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

FIRESTONE
7807 COMPTON
LOS ANGELES CA 90001
PHONE: [redacted] EXT:

0100

ELECTRICAL PERMIT
[redacted]

LEGAL ID:
ON FILE

ASSESSOR INFORMATION NUMBER:
6139-013-006

TENANT:
CRM TIRE PROCESSING

OWNER:
AVALON CO
15800 AVALON BL
COMP 902203211
TEL. NO: -

APPLICANT:
TAKALLOU
15800 S. AVALON BL
COMPTON CA 90220
TEL. NO: (310) 538-2222-

CONTRACTOR:
KINGHILL ELECTRIC
9618 SANTA FE SPRINGS RD.
SANTA FE SPRINGS CA 90670
TEL. NO: (562) 944-4815-
LIC. NO 444428/C10

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

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
AW PLANCHECK $74.50 MIN	0.00	N.	975.87
A1 PERMIT ISSUANCE FEE			18.90
JX MOTORS, LT 3 HP	33.00	MOT	346.50
JY MOTORS, 5HP	3.00	MOT	40.20
JZ MOTORS, 10HP	9.00	MOT	120.60
J9 OTH PWR APP GT 100HP	8.00	PWR	776.00
LL 3000 AMP PANELS, MCC	1.00	PAN	110.80
TOTAL FEES			2,388.87

BUILDING ADDRESS:
[redacted]
COMP CA 902203211
NEAREST CROSS STREET: ALONDRA
THOMAS PAGE: GRID: LOCALITY: COMPTON

ISSUED ON: 05/06/99
PROCESSED BY: YP
PLAN BY:
EXPIRES ON: 11/02/99

FINAL DATE: 9/28/99
FINAL BY:
CODE:

DESCRIPTION OF WORK
NEW 4000 AMP SERVICE AND MOTORS

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		

LOS ANGELES COUNTY
PUBLIC WORKS
Public Service That Works

REPORT ID: DPR265

ROUTE TO: BS0100

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 C10 Lic. No. 444428

Contractor's Signature _____ Date 5-6-99

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]

☐ 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 Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her 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 or she 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 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 _____

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.

Raul Herrera _____
Applicant (Print Name) Applicant Signature

Kingshill Electric 5-6-99
Company Name (if employed by an entity/agency) 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 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** 5-6-99

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

FIRESTONE
7807 COMPTON
LOS ANGELES CA 90001
PHONE: (213) 586-6541 EXT:

0100

ELECTRICAL PERMIT
EL 0100 9907070010

LEGAL ID:
ON FILE

ASSESSOR INFORMATION NUMBER:
6139-013-006

TENANT:
CRM TIRE PROCESSING

OWNER:
AVALON CO
15800 AVALON BL
COMP 902203211
TEL. NO:

APPLICANT:
DORSA INC DBA SYSTEMS ELECTRIC
15514 PARAMOUNT BLVD
PARAMOUNT, CA 90723
TEL. NO:
(562) 220-2510-

CONTRACTOR:
SYSTEMS ELECTRIC
15514 PARAMOUNT BLVD
PARAMOUNT CA
TEL. NO:
(310) 220-2510-
LIC. NO
478365 C10

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

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
A1 PERMIT ISSUANCE FEE			19.30
LD 400 AMP PANELS, MCC	1.00	PAN	52.90
TOTAL FEES			72.20

BUILDING ADDRESS:
15800 AVALON BL S
COMP CA 902203211
NEAREST CROSS STREET: ALONDRA
THOMAS PAGE: GRID: LOCALITY: COMPTON

ISSUED ON: 07/07/99
PROCESSED BY: HG
PLAN BY:
EXPIRES ON: 01/03/00

FINAL DATE 9/28/99
FINAL BY:
CODE:

DESCRIPTION OF WORK
NEW 4000 AMP SERVICE ONLY

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		

LOS ANGELES COUNTY
PUBLIC WORKS
Public Service That Works

REPORT ID: DPR265

ROUTE TO: BS0100

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 C-10 Lic. No. 478365

Contractor's Signature _____ Date 2-17-99

OWNER-BUILDER DECLARATION

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☐ I am exempt under Sec. _____ , B.& P.C. for this reason:

_____

_____

[Electrical, Plumbing & Sewer Permits Only]

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☐ 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.

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Applicant (Print Name) _____ Applicant Signature _____

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

JOB ADDRESS
LOCALITY

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Yes ☐ No ☐

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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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Applicant or Agent Signature _____ **Date** _____

electro eti incorporated
Independent Testing & Engineering Services for Electrical Power Systems

Pacific Southwest
Regional Office

3150-B E. BIRCH ST.
BREA, CA 92821

(714) 961-2888
FAX (714) 961-2889

Ground Fault System Test Report

at

CRM

Rancho Domingquez, CA

for

Systems Electric
P.O. Box 1806
Bellflower, CA 90707-1806

Attention: Mr. Bo Bowen
Order No: 6713

eti Reference No. 2098060

June 11, 1999

Submitted By: Armando Hernandez
Field Technician

Reviewed By: Richard Rice, P.E.
Operations Supervisor

1 PURPOSE

1.1 Performance testing of ground fault protective equipment is conducted to verify proper installation and operation. The National Electrical Code™ Section 230-95(c) requires an on site test of all ground fault systems upon initial installation. In healthcare facilities, the National Electrical Code™ section 517-17 requires at least one additional level of ground fault protection to be installed. This Code section also requires the additional testing of each level to ensure the ground fault system is 100% selective.

