

WORKERS' 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. 04409 Company BEAVER
 Certified copy is hereby furnished. 5-14-86
 Certified copy is filed with the county building inspection department.

Date 8.2.85 Applicant LUMINOUS
 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 311536 Lic. Class C45

Contractor LUMINOUS Date 8.2.85

I am exempt under Sec. _____

B.&P.C. for this reason _____

Date: _____

Signature _____

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, 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 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.

D Gordon 8.2.85
 Signature of Applicant or Agent Date

APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

1

FOR APPLICANT TO FILL IN				
BUILDING ADDRESS <u>3594 E. 1ST STREET</u>		CITY <u>E.L.A.</u> ZIP _____		
NO. OF BLDGS. NOW ON LOT _____		LOCALITY <u>ELA</u>		
TRACT _____ BLOCK _____ LOT NO. _____		NEAREST CROSS ST. <u>RITMAN</u>		
OWNER <u>1ST STREET DRUGS</u> TEL. NO. _____		ASSESSOR MAP BOOK _____ PAGE _____ PARCEL _____		
ADDRESS <u>3594 E. 1ST STREET</u>		USE ZONE <u>C3</u> MAP NO. <u>3213</u>		
CITY <u>E.L.A.</u> ZIP _____		SPECIAL CONDITIONS _____		
ARCHITECT OR ENGINEER _____ TEL. NO. _____		DISTRICT <u>6</u> GROUP <u>SIGNS</u> TYPE <u>IN</u> FIRE ZONE <u>3</u> PROCESSED BY <u>E.B</u>		
ADDRESS _____		STATISTICAL CLASSIFICATION _____ APT. _____ CONDO. _____		
CONTRACTOR <u>LUMINOUS</u> TEL. NO. <u>9274701</u>		CLASS NO. _____ DWELL. UNITS _____		
ADDRESS <u>7449 SCOUT AVE</u> LIC. NO. <u>311536</u>		SEWER MAP BK. _____ PG. _____		
CITY <u>BELL GARDENS</u> LIC. CLASS <u>C45</u>		VALUATION \$ <u>4000.00</u>		
SQ. FT. SIZE <u>61</u>	NO. OF STORIES _____	NO. OF FAMILIES _____	CHECK ONE	
DESCRIPTION OF WORK <u>INSTALL (2) SETS OF CHAN. LTRS TO BLDG. FACE.</u>			NEW <input type="checkbox"/>	
USE OF EXISTING BLDG. <u>RETAIL</u>			ADD <input checked="" type="checkbox"/>	
APPLICANT (PRINT) <u>LUMINOUS</u> TEL. NO. _____			ALTER <input type="checkbox"/>	
ADDRESS _____			REPAIR <input type="checkbox"/>	
PRESENT BUILDING ADDRESS _____			DEMOL <input type="checkbox"/>	
LOCALITY _____			FINAL DATE <u>8/25/85</u>	
MOVING CONTRACTOR _____ TEL. NO. _____			FINAL By <u>[Signature]</u>	
ADDRESS _____			VALIDATION # <u>1507A</u>	
REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH
FRONT P.L.				
SIDE P.L.				
P.C. Fee \$ _____		Permit Fee <u>38.75</u>		LDMA Ref. # _____
Investigation Fee _____		Issuance Fee <u>10.50</u>		LDMA P/C # _____
		Total Fee <u>49.25</u>		LDMA Perm. # _____

