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

SAN GABRIEL VALLEY
125 BALDWIN
ARCADIA CA 91007
PHONE: (626) 574-0941 EXT:

0500

BUILDING PERMIT
ALTERATION/REPAIR
BL 0500 1008040013

LEGAL ID:
BK: 193 PG: 43 PC: 1

ASSESSOR INFORMATION NUMBER:
5379-016-067

TENANT:

OWNER: TEL. NO:
LIM, JOSE & LOLITA (626) 291-5367-
6822 MUSCATEL AV
SGAB 917751226

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:
156-261 3 00

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

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

	SQ. FT	NO. OF STORIES	CONST TYPE
STRUCTURE:			V-B

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

BLDGS. NOW ON LOT: VALUATION:
2,000

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE		26.60
AB STATE GREEN BLDG FEE	2000.00 VAL	1.00
AC STRONG MOTION RESID	2000.00 VAL	0.50
AX BUILDING REVIEW FEE		78.60
D2 PERMIT W/O EN-HC	2000.00 VAL	78.90
	TOTAL FEES	185.60

Shower Inspector
8/16/2010 OK
J Poole

REPORT ID: DPR261 ROUTE TO: BS0500

BUILDING ADDRESS:
6822 MUSCATEL AV N
SGAB CA 917751226
NEAREST CROSS STREET: DUARTE
THOMAS PAGE: 596 GRID: G1 LOCALITY: SAN GABRIEL

ISSUED ON: PROCESSED BY:
08/04/10 JCR

FINAL DATE: 8/31/10 FINAL BY: J Poole CODE:

DESCRIPTION OF WORK
REMODEL BATHROOM-CHANGE OUT FIXTURES

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
LOCATION AND SETBACKS		
SOILS ENGINEER APPROVAL		
FOUNDATION/TRENCH FORMS		
SLAB/UNDER FLOOR		
RAISED FLOOR FRAMING		
UNDERFLOOR INSULATION		
FLOOR SHEATHING		
ROOF SHEATHING		
SHEAR PANELS		
FRAME INSPECTION	8/10/10	J Poole
FIRE SPRINKLER HANGERS		
INSULATION/WEATHER STRIP		
INTERIOR LATH/DRYWALL		
EXTERIOR LATH		
RATED FLOOR/CEIL ASSEM.		
RATED WALL ASSEMBLIES		
RATED SHAFTS/OPENINGS		
T-BAR CEILINGS		
LOT DRAINAGE		

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code): Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure 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 (✓) all of or (_) portions of the work, and the structure is not intended or offered for sale (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the 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 it was not built or improved for the purpose of sale.).

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(_) I am exempt from licensure under the Contractors' State License Law for the following reason:

_____

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: http://www.leginfo.ca.gov/calaw.html.

Date: 8/4/16

Signature of Property Owner or Authorized Agent

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 _____ License No._____

Date _____ Contractor Signature_____

WORKERS' COMPENSATION DECLARATION

WARNING: FAILURE TO SECURE WORKERS' 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.

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 workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

Policy No. _____

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

Carrier _____ Policy Number _____ Expiration Date _____

Name of Agent _____ Phone 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 workers' compensation laws of California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions

Signature of Applicant _____ Date _____

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 _____ Date 8/4/16

JOB ADDRESS
LOCALITY

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 AQMD and/or EPA

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

DECLARATION REGARDING 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 (Section 3097, Civil Code).

Lender's Name

_____

Lender's Address

_____

By my signature below, I certify to each of the following:

I am the property owner or authorized to act on the property owner's behalf.

I have read this application and the information I have provided is correct.

I agree to comply with all applicable city and county ordinances and state laws relating to building construction.

I authorize representatives of this county to enter the above-identified property for inspection purposes.

Signature of Property Owner or Authorized Agent

_____

Date 8/4/16

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

SAN GABRIEL VALLEY # 0500
125 BALDWIN
ARCADIA CA 91007
PHONE: (626) 574-0941 EXT:

ELECTRICAL PERMIT
EL 0500 1008040010

LEGAL ID:
BK: 193 PG: 43 PC: 1

ASSESSOR INFORMATION NUMBER:
5379-016-067

TENANT:

OWNER: TEL. NO:
LIM, JOSE & LOLITA (626) 291-5367-
6822 MUSCATEL AV
SGAB 917751226

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		26.60
G1 OUTLETS-LGT,SW,RECP	2.00 OUT	4.10
	TOTAL FEES	30.70

REPORT ID: DPR265 ROUTE TO: BS0500

BUILDING ADDRESS:
6822 MUSCATEL AV N
SGAB CA 917751226
NEAREST CROSS STREET: DUARTE
THOMAS PAGE: 596 GRID: G1 LOCALITY: SAN GABRIEL

ISSUED ON: PROCESSED BY: PLAN BY:
08/04/10 JCR

FINAL DATE FINAL BY: CODE:
8/31/2010

DESCRIPTION OF WORK
ELECTRICAL FOR BATHROOM REMODEL

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
TEMPORARY POWER POLE		
UNDERGROUND CONDUIT		
UFER GROUND		
ROUGH CONDUIT		
ROUGH WIRING	8/12/10	
MAIN WATER LINE PLASTIC Y/N METAL Y/N		
UTILITY COMPANY NOTIFIED		

OWNER-BUILDER DECLARATION

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Date: 8/4/16

Signature of Property Owner or Authorized Agent

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LICENSED CONTRACTOR'S DECLARATION

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License Class _____ License No._____

Date _____ Contractor Signature_____

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Carrier _____ Policy Number _____ Expiration Date _____

Name of Agent _____ Phone Number _____

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Signature of Applicant _____ Date _____

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.

