17800 Colima

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

LA PUENTE (UNIC) # 0200
16005 CENTRAL AVENUE
LA PUENTE CA 91744
PHONE: (626) 961-9611 EXT:

BUILDING PERMIT
ALTERATION/REPAIR
BL 0200 1208170025

LEGAL ID:
ON FILE

ASSESSOR INFORMATION NUMBER:
8265-003-003

TENANT:

OWNER: TEