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

SOUTHWEST DISTRICT OFFICE # 0700
1320 IMPERIAL HIGHWAY
LOS ANGELES CA 90044
PHONE: (323) 820-6500 EXT:

BUILDING PERMIT
ALTERATION/REPAIR
BL 0700 0908240043

LEGAL ID:
TR: 5450 LT: 709

ASSESSOR INFORMATION NUMBER:
6010-015-017

TENANT:

OWNER: TEL. NO:
DAVID MILLS (626) 915-7377-
250 E. ROWLAND
COVINA, CA

APPLICANT: TEL. NO:
FSZ BROTHERS -

CONTRACTOR: TEL. NO:
FSZ BROTHERS (562) 806-9333-
7114 LUXOR ST LIC. NO
P.O. BOX 2037 794097 B
DOWNEY CA 90241

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

MAP NO:	SEWER MAP BOOK:	PAGE:	FIRE ZONE:	CMP:
102209			3	00

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-				
SIDE PL-				

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

EXIST BLDG USE: SFD USE ZONE: R-2
EXIST OCC GRP:

BLDGS. NOW ON LOT: VALUATION:
10,000

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE		26.10
AB STATE GREEN BLDG FEE	10000.00 VAL	1.00
AC STRONG MOTION RESID	10000.00 VAL	1.00
AX BUILDING REVIEW FEE		77.10
D2 PERMIT W/O EN-HC	10000.00 VAL	204.60
	TOTAL FEES	309.80

REPORT ID: DPR261 ROUTE TO: BS0700

BUILDING ADDRESS:
1152 71ST ST E
LOSA CA 900011611
NEAREST CROSS STREET: CENTRAL
THOMAS PAGE: 674 GRID: E7 LOCALITY: FIRESTONE

ISSUED ON: PROCESSED BY:
08/24/09 HC

FINAL DATE FINAL BY: CODE:
11/9/09 [signature]

DESCRIPTION OF WORK
STUCCO SFD, C/O (5) WINDOWS SAME SIZE AND LOC, PATCH DRYWALL IN BATH AND KITCHEN, C/O EXT DOOR AND (3) INT DOORS.

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	9-22-09	CBO
SHEAR PANELS		
FRAME INSPECTION		
FIRE SPRINKLER HANGERS		
INSULATION/WEATHER STRIP		
INTERIOR LATH/DRYWALL		
EXTERIOR LATH	9-22-09	CBO
RATED FLOOR/CEIL ASSEM.		
RATED WALL ASSEMBLIES		
RATED SHAFTS/OPENINGS		
T-BAR CEILINGS		
LOT DRAINAGE		

OWNER-BUILDER DECLARATION

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(_) 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.).

(_) I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law).

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

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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: _____

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 B, License No. 794097

Date 8-24-9 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:

State Fund _____ _____

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.

Fortino Santana _____

Applicant (Print Name) Applicant Signature

FSZ Brothers, 08-24-09

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 _____

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

SOUTHWEST DISTRICT OFFICE # 0700
1320 IMPERIAL HIGHWAY
LOS ANGELES CA 90044
PHONE: (323) 820-6500 EXT:

ELECTRICAL PERMIT
EL 0700 0908240030

LEGAL ID:
TR: 5450 LT: 709

ASSESSOR INFORMATION NUMBER:
6010-015-017

TENANT:

OWNER: TEL. NO:
DAVID MILS (626) 915-7377-
250 E. ROWLAND
COVINA, CA

APPLICANT: TEL. NO:
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CONTRACTOR: TEL. NO:
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7114 LUXOR ST LIC. NO
P.O. BOX 2037 794097 B
DOWNEY CA 90241

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

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
A1 PERMIT ISSUANCE FEE		26.10
G1 OUTLETS-LGT,SW,RECP	20.00 OUT	40.00
G2 LIGHTING FIXTURES	10.00 LGT	20.00
LN OTHER PNL 0-399 AMPS	1.00 PAN	36.60
	TOTAL FEES	122.70

REPORT ID: DPR265 ROUTE TO: BS0700

BUILDING ADDRESS:
1152 71ST ST E
LOSA CA 900011611
NEAREST CROSS STREET: CENTRAL
THOMAS PAGE: 674 GRID: E7 LOCALITY: FIRESTONE

ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
08/24/09	HC		08/24/10

FINAL DATE: 11/9/09 FINAL BY: CB Dlute CODE:

DESCRIPTION OF WORK
RE-WIRE SFD

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
TEMPORARY POWER POLE		
UNDERGROUND CONDUIT		
UFER GROUND		
ROUGH CONDUIT	9-22-09	CBO
ROUGH WIRING		
MAIN WATER LINE PLASTIC Y/N METAL Y/N		
UTILITY COMPANY NOTIFIED	9-16-09	CBO

LOS ANGELES COUNTY PUBLIC WORKS Public Service That Works

OWNER-BUILDER DECLARATION

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Date: _____

Signature of Property Owner or Authorized Agent

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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 B, License No. 794097,

Date 8-24-9 Contractor Signature _____

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I hereby affirm under penalty of perjury one of the following declarations:

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Policy No. _____

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STATE FUND, _____ _____

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.

