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

WHITTIER
13523 TELEGRAPH ROAD
WHITTIER CA 90605
PHONE: (562) 946-1390 EXT:

0400

BUILDING PERMIT
RESIDENTIAL ADD/ALT/REP
BL 0400 0204260028

LEGAL ID:
TR: 30054 LT: 20

ASSESSOR INFORMATION NUMBER:
8125-051-016

TENANT:

OWNER:
CATRON;WILLIAM
POBOX 1180
MONTEBELLO 90640
TEL. NO: (213) 974-4873-

APPLICANT:
SAME AS OWNER
TEL. NO: -

CONTRACTOR:
SAME AS OWNER
TEL. NO: -
LIC. NO

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

MAP NO: 114H273 SEWER MAP BOOK: PAGE: FIRE ZONE: 4 CMP: 01

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

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

REQUIRED SET BACK	YARD:	HWY:	TOTAL SETBACK FROM PROP LINE:	EXIST WIDTH:
FRONT PL-	14	0	14	58
SIDE PL-	5	0	5	0

7/29/05 all items previously approved by Dave Bertrous. OK to drywall kitchen, familyroom & hobbyshop. Electrical & plumbing OK.
Dave

	SQ. FT	NO. OF STORIES	CONST TYPE	NEW OCCUP GROUP
STRUCTURE:	266	1	VN	R3
GARAGE:				
OTHER:	167	1	VN	U1

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

BLDGS. NOW ON LOT:
VALUATION: 28,900

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
B1 PLANCHECK W/ENERGY	20000.00	VAL	267.22
AA BLDG PERMIT ISSUANCE			21.20
AC STRONG MOTION RESID	28900.00	VAL	2.89
B1 PLANCHECK W/ENERGY	8900.00	VAL	142.86
B2 PERMIT W/ENERGY	28900.00	VAL	439.01
08 CERTIF OF OCCUPANCY			77.20
TOTAL FEES			950.38

REPORT ID: DPR261 ROUTE TO: BS0400

BUILDING ADDRESS:
4502 SILVER TIP DR
WHIT CA 906011758
NEAREST CROSS STREET: RIDGEGATE
THOMAS PAGE: 677 GRID: B2 LOCALITY: WHITTIER

ISSUED ON: 07/03/02 PROCESSED BY: JS EXPIRES ON: 12/30/02

FINAL DATE FINAL BY: CODE:

EXPIRED 10-4-05

DESCRIPTION OF WORK
DEN, KITCHEN, DINING ROOM EXTENSION & HOBBY SHOP

SPECIAL CONDITIONS:
EXPANSIVE SOIL

APPROVALS	DATE	INSPECTOR SIGNATURE
LOCATION AND SETBACKS		
SOILS ENGINEER APPROVAL		
FOUNDATION/TRENCH FORMS	5-21-03	
SLAB/UNDER FLOOR		
RAISED FLOOR FRAMING		
UNDERFLOOR INSULATION		
1ST LEVEL FLOOR SHEATH		
2ND LEVEL FLOOR SHEATH		
ROOF SHEATHING		
FIRE DEPT. FRAME INSPECT		
BLDG DEPT. FRAME INSPECT		
SHEAR PANELS		
INSULATION/WEATHER STRIP		
INTERIOR LATH/DRYWALL		
EXTERIOR LATH		
LOT DRAINAGE		
SMOKE DETECTION DEVICES		
FIRE DEPARTMENT APPROVAL		

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 _____ Lic. No. _____

_____ _____
Contractor's Signature Date

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]

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[All Other Permits]

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_____ _____
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.

