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

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

1200

BUILDING PERMIT
RESIDENTIAL ADD
BL 1200 0609260037

LEGAL ID:
TR: 12471 LT: 31

ASSESSOR INFORMATION NUMBER:
5010-006-009

TENANT:

OWNER: TEL. NO:
REYNOLDS, PATRICIA M (323) 295-4906-
5174 SOUTHRIDGE AVE
LOSA 900431528

APPLICANT: TEL. NO:
SAME AS OWNER -

CONTRACTOR: TEL. NO:
SAME AS OWNER -
LIC. NO

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

MAP NO: SEWER MAP BOOK: PAGE: FIRE ZONE: CMP:
108-181 3 01

NO. OF FAMILIES: DWELLING UNITS: APT/COND: STAT CLASS:
NO 21

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

REQUIRED SET BACK	YARD:	HWY:	TOTAL SETBACK FROM PROP LINE:	EXIST WIDTH:
FRONT PL-	22	2	22	50
SIDE PL-	5	0	5	0

	SQ. FT	NO. OF STORIES	CONST TYPE	NEW OCCUP GROUP
STRUCTURE:	447	1	VN	R3
GARAGE:				
OTHER:				

EXIST BLDG USE: USE ZONE: R-1
EXIST OCC GRP:

BLDGS. NOW ON LOT: VALUATION:
1 48,000

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE			24.40
AC STRONG MOTION RESID	48000.00	VAL	4.80
AX BUILDING REVIEW FEE			71.90
B2 PERMIT W/ENERGY	48000.00	VAL	743.82
08 CERTIF OF OCCUPANCY			88.90
	TOTAL FEES		933.82

REPORT ID: DPR261 ROUTE TO: BS1200

BUILDING ADDRESS:
5174 SOUTHRIDGE AV
LOSA CA 900431528
NEAREST CROSS STREET: PARKGLEN
THOMAS PAGE: 673 GRID: D5 LOCALITY: VIEW PARK

ISSUED ON:	PROCESSED BY:	EXPIRES ON:
09/26/06	SM	09/21/07

FINAL DATE	FINAL BY:	CODE:
6/13/07	WCHAM	

DESCRIPTION OF WORK
ADD BEDRM, BATH & FAMILY RM TO EXISTING 1 STORY SFD

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
LOCATION AND SETBACKS		
SOILS ENGINEER APPROVAL	11-29-06	
FOUNDATION/TRENCH FORMS		
SLAB/UNDER FLOOR		
RAISED FLOOR FRAMING	12-5-06	
UNDERFLOOR INSULATION		
1ST LEVEL FLOOR SHEATH	12/21/06	
2ND LEVEL FLOOR SHEATH		
ROOF SHEATHING	12/21/06	
FIRE DEPT. FRAME INSPECT		
BLDG DEPT. FRAME INSPECT		
SHEAR PANELS	12/21/06	
INSULATION/WEATHER STRIP	1-11-07	
INTERIOR LATH/DRYWALL	1-18-07	
EXTERIOR LATH	1-11-07	
LOT DRAINAGE		
SMOKE DETECTION DEVICES		
FIRE DEPARTMENT APPROVAL		

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 _____ Lic. No. _____

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]

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☒ 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 9/26/06

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 _____

Policy Number _____

☐ 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.

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.

Applicant (Print Name) _____ Applicant Signature _____

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

JOB ADDRESS 5174 SOUTHRIDGE AVE.

LOCALITY VIEW PARK

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.

Applicant or Agent Signature _____ **Date** 9/26/06

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

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

1200

ELECTRICAL PERMIT
EL 1200 0609260025

LEGAL ID:
TR: 12471 LT: 31

ASSESSOR INFORMATION NUMBER:
5010-006-009

TENANT:

OWNER: TEL. NO:
REYNOLDS, PATRICIA M (323) 295-4906-
5174 SOUTHRIDGE AVE
LOSA 900431528

APPLICANT: TEL. NO:
SAME AS OWNER -

CONTRACTOR: TEL. NO:
SAME AS OWNER -
LIC. NO

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

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
A1 PERMIT ISSUANCE FEE		24.40
G1 OUTLETS-LGT,SW,RECP	30.00 OUT	50.10
G2 LIGHTING FIXTURES	8.00 LGT	15.20
	TOTAL FEES	89.70

REPORT ID: DPR265 ROUTE TO: BS1200

BUILDING ADDRESS:
5174 SOUTHRIDGE AV
LOSA CA 900431528
NEAREST CROSS STREET: PARKGLEN
THOMAS PAGE: 673 GRID: D5 LOCALITY: VIEW PARK

ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
09/26/06	SM		03/25/07

FINAL DATE: 6/13/07 FINAL BY: WC Hatman CODE:

DESCRIPTION OF WORK
ELECTRICAL FIXTURES FOR ADDITION

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
TEMPORARY POWER POLE		
UNDERGROUND CONDUIT		
UFER GROUND		
ROUGH CONDUIT		
ROUGH WIRING	12/21/06	[signature]
MAIN WATER LINE PLASTIC Y/N METAL Y/N		
UTILITY COMPANY NOTIFIED		

LICENSED CONTRACTOR'S DECLARATION

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License Class _____ Lic. No. _____

Contractor's Signature _____ Date _____

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_____

_____

[Electrical, Plumbing & Sewer Permits Only]

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Owner Signature _____ Date 9/26/06

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Carrier _____

Policy Number _____

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Applicant Signature _____ Date _____

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LOBBYIST ORDINANCE CERTIFICATION

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

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Applicant (Print Name) _____ Applicant Signature _____

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

JOB ADDRESS 5174 SOUTHRIDGE AVE

LOCALITY VIEW PARK

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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 ☐

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Lender's Address _____

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Applicant or Agent Signature _____ **Date** 9/26/06

5174 SOUTHRIDGE

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

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

1200

ELECTRICAL PERMIT
EL 1200 0706180031

LEGAL ID:
TR: 12471 LT: 31

ASSESSOR INFORMATION NUMBER:
5010-006-009

TENANT:

OWNER: TEL. NO:
REYNOLDS, PATRICIA M (323) 295-4906-
5174 SOUTHRIDGE AVE
LOSA 900431528

APPLICANT: TEL. NO:
SAME AS OWNER -

CONTRACTOR: TEL. NO:
SAME AS OWNER -
LIC. NO

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

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
A1 PERMIT ISSUANCE FEE		24.40
LA 100 AMP PANELS, MCC	1.00 PAN	34.10
	TOTAL FEES	58.50

REPORT ID: DPR265 ROUTE TO: BS1200

BUILDING ADDRESS:
5174 SOUTHRIDGE AV
LOSA CA 900431528
NEAREST CROSS STREET: PARKGLEN
THOMAS PAGE: 673 GRID: D5 LOCALITY: VIEW PARK

ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
06/18/07	RB		12/15/07

FINAL DATE	FINAL BY:	CODE:
6/13/07	W CHATHAM	

DESCRIPTION OF WORK
SERVICE UPGRADE

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
TEMPORARY POWER POLE		
UNDERGROUND CONDUIT		
UFER GROUND		
ROUGH CONDUIT		
ROUGH WIRING		
MAIN WATER LINE PLASTIC Y/N METAL Y/N		
UTILITY COMPANY NOTIFIED		

LICENSED CONTRACTOR'S DECLARATION

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Contractor's Signature _____ Date _____

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[Electrical, Plumbing & Sewer Permits Only]

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Owner Signature _____ Date 6/18/07

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Applicant Signature _____ Date 6/18/07

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

JOB ADDRESS
LOCALITY

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Lender's Name _____

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Applicant or Agent Signature _____ **Date** 6/18/07

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

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

1200

PLUMBING PERMIT
PL 1200 0609260013

LEGAL ID:
TR: 12471 LT: 31

ASSESSOR INFORMATION NUMBER:
5010-006-009

TENANT:

OWNER: TEL. NO:
REYNOLDS, PATRICIA M (323) 295-4906-
5174 SOUTHRIDGE AVE
LOSA 900431528

APPLICANT: TEL. NO:
SAME AS OWNER -

CONTRACTOR: TEL. NO:
SAME AS OWNER -
LIC. NO

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

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE			24.40
07 BATHTUBS/SHOWERS	1.00	FIX	14.20
25 LAVATORIES / SINKS	1.00	FIX	14.20
45 WATER CLOSET/URINAL	1.00	FIX	14.20
TOTAL FEES			67.00

REPORT ID: DPR263 ROUTE TO: BS1200

BUILDING ADDRESS:
5174 SOUTHRIDGE AV
LOSA CA 900431528
NEAREST CROSS STREET: PARKGLEN
THOMAS PAGE: 673 GRID: D5 LOCALITY: VIEW PARK

ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
09/26/06	SM		03/25/07

FINAL DATE FINAL BY: CODE:
4/13/07 WCHAFM

DESCRIPTION OF WORK
PLUMBING FIXTURES FOR ADDITION

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
UNDER SLAB WORK	12/5/06	[illegible]
WATER SERVICE PLASTIC Y/N METAL Y/N		
ROUGH PLUMBING		
GAS PIPING	12/11/06	[illegible]
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES		
LAWN SPRINKLERS		
GAS TEST		
UTILITY COMPANY NOTIFIED		
CWV		
GRAY WATER SYSTEM		

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 _____ Lic. No. _____

Contractor's Signature _____ Date _____

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_____

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Carrier _____

Policy Number _____

☐ 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.