Fortino Santana, _____

Applicant (Print Name) Applicant Signature

FSZ BROTHERS CON W 08-24-09,

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

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Lender's Name

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Lender's Address

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Signature of Property Owner or Authorized Agent

_____

Date _____

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

SOUTHWEST DISTRICT OFFICE # 0700
1320 IMPERIAL HIGHWAY
LOS ANGELES CA 90044
PHONE: (323) 820-6500 EXT:

PLUMBING PERMIT
PL 0700 0908240018

LEGAL ID:
TR: 5450 LT: 709

ASSESSOR INFORMATION NUMBER:
6010-015-017

TENANT:

OWNER: TEL. NO:
DAVID MILS (626) 915-7377-
250 E. ROWLAND
COVINA, CA

APPLICANT: TEL. NO:
FSZ BROTHERS -

CONTRACTOR: TEL. NO:
FSZ BROTHERS (562) 806-9333-
7114 LUXOR ST LIC. NO
P.O. BOX 2037 794097 B
DOWNEY CA 90241

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

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE		26.10
63 WATER REPIPE, BR/FIX	5.00 FIX	32.00
	TOTAL FEES	58.10

REPORT ID: DPR263 ROUTE TO: BS0700

BUILDING ADDRESS:
1152 71ST ST E
LOSA CA 900011611
NEAREST CROSS STREET: CENTRAL
THOMAS PAGE: 674 GRID: E7 LOCALITY: FIRESTONE

ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
08/24/09	HC		08/24/10

FINAL DATE: 11/9/09 FINAL BY: CBK CODE:

DESCRIPTION OF WORK
COPPER RE-PIPE

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
UNDER SLAB WORK		
WATER SERVICE PLASTIC Y/N METAL Y/N		
ROUGH PLUMBING	9-22-09	CBO
GAS PIPING		
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES		
LAWN SPRINKLERS		
GAS TEST		
UTILITY COMPANY NOTIFIED		
CWV		
GRAY WATER SYSTEM		

LOS ANGELES COUNTY PUBLIC WORKS Public Service That Works

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License Class B License No. 794097

Date 8-24-09 Contractor Signature _____

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Signature of Applicant Date

LOBBYIST ORDINANCE CERTIFICATION

Complete this section for permits in Unincorporated Los Angeles County only

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Fatino Santana _____

Applicant (Print Name) Applicant Signature

FS2 BROTHERS, 08-24-09

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.

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Date _____

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

SOUTHWEST DISTRICT OFFICE # 0700
1320 IMPERIAL HIGHWAY
LOS ANGELES CA 90044
PHONE: (323) 820-6500 EXT:

MECHANICAL PERMIT
ME 0700 0908240015

LEGAL ID:
TR: 5450 LT: 709

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250 E. ROWLAND
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APPLICANT: TEL. NO:
FSZ BROTHERS -

CONTRACTOR: TEL. NO:
FSZ BROTHERS (562) 806-9333-
7114 LUXOR ST LIC. NO
P.O. BOX 2037 794097 B
DOWNEY CA 90241

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

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE		26.10
08 FURNACE/HEATER < 100	1.00 UNI	25.50
	TOTAL FEES	51.60

REPORT ID: DPR264 ROUTE TO: BS0700

BUILDING ADDRESS:
1152 71ST ST E
LOSA CA 900011611
NEAREST CROSS STREET: CENTRAL
THOMAS PAGE: 674 GRID: E7 LOCALITY: FIRESTONE

ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
08/24/09	HC		08/24/10

FINAL DATE 11-9-09 FINAL BY: CB Ohle CODE:

DESCRIPTION OF WORK
WALL HEATER

SPECIAL CONDITIONS:

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

LOS ANGELES COUNTY PUBLIC WORKS Public Service That Works

OWNER-BUILDER DECLARATION

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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: _____

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 B, License No. 794097,

Date 8-24-09 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:

State Fund, _____ _____

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.

Fortino Santana _____

Applicant (Print Name) Applicant Signature

FS2 Brothers, 08-24-09,

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 _____