_____ 7-2-02
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.

_____ _____
Applicant (Print Name) Applicant Signature

_____ _____
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.

_____ 7-2-02
Applicant or Agent Signature **Date**

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

WHITTIER
13523 TELEGRAPH ROAD
WHITTIER CA 90605
PHONE: (562) 946-1390 EXT:

0400

ELECTRICAL PERMIT
EL 0400 0207030048

LEGAL ID:
TR: 30054 LT: 20

ASSESSOR INFORMATION NUMBER:
8125-051-016

TENANT:

OWNER:
CATRON;WILLIAM
POBOX 1180
MONTEBELLO 90640
TEL. NO:
(213) 974-4873-

APPLICANT:
SAME AS OWNER
TEL. NO:
-

CONTRACTOR:
SAME AS OWNER
TEL. NO:
-
LIC. NO

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

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
A1 PERMIT ISSUANCE FEE			21.20
F1 120V, 15/20A BR CKTS	4.00	BR	51.60
H2 RES GRBG DISP LT 3HP	1.00	DIS	8.20
H3 RES DISHWASHR LT 3HP	1.00	DIS	8.20
H4 RES RANGE HDS LT 3HP	1.00	HOO	8.20
H7 RES EXHAUST FANS	1.00	EX	8.20
TOTAL FEES			105.60

REPORT ID: DPR265

ROUTE TO: BS0400

BUILDING ADDRESS:
4502 SILVER TIP DR
WHIT CA 906011758
NEAREST CROSS STREET: RIDGEGATE
THOMAS PAGE: 677 GRID: B2 LOCALITY: WHITTIER

ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
07/03/02	JS		12/30/02

FINAL DATE FINAL BY: (CODE)
EXPIRED 10-12-6

DESCRIPTION OF WORK
FOR BL#0204260028

SPECIAL CONDITIONS:

APPPOVALS	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		

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 _____ Lic. No. _____

_____ _____
Contractor's Signature Date

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]

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_____ _____
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.

_____ 7-2-02
Applicant Signature Date

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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 (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

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Lender's Name _____

Lender's Address _____

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_____ 7-2-02
Applicant or Agent Signature **Date**

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

WHITTIER
13523 TELEGRAPH ROAD
WHITTIER CA 90605
PHONE: (562) 946-1390 EXT:

0400

PLUMBING PERMIT
PL 0400 0207030023

LEGAL ID:
TR: 30054 LT: 20

ASSESSOR INFORMATION NUMBER:
8125-051-016

TENANT:

OWNER:
CATRON;WILLIAM
POBOX 1180
MONTEBELLO 90640
TEL. NO: (213) 974-4873-

APPLICANT:
SAME AS OWNER
TEL. NO: -

CONTRACTOR:
SAME AS OWNER
TEL. NO: -
LIC. NO

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

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE			21.20
07 BATHTUBS/SHOWERS	2.00	FIX	24.80
13 DISHWASHER(S)	1.00	FIX	12.40
25 LAVATORIES / SINKS	2.00	FIX	24.80
45 WATER CLOSET/URINAL	1.00	FIX	12.40
47 WATER HEATER(S)	1.00	WTH	12.40
49 WATER TREATING EQUIP	1.00	SYS	12.40
TOTAL FEES			120.40

REPORT ID: DPR263 ROUTE TO: BS0400

BUILDING ADDRESS:
4502 SILVER TIP DR
WHIT CA 906011758
NEAREST CROSS STREET: RIDGEGATE
THOMAS PAGE: 677 GRID: B2 LOCALITY: WHITTIER

ISSUED ON: 07/03/02 PROCESSED BY: JS PLAN BY: EXPIRES ON: 12/30/02

FINAL DATE FINAL BY: CODE:
EXPIRED 10-12-6

DESCRIPTION OF WORK
FOR BL#0204260028

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
UNDER SLAB WORK	5-21-03	
WATER SERVICE PLASTIC Y/N METAL Y/N		
ROUGH PLUMBING		
GAS PIPING		
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES		
LAWN SPRINKLERS		
GAS TEST		
UTILITY COMPANY NOTIFIED		
CWV		
GRAY WATER SYSTEM		

LICENSED CONTRACTOR'S DECLARATION

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Contractor's Signature _____ Date _____

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_____

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[Electrical, Plumbing & Sewer Permits Only]

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Applicant Signature _____ Date 7-2-02

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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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Applicant or Agent Signature _____ **Date** 7-2-02

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

WHITTIER
13523 TELEGRAPH ROAD
WHITTIER CA 90605
PHONE: (562) 946-1390 EXT:

