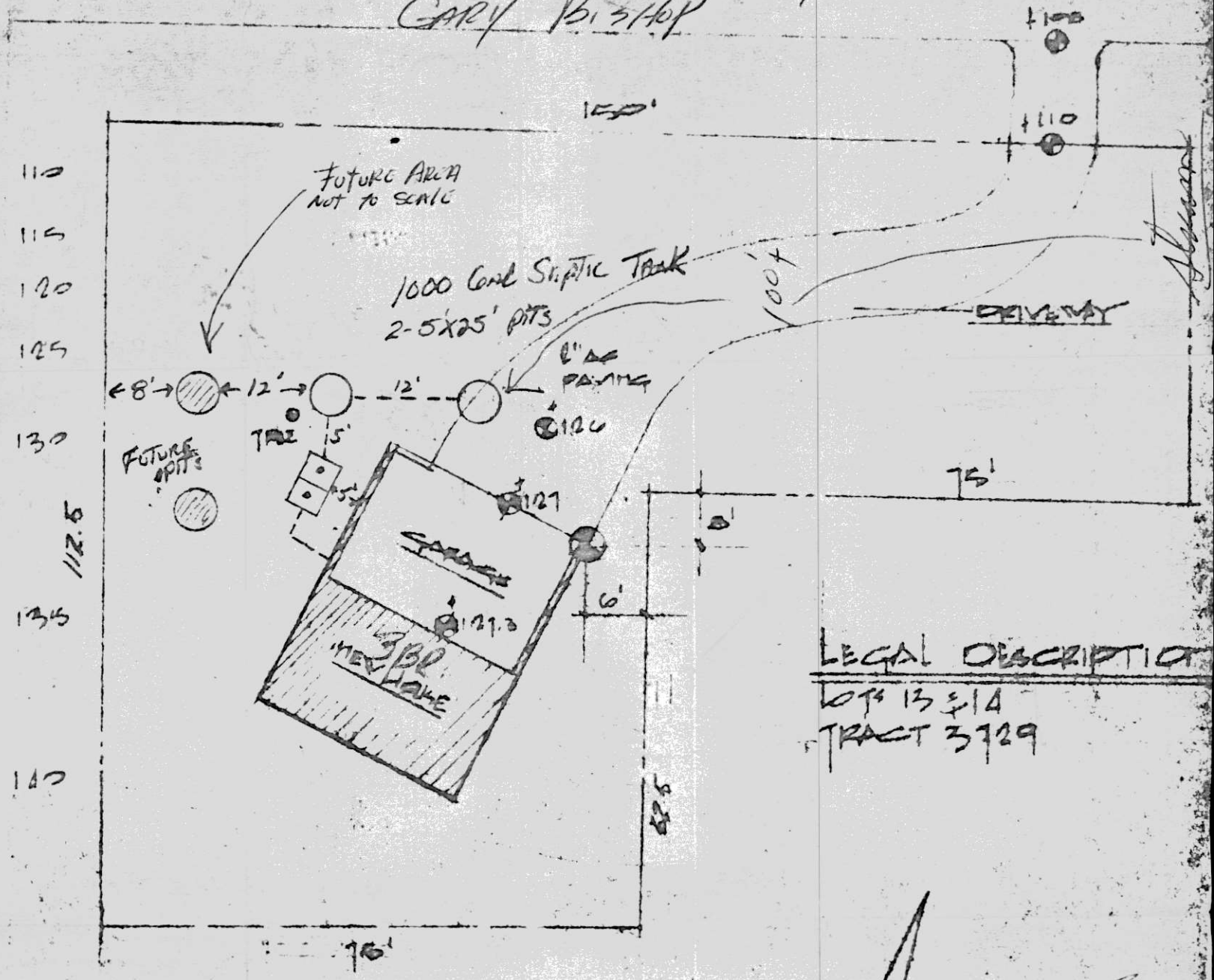
INSPECTOR COPY

PLAN CHECK VALIDATION CK. M.O. CASH

PERMIT VALIDATION (CK.) M.O. CASH

LA 9377 2851 2A 4850 #

20510 CALLON DR, TOPANGA
GARY BISHOP



LEGAL DESCRIPTION
LOTS 13 & 14
TRACT 3729

SITE PLAN 1" = 20'

A 7/9/76 Method of Sewage Disp
Appr. Health Service
Cal Miller