Jose Lima

Applicant (Print Name) _____ Applicant Signature _____

Company Name _____ Date 8/4/16

JOB ADDRESS
LOCALITY

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.

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Signature of Property Owner or Authorized Agent

_____

Date 8/4/16

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

SAN GABRIEL VALLEY
125 BALDWIN
ARCADIA CA 91007
PHONE: (626) 574-0941 EXT:

0500

PLUMBING PERMIT
PL 0500 1008040008

LEGAL ID:
BK: 193 PG: 43 PC: 1

ASSESSOR INFORMATION NUMBER:
5379-016-067

TENANT:

OWNER: TEL. NO:
LIM, JOSE & LOLITA (626) 291-5367-
6822 MUSCATEL AV
SGAB 917751226

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		26.60
07 BATHTUBS/SHOWERS	1.00 FIX	15.50
25 LAVATORIES / SINKS	1.00 FIX	15.50
	TOTAL FEES	57.60

REPORT ID: DPR263 ROUTE TO: BS0500

BUILDING ADDRESS:
6822 MUSCATEL AV N
SGAB CA 917751226
NEAREST CROSS STREET: DUARTE
THOMAS PAGE: 596 GRID: G1 LOCALITY: SAN GABRIEL

ISSUED ON: PROCESSED BY: PLAN BY:
08/04/10 JCR

FINAL DATE FINAL BY CODE:
8/31/10 J Rose

DESCRIPTION OF WORK
FIXTURE CHANGE OUT

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
UNDER SLAB WORK		
WATER SERVICE PLASTIC Y/N METAL Y/N		
ROUGH PLUMBING	8/10/10	J Rose
GAS PIPING		
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES		
LAWN SPRINKLERS		
GAS TEST		
UTILITY COMPANY NOTIFIED		
CWV		
GRAY WATER SYSTEM		

OWNER-BUILDER DECLARATION

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Date: 8/4/10

Signature of Property Owner or Authorized Agent

LICENSED CONTRACTOR'S DECLARATION

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Date _____ Contractor Signature_____

WORKERS' COMPENSATION DECLARATION

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Signature of Applicant _____ Date _____

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Vose Lim

Applicant (Print Name) _____ Applicant Signature _____

Company Name _____ Date 8/4/10

JOB ADDRESS
LOCALITY

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 ☐

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Signature of Property Owner or Authorized Agent

_____

Date 8/4/10

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

SAN GABRIEL VALLEY
125 BALDWIN
ARCADIA CA 91007
PHONE: (626) 574-0941 EXT:

0500

MECHANICAL PERMIT
ME 0500 1008040005

LEGAL ID:
BK: 193 PG: 43 PC: 1

ASSESSOR INFORMATION NUMBER:
5379-016-067

TENANT:

OWNER: TEL. NO:
LIM, JOSE & LOLITA (626) 291-5367-
6822 MUSCATEL AV
SGAB 917751226

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		26.60
41 SINGLE REGISTER FANS	1.00 FAN	15.20
	TOTAL FEES	41.80

REPORT ID: DPR264 ROUTE TO: BS0500

BUILDING ADDRESS:
6822 MUSCATEL AV N
SGAB CA 917751226
NEAREST CROSS STREET: DUARTE
THOMAS PAGE: 596 GRID: G1 LOCALITY: SAN GABRIEL

ISSUED ON: PROCESSED BY: PLAN BY:
08/04/10 JCR

FINAL DATE FINAL BY: CODE:
8/31/10

DESCRIPTION OF WORK
NEW EXHAUST FAN

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
FAU/WALL FURNACE		
COMBUSTION AIR OPENINGS		
DUCT WORK	8/10/10	
AC/COMPRESSOR		
THERMOSTAT		
FIRE DAMPERS		
SMOKE DETECTION DEVICES		
COMMERCIAL HOOD		

OWNER-BUILDER DECLARATION

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Date: 8/4/16

Signature of Property Owner or Authorized Agent

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LICENSED CONTRACTOR'S DECLARATION

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License Class _____ License No._____

Date _____ Contractor Signature_____

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____I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

Policy No. _____

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

_____ _____ _____

Carrier Policy Number Expiration Date

_____ _____

Name of Agent Phone 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 workers' compensation laws of California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions

_____ _____

Signature of Applicant Date

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.

