

# APPLICATION FOR BUILDING PERMIT

1

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

## WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. \_\_\_\_\_ Company \_\_\_\_\_

Certified copy is hereby furnished.

Certified copy is filed with the county building inspection department.

Date \_\_\_\_\_ Applicant \_\_\_\_\_

## CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

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 Workers' Compensation Laws.

Date \_\_\_\_\_ Applicant \_\_\_\_\_

**NOTICE TO APPLICANT:** If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

## LICENSED CONTRACTORS DECLARATION

I hereby affirm 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 Number \_\_\_\_\_ Lic. Class \_\_\_\_\_

Contractor \_\_\_\_\_ Date \_\_\_\_\_

I am exempt under Sec. \_\_\_\_\_

B.&P.C. for this reason \_\_\_\_\_

Date: \_\_\_\_\_

Signature \_\_\_\_\_

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 (Section 7044, Business and Professions Code.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code.)

## CONSTRUCTION LENDING AGENCY

I hereby affirm 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 penalty of perjury that the above information is correct. I agree to comply with all 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.

Signature of Applicant or Agent: Hidario Ortega Date: 4/22/93

FOR APPLICANT TO FILL IN			
BUILDING ADDRESS <u>140 N Indiana St</u>		CITY <u>Los Angeles</u>	
CITY <u>Los Angeles</u>		ZIP <u>90063</u>	
TRACT		BLOCK	
ASSESSOR MAP BOOK		PAGE	
OWNER <u>Hidario Ortega</u>		TEL NO. <u>263-5952</u>	
ADDRESS <u>140 N Indiana St</u>		CITY <u>Los Angeles</u>	
CITY <u>Los Angeles</u>		ZIP <u>90063</u>	
ARCHITECT OR ENGINEER		TEL NO.	
ADDRESS		CONTRACTOR	
CONTRACTOR		TEL NO.	
ADDRESS		LIC. NO.	
CITY		LIC. CLASS	
SQ. FT. SIZE <u>324'</u>	NO. OF STORIES	NO. OF FAMILIES	NEW <input type="checkbox"/>
DESCRIPTION OF WORK <u>2 bedroom addition &amp; bath</u>			ADD <input checked="" type="checkbox"/>
USE OF EXISTING BLDG.			ALTER <input type="checkbox"/>
APPLICANT (PRINT)			REPAIR <input type="checkbox"/>
ADDRESS			DEMOL <input type="checkbox"/>
WILL THE APPLICANT OR FUTURE BUILDING OCCUPANT HANDLE A HAZARDOUS MATERIAL OR A MIXTURE CONTAINING A HAZARDOUS MATERIAL EQUAL TO OR GREATER THAN THE AMOUNTS SPECIFIED ON THE HAZARDOUS MATERIALS INFORMATION GUIDE?			URM <input type="checkbox"/>
YES <input type="checkbox"/> NO <input type="checkbox"/>			
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 <input type="checkbox"/> NO <input type="checkbox"/>			
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 2.20 SECTIONS 2.20.100 THROUGH 2.20.140 CONCERNING HAZARDOUS MATERIALS REPORTING AND FOR OBTAINING A PERMIT FROM THE SCAQMD.			
OWNER OR AGENT			
P.C. FEE <u>50.50</u>	PERMIT FEE <u>148.18</u>		
INVESTIGATION FEE			ISSUANCE FEE <u>17.10</u>
TOTAL FEE <u>165.28</u>			

BUILDING ADDRESS <u>140 N. Indiana St.</u>			
LOCALITY <u>ELA</u>			
NEAREST CROSS ST. <u>1st St. - Brooklyn Ave.</u>			
USE ZONE <u>R-2</u>	MAP NO. <u>3213</u>	SPECIAL CONDITIONS	
WITHIN 1000 FT. OF SCHOOL?		YES	NO
DISTRICT <u>6</u>	GROUP <u>R3</u>	TYPE CONST. <u>IV</u>	FIRE ZONE <u>III</u>
STATISTICAL CLASSIFICATION CLASS NO. <u>21</u> DWELL UNITS _____		APT	CONDO
REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP LINE
FRONT P L			EXIST WIDTH
SIDE P L			
SEWER MAP	BK	PG	
VALUATION	\$ <u>10,000</u> - <u>HA</u>		
LDMA P/C #	<u>14-20</u>		
LDMA Perm #	<u>04-22-93</u>		
FINAL DATE	<u>5/25/96</u>		
FINAL BY	<u>Partial Permit to complete project HSA</u>		
VALIDATION			
P.23		01 *50.50	
		*50.50	
		0.12-7355	
		14-20	
		04-22-93	
		\$1	
		P1	
		01*16528	
		*16528	
		0.12-7356	
		14-21	
		04-22-93	