2 SUMMARY

2.1 This project was initiated by Mr. Bo Bowen with Systems Electric. All testing was performed by Electro-Test Field Engineer Armando Hernandez, on Wednesday, June 09, 1999.

2.2 Please refer to Section 5 "Results and Recommendations" for complete details of the testing.

3 EQUIPMENT TESTED AND INSPECTED

Boltswitch 4000A Fused Switch
Type: Bolted Pressure Contact Switch
Cat#: SL3613-ST
ITI Ground Fault System
Model: GFR
Cat#: BGFL259-1200

4 PROCEDURES

4.1 Ground Fault Systems

4.1.1 Visual and Mechanical Inspection

.1 Inspected for physical damage.

.2 Inspected neutral main bonding connection to assure:

- Proper size.
- Zero sequence system was grounded upstream of sensor.

.4 Verified ground electrode conductor(s) for proper size and connection.

.5 Inspected zero sequence sensor for proper installation.

.6 Verified that the control power transformer has adequate capacity for the system and that proper disconnect and overcurrent protection was provided.

4.1.2 Electrical Tests

.1 Measured pickup current by primary injection at sensor.

.2 Verified the relay does not operate at 75 percent of the pickup setting.

.3 Measured time delay at two points above pickup current level by injecting current into the sensor. Total trip time was electrically monitored.

.4 Tested system operation at fifty-five percent rated voltage for systems with external control power. (Reference UL 1053).

5 RESULTS AND RECOMMENDATIONS

5.1 The ground fault relay system was found correctly installed and operating properly.

5.2 The neutral feeder conductors were not complete at the time of testing. The contractor is responsible to megger the neutral loads for any grounds downstream of the neutral disconnect link before energization. Neutral grounds will tend to desensitize the ground fault system and may cause nuisance tripping.

eti electro • test

GROUND FAULT SYSTEM TEST REPORT

CLIENT: SYSTEMS ELECTRIC	ENGINEER: A.H.	ETI JOB NUMBER: 2098000
LOCATION: 15800 S. AVALON BLVD	WITNESS: —	DATE: 6/9/99
SWITCHGEAR DESIGNATION: MAIN	TEST EQUIP. ASSET #: 20-1123/20-1026	CALIBRATION DATE: 9-8-98/2/2/99

FIELD DATA

SWITCHBOARD MANUFACTURER: RSE-SIERRA
SHOP ORDER NO.: 15002-1
UL NO.: D5063092/5

MAIN OVERCURRENT DEVICE: ☐ CIRCUIT BREAKER ☒ FUSED SWITCH
MFGR.: BOLTSWITCH

TYPE	MODEL/CAT. NO.	CURRENT RATING	SYSTEM VOLTAGE	VOLTAGE RATING
BPCS	SL3613-ST	4000A	480Y/277V	600VAC

GROUND FAULT SYSTEM: ☐ NEUTRAL-GROUND STRAP ☒ ZERO-SEQUENCE
MFGR.: ITI

MODEL	CAT. NO.	PICK-UP RANGE	TIME RANGE	SENSOR/C.T.
GFR	BGF1259-1200	100-1200	0.1-1.0 SEC	—

AS FOUND SETTING: PICKUP CURRENT 800 TIME .1
AS LEFT SETTING: PICKUP CURRENT 800 TIME .1
SETTINGS SUPPLIED BY: 'AS FOUND'

INSPECTION

SERVICE ENTRANCE CONDUCTORS: 1/4X6 AL 5 PER PHASE
MAIN BONDING JUMPER: 2-1/4X2 AL
GROUND ELECTRODE CONDUCTOR: 3/0 ☒ AWG ☐ MCM

NEUTRAL-GROUND LOCATION (1): ☒ CORRECT ☐ INCORRECT ☐ CORRECTED BY CONTRACTOR
CONTROL POWER TRANSFORMER: .550 K VA TESTED @ SECONDARY PRI: 480V SEC: 123V

MONITOR/TEST PANEL OPERATION: NA ☐ CORRECT ☐ INCORRECT ☐ CORRECTED
OTHER

ELECTRICAL TESTS

BREAKER/SWITCH REACTION TIME (RT): .08 ☒ SECONDS ☐ CYCLES
REDUCED VOLTAGE TEST (55% RATED VOLTAGE): ☒ CORRECT ☐ INCORRECT

PICK-UP CURRENT (800A): 840 AMPS
PICK-UP CURRENT MINUS 25% (600 AMPS): ☒ NO TRIP (CORRECT) ☐ TRIP (INCORRECT)

SYSTEM NEUTRAL INSULATION RESISTANCE TO GROUND: NOT COMPLETE @ TIME OF TESTING MEGOHMS
OTHER

TIME-CURRENT CALIBRATION TESTS	PRIMARY CURRENT AMPERE-TURNS	PERCENT PICK-UP	TOTAL TIME	REACTION TIME	RELAY TIME	MFGR. TOLERANCE
	1200 A	150	.19	.08	.11	±10%
	1600 A	200	.19	.08	.11	±10%

REMARKS

(1) MAIN BONDING JUMPER FOUND DISCONNECTED. PLACE JUMPER BEFORE ENERGIZATION.

(2) 480V (XFMR) FUSES NOT IN PLACE.

(1) & (2) CORRECTED @ TIME OF TESTING

FSTR/90
980 ETI