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.

Applicant (Print Name) _____ Applicant Signature _____

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

JOB ADDRESS 5174 SOUTHRIDGE AVE.

LOCALITY VIEW PARK

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.

Applicant or Agent Signature _____ **Date** 9/26/06

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY DIVISION

OWNER-BUILDER VERIFICATION

Attention Property Owner:

An "Owner Builder" building permit has been applied for in your name and bearing your signature at 5174 Southridge Ave. Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed property improvement (yes or no) _____.

2. I (have/have not) _____ signed an application for a building permit for proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name T.B.D.
Address _____ City _____
Phone _____ Contractors License No. _____

4. I plan to provide portions of the work but I have hired the following person to coordinate, supervise, and provide the major work:

Name _____
Address _____ City _____
Phone _____ Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following persons to provide the work indicated:

Name	Address	Phone	Type of Work

Signed:
Property Owner
~~Social Security Number~~
Date 9/26/06

Return Form to Address Below

COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY DIVISION
24320 S. NARBONNE AVE., LOMITA 90717
(310) 534-3760

OWNER-BUILDER INFORMATION

The State Health and Safety Code mandates that the "Owner-Builder Information" form be completed by the property owner prior to the issuance of any permits after July 1, 1980.

An application for a building permit has been submitted in your name listing you as the builder of the property improvements specified.

For your protection you should be aware that as "Owner-Builder" you are the responsible party of record on such a permit. Building permits are not required to be signed by the property owner unless they are personally performing their own work. If someone other than yourself is performing your work, you may protect yourself from possible liability if that person applies for the proper permit in his or her name.

Contractors are required by law to be licensed and bonded by the State of California and to have a business license from the City or County. They are also required by law to out their license number on all permits for which they apply.

If you plan to do your own work, with the exception of various trades that you plan to subcontract, you should be aware of the following information for your benefit and protection:

- If you employ or otherwise engage any persons other than your immediate family, and the work (including materials and other costs) is $200 or more for the entire project, and such persons are not licensed as contractors or subcontractors, then you may be an employer.
- If you are an employer, you must register with the State and Federal Government as an employer and you are subject to several obligations including state and federal income tax withholdings, federal social security taxes, workers' compensation insurance, disability insurance, and unemployment contributions.
- There may be financial risks for you if you do not carry out these obligations, and these risks are especially serious with respect to workers' compensation insurance. Please contact your homeowner's insurance carrier for coverage.
- For more specific information about your obligations under federal law, contact the Internal Revenue Service (and, if you wish, the U.S. Small Business Administration). For more specific information about your obligations under State law, contact the Department of Benefit Payments and the Division of Industrial Accidents.

If the structure is intended for sale, property owners who are not licensed contractors are allowed to perform their work personally or through their own employees without a licensed contractor or subcontractor, only under limited conditions.

A frequent practice of unlicensed persons professing to be contractors is to secure an Owner-Builder" building permit, erroneously implying that the property owner is providing his or her own labor and material personally. Building permits are not required to be signed by property owners unless they are performing their own work personally.

Information about licensed contractors may be obtained by contacting the Contractors' State License Board in your community or at 1020 "N" Street, Sacramento, California 95814.

Please complete and return the enclosed "Owner-Builder Verification" form so that we can confirm that you are aware of these matters. The building permit will not be issued until the verification is returned.

LOS ANGELES COUNTY DEPARTMENT OF PUBLIC WORKS
BUILDINGAND SAFETY DIVISION

Los Angeles County Department of Public Works
Development and Permits
September 20, 2006

To Whom It May Concern:

My name is Patricia Reynolds and I am the owner at the property located at:

5174 Southridge Avenue
Los Angeles, Ca. 90043
Ph# 323 295-4906

I hereby authorize Eric Porter to act as my agent to pull the permits necessary for a building project at the above named property. My California driver's license number is N4593940.

Thank You,
Patricia M Reynolds
Patricia M. Reynolds