BUILDING ADDRESS <u>3594 E. 1ST STREET</u>	
LOCALITY <u>ELA</u>	
NEAREST CROSS ST. <u>RITMAN</u>	
ASSESSOR MAP BOOK _____	PAGE _____ PARCEL _____
USE ZONE <u>C3</u>	MAP NO. <u>3213</u>
SPECIAL CONDITIONS _____	
DISTRICT <u>6</u>	GROUP <u>SIGNS</u> TYPE <u>IN</u> FIRE ZONE <u>3</u> PROCESSED BY <u>E.B</u>
STATISTICAL CLASSIFICATION _____ APT. _____ CONDO. _____	
CLASS NO. _____ DWELL. UNITS _____	
SEWER MAP BK. _____ PG. _____	
VALUATION \$ <u>4000.00</u>	
\$ _____	
FINAL DATE <u>8/25/85</u>	
FINAL By <u>[Signature]</u>	
VALIDATION # <u>1507A</u>	
# <u>00001</u>	
<u>1004925</u>	
<u>0004925</u>	
<u>0802-85</u>	
LDMA Ref. # _____	
LDMA P/C # _____	
LDMA Perm. # _____	

INSPECTOR COPY

SEE REVERSE FOR EXPLANATORY LANGUAGE

76-A638A CE603A (REV. 1/80) 4-83

WORKERS' COMPENSATION DECLARATION

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 Certified copy is hereby furnished. 5-14-86
 Certified copy is filed with the county building inspection department.
 Date 8-2-85 Applicant LUMINOUS

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 31536 Lic. Class C45

Contractor LUMINOUS Date 8-2-85

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 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.

Signature of Permittee [Signature] Date 8-2-85

76A663 10/81
CE-806G

APPLICATION FOR ELECTRICAL PERMIT
COUNTY OF LOS ANGELES
BUILDING AND SAFETY

1

FOR APPLICANT TO FILL IN				JOB ADDRESS
New Residential Bldgs. & Pools	EACH	NO.	FEE	<u>3504 E 1ST STREET</u>
1 & 2-Family, Sq. Ft. _____	\$	—	\$	LOCALITY <u>ELA</u>
Multi-family Sq. Ft. _____		—		NEAREST CROSS ST. <u>DITMAN</u>
Residential Swimming Pools				OWNER OR FIRM NAME <u>1ST STREET DRUGS</u>
Outlets: Rec _____ Light _____ Sw. _____				MAIL ADDRESS <u>3504 E. 1ST STREET</u>
Total No. _____ First 20 Additional _____				CITY <u>ELA</u> Tel. No. _____
Lighting Fixtures				PLAN CHECK APPLICANT _____
Total No. _____ First 20 Additional _____				ADDRESS _____
Fixed Appliances Not Over 1 HP				CITY _____ Tel. No. _____
Range _____ Heater _____ D.W. _____				PERMIT APPLICANT <u>LUMINOUS NEON LIG.</u>
Oven _____ Dryer _____ W.M. _____				ADDRESS <u>7449 SCOUT AVE.</u>
Top _____ FAU _____ W.H. _____				CITY <u>BELL GARDENS</u> Tel. No. <u>927-4701</u>
Hood _____ Fan _____ Other _____				LICENSE OR REG. NUMBER <u>31536</u> Class. <u>C45</u>
Disp. _____ Room Air Cond. _____				DISTRICT NO. <u>6</u> PROCESSED BY <u>EB</u>
Power Apparatus & Large Appliances				FINAL DATE <u>5/28/84</u>
Size & Type HP, KW, KVA, or KVAR				FINAL BY <u>[Signature]</u>
_____ Up to 1 Incl.				
_____ Over 1 to 10 Incl.				
_____ Over 10 to 50 Incl.				
_____ Over 50 to 100 Inc.				
_____ Over 100				
Services, Swbd., MCC & Panelboards				
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			<u>1500</u>	
Additional Sign Branch Circuits				
Misc. Conduits & Conductors				
Other (See Complete Fee Schedule)				
PERMIT FEE (Sub-Total)			<u>1500</u>	
PLAN CHECKING FEE				
PERMIT ISSUING FEE			<u>1050</u>	
TOTAL FEE			<u>2550</u>	

ck-1359

SEE REVERSE FOR EXPLANATORY LANGUAGE

INSPECTOR COPY

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 1...2550
 ...2550
 0802-85