0400

MECHANICAL PERMIT
ME 0400 0207030022

LEGAL ID:
TR: 30054 LT: 20

ASSESSOR INFORMATION NUMBER:
8125-051-016

TENANT:

OWNER:
CATRON;WILLIAM
POBOX 1180
MONTEBELLO 90640
TEL. NO:
(213) 974-4873-

APPLICANT:
SAME AS OWNER
TEL. NO:
-

CONTRACTOR:
SAME AS OWNER
TEL. NO:
-
LIC. NO

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

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE		21.20
41 SINGLE REGISTER FANS	1.00 FAN	11.80
	TOTAL FEES	33.00

REPORT ID: DPR264 ROUTE TO: BS0400

BUILDING ADDRESS:
4502 SILVER TIP DR
WHIT CA 906011758
NEAREST CROSS STREET: RIDGEGATE
THOMAS PAGE: 677 GRID: B2 LOCALITY: WHITTIER

ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
07/03/02	JS		12/30/02

FINAL DATE FINAL BY: CODE:
EXPIRED 10-12-6

DESCRIPTION OF WORK
FOR BL#0204260028

SPECIAL CONDITIONS:

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

LICENSED CONTRACTOR'S DECLARATION

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Contractor's Signature _____ Date _____

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_____

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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 7-2-02

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.

Applicant (Print Name) _____ Applicant Signature _____

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** 7-2-02

JOB ADDRESS 4502 SILVER TIP.

OWNER

① 2" SAND REQUIRED OVER THE VISQUEEN

② 5/8" ANCHOR BOLTS REQUIRED

③ HD8A HARDWARE NOT HERE. PLANS DO NOT SPECIFY LOCATION OF HD's

④ EPOXY ALL DOWELS.

⑤ PLUMBING WASTE LINE REQUIRES A 10' HEAD TEST. AFTER PASSING INSPECTION THE WASTE LINE WILL THEN BE WRAPPED WITH STYROFOAM.

⑥ 4" ABS AT GAR FOOTING WILL NOT WORK AS IT DISPLACES ALL THE CONCRETE AND STEEL

1-8-03 [signature]

DATE INSPECTOR'S SIGNATURE

JOB ADDRESS 4502 Silver Tip

OWNER

2 of 2

5) Explain purpose of 4" black [illegible] in garage wall footing.

7) Provide additional foundation bolt on each side of ABS.

12/12/02 [signature]

DATE INSPECTOR'S SIGNATURE

JOB ADDRESS 4502 Silver tip

OWNER

1 of 2

1) Provide min 3" clear between rebar and earth.

2) Provide min 1" clear between electrical conduit & rebar.

3) Prior to approval of footings for patio, have ~~[illegible]~~ stope setback approved by plancheck.

4) Column footings are designed for two concrete pours. Recall for inspection prior to dry packing under post flange!

5) Provide shop certs for posts.

12/12/02 [signature]

DATE INSPECTOR'S SIGNATURE

JOB ADDRESS 4502 Silver tip

OWNER

Ok to drywall kitchen, den & hobby shop.

7/29/05 [signature]

DATE INSPECTOR'S SIGNATURE

JOB ADDRESS 4502 SILVER TIP

OWNER

⑦ PROVIDE CERT ~~[illegible]~~ THAT STEEL WAS FABRICATED BY A L.A. CITY CERTIFIED FABRICATOR.