JOSE LIM

Applicant (Print Name) Applicant Signature

_____ 08/04/16

Company Name Date

JOB ADDRESS
LOCALITY

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 AQMD and/or EPA

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

DECLARATION REGARDING 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 (Section 3097, Civil Code).

Lender's Name

_____

Lender's Address

_____

By my signature below, I certify to each of the following:

I am the property owner or authorized to act on the property owner's behalf.

I have read this application and the information I have provided is correct.

I agree to comply with all applicable city and county ordinances and state laws relating to building construction.

I authorize representatives of this county to enter the above-identified property for inspection purposes.

Signature of Property Owner or Authorized Agent

_____

Date 8/4/16

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

NOTICE TO PROPERTY OWNER

Dear Property Owner:

An application for a building permit has been submitted in your name listing yourself as the builder of the property improvements specified at 6822 N MUSCATEL AVE SAN GABRIEL CA 91775
(Property Address or Assessor Parcel)

We are providing you with an Owner-Builder Acknowledgement and Information Verification Form to make you aware of your responsibilities and possible risk you may incur by having this permit issued in your name as the Owner-Builder.

We will not issue a building permit until you have read, initialed your understanding of each provision, signed, and returned this form to us. An agent of the owner cannot execute this notice unless you, the property owner, obtain the prior approval of the permitting authority.

OWNER'S ACKNOWLEDGMENT AND VERIFICATION OF INFORMATION

DIRECTIONS: Read and initial each statement below to signify you understand or verify this information.

JC 1. I understand a frequent practice of unlicensed persons is to have the property owner obtain an "Owner-Builder" building permit that erroneously implies that the property owner is providing his or her own labor and material personally. I, as an Owner-Builder, may be held liable and subject to serious financial risk for any injuries sustained by an unlicensed person and his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an Owner-Builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

JC 2. I understand building permits are not required to be signed by property owners unless they are responsible for the construction and are not hiring a California licensed Contractor to assume this responsibility.

JC 3. I understand as an "Owner-Builder" I am the responsible party of record on the permit. I understand that I may protect myself from potential financial risk by hiring a licensed Contractor and having the permit filed in his or her name instead of my own.

JC 4. I understand Contractors are required by law to be licensed and bonded in California and to list their license numbers on permits and contracts.

JC 5. I understand if I employ or otherwise engage any person(s), other than California licensed Contractor(s), and the total value of my construction is more than five hundred dollars ($500), including labor and materials, I may be considered an "employer" under State and Federal law.

JC 6. I understand if I am considered an "employer" under State and Federal law, I must register with the State and Federal government, withhold payroll taxes, provide workers' compensation disability insurance, and contribute to unemployment compensation for each "employee." I also understand my failure to abide by these laws may subject me to serious financial risk.

7. I understand under California Contractors' State License Law, an Owner-Builder who builds single-family residential structures cannot legally build them with the intent to offer them for sale, unless all work is performed by licensed subcontractors and the number of structures does not exceed four within any calendar year, or all of the work is performed under contract with a licensed general building Contractor.

8. I understand as an Owner-Builder if I sell the property for which this permit is issued, I may be held liable for any financial or personal injuries sustained by any subsequent owner(s) that result from any latent construction defects in the workmanship or materials.

9. I understand I may obtain more information regarding my obligations as an "employer" from the Internal Revenue Service, the United States Small Business Administration, the California Department of Benefit Payments, and the California Division of Industrial Accidents. I also understand I may contact the California Contractors' State License Board (CSLB) at 1-800-321-CSLB (2752) or www.cslb.ca.gov for more information about licensed contractors.

10. I am aware of and consent to an Owner-Builder building permit applied for in my name, and understand that I am the party legally and financially responsible for proposed construction activity at the following address:

6522 N MUSCATEL AVE. SAN GABRIEL CA 91775

11. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern Owner-Builders as well as employers.

12. I agree to notify the issuer of this form immediately of any additions, deletions, or changes to any of the information I have provided on this form.

Licensed contractors are regulated by laws designed to protect the public. If you contract with someone who does not have a license, the Contractors' State License Board may be unable to assist you with any financial loss you may sustain as a result of a complaint. Your only remedy against unlicensed Contractors may be in civil court. It is also important for you to understand that if an unlicensed Contractor or employee of that individual or firm is injured while working on your property, you may be held liable for damages. If you obtain a permit as Owner-Builder and wish to hire Contractors, you will be responsible for verifying whether or not those Contractors are properly licensed and the status of their workers' compensation insurance coverage.

Before a building permit can be issued, this form must be completed and signed by the property owner and returned to the agency responsible for issuing the permit.

Note: A copy of the property owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the permit is issued to verify the property owner's signature.

YES ✓ NO ____ I am the bona fide owner of the single-family dwelling identified above, and it is my principal place of residence.

Please be advised, should we become aware that there is a violation of any section of the Contractor's License Law at a construction project within our jurisdiction, the names of those individuals, including the owner and any unlicensed persons involved in such violations, will be reported immediately to the Contractor's State License Board for follow-up action including possible legal actions as allowed by law.

Signature of property owner _____ Date: 8/4/10