SEE REVERSE FOR EXPLANATORY LANGUAGE

INSPECTOR COPY

PLANS TO APPLICANT					INSPECTOR'S NOTES	
To:		Returned		Approved		
No.	Date	No.	Date			
					5/4/93 - Foundation approved by De la Torre per corrections of 9/7/88 HSA	
Approvals		Required		Date Received or Approved		
		Yes	No			
Water Certificate						
Health Department						
Fire Department						
Grading						
Geological						
Pedestrian Protection (Fence) (Canopy)						
Special Inspection (Conc.) (Masonry) (Welding)						
Lot Drainage						
Parking						
Approvals	Date	Inspector's Signature				
Location (Setback & Yards)						
Foundations	9/7/88	De la Torre by HSA				
Slab						
Frame						
Energy Insulation						
Lath/Drywall - Interior						
Lath - Exterior						
House Number - Correct & Posted						
Final - Enter on Front						
Certificate of Occupancy Issued						

### OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's 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 is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9) (commencing with Section 7000 of Division 3 of the Business and Professions Code) or that he 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, 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 Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his 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 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 Contractor's 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 Contractor's License Laws.*

I am exempt under Sec. \_\_\_\_\_, B.&P.C. for this reason \_\_\_\_\_  
Date \_\_\_\_\_ Owner \_\_\_\_\_

INSPECTOR'S NOTES

WORKER'S COMPENSATION DECLARATION

20-0019 DPW (12-91)  
76A663

APPLICATION FOR ELECTRICAL PERMIT

COUNTY OF LOS ANGELES

DEPT. OF PUBLIC WORKS

BUILDING AND SAFETY DIV.

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800 Lab. C.)

Policy No. \_\_\_\_\_ Company \_\_\_\_\_

Certified copy is hereby furnished.

Certified copy is filed with the county building inspection department.

Date \_\_\_\_\_ Applicant \_\_\_\_\_

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars (\$100) or less.)

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 Workers' Compensation Laws.

Date \_\_\_\_\_ Applicant \_\_\_\_\_

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm 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 Number \_\_\_\_\_ Lic. Class \_\_\_\_\_

Contractor \_\_\_\_\_ Date \_\_\_\_\_

I am exempt under Sec. \_\_\_\_\_

B.&P.C. for this reason \_\_\_\_\_

Date: \_\_\_\_\_

Signature \_\_\_\_\_

Exemption for Reg. Maint. Elect.

SINGLE FAMILY HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm 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 under penalty of perjury state that the above information is correct. I agree to comply with all County ordinances and State laws regulating Electrical wiring, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

*Hilario Ortega* 4-23-93  
SIGNATURE OF PERMITTEE DATE

FOR APPLICANT TO FILL IN				NO.	EACH	FEE
New Residential Bldgs. & Pools						
1 & 2 -Family, Sq. Ft.				\$	\$	
Multi-family Sq. Ft.						
Residential Swimming Pools						
Outlets: Rec. <u>5</u> Light <u>4</u> Sw. <u>4</u>						
	First 20	<u>13</u>	<u>1.20</u>		<u>15.60</u>	
Total No. <u>13</u>	Additional					
Lighting Fixtures <u>4</u>	First 20	<u>4</u>	<u>1.20</u>		<u>4.80</u>	
Total No. <u>4</u>	Additional					
RESIDENTIAL APPLIANCES NOT OVER 3 HP.						
OTHER APPLIANCES NOT OVER 3 HP.						
Power Apparatus & Large Appliances						
Size & Type HP, KW, KVA, or KVAR						
_____ Over 3 to 10 Incl.						
_____ Over 10 to 50 Incl.						
_____ Over 50 to 100 Incl.						
_____ Over 100						
Services, Swbd., MCC & Panelboards						
0 - 399 Amp. Under 600 V						
400 - 1000 Amp. Under 600 V						
Over 1000 Amp. or Over 600 V						
BRANCH CIRCUIT FEES						
15A, or 20A, 120V, Lighting or Recept.						
_____ 1 To 10 Branch Circuits						
_____ 11 To 40 Branch Circuits						
_____ 41 Or More Branch Circuits						
15A, 20A, 208V To 277V Lighting Br. Circuits						
Temp. Power Pole & Appurtenances						
Sign with One Branch Circuit						
Additional Sign Branch Circuits						
Misc. Conduits & Conductors						
Other (See Complete Fee Schedule) _____						
PERMIT FEE	(Sub-Total)				<u>20.40</u>	
PLAN CHECKING FEE					<u>20.40</u>	
PERMIT ISSUING FEE					<u>17.10</u>	
TOTAL FEE					<u>37.50</u>	

JOB ADDRESS 140 N Indiana St

LOCALITY E L A

NEAREST CROSS ST. I. St

ASSESSOR MAP BOOK \_\_\_\_\_ PAGE \_\_\_\_\_ PARCEL \_\_\_\_\_

OWNER OR FIRM NAME Hilario Ortega

MAIL ADDRESS 140 N Indiana St #

CITY Los Angeles Tel. No. 267-5752

PLAN CHECK APPLICANT \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ Tel. No. \_\_\_\_\_

PERMIT APPLICANT \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ Tel. No. \_\_\_\_\_

LICENSE OR REG. NUMBER \_\_\_\_\_ Class. \_\_\_\_\_

DISTRICT NO. 6 PROCESSED BY E.B.

FINAL DATE 5/26/96

FINAL BY ETP/ED

P2 :  
01 \*3750  
\*3750 5  
01 -7357  
14-21  
04-22-93  
1

SEE REVERSE FOR EXPLANATORY LANGUAGE

INSPECTOR COPY