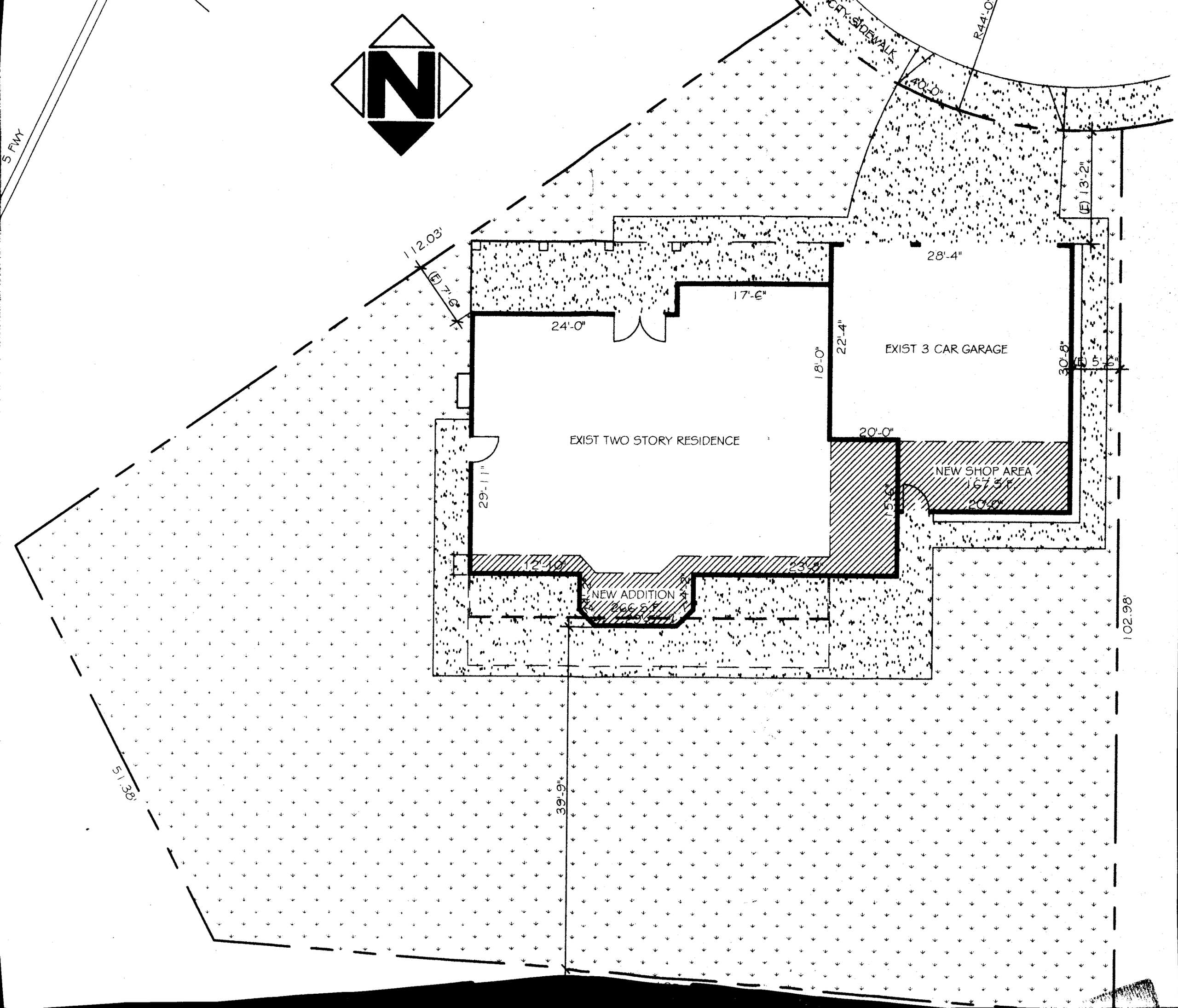
⑧ HORIZONTAL STEEL IS REQUIRED TO BE DOWELED AND EPOXIED INTO EXISTING FOOTINGS.

⑨ THE PAD FOOTINGS SHALL BE CENTERED UNDER THE COLUMNS BEING SUPPORTED

⑩ GARAGE FOOTING TO BE 24" DEEP INTO UNDISTURBED SOIL

1-8-3 [signature]

DATE INSPECTOR'S SIGNATURE


N
5 FWY
CITY SIDEWALK
R44'-0"
40'-0"
(E) 13'-2"
28'-4"
112.03'
(E) 7'-6"
17'-6"
24'-0"
22'-4"
18'-0"
EXIST 3 CAR GARAGE
30'-8"
(E) 5'-6"
20'-0"
EXIST TWO STORY RESIDENCE
NEW SHOP AREA
167 S.F.
20'-0"
29'-11"
15'-6"
12'-10"
23'-9"
NEW ADDITION
266 S.F.
102.98'
51.38'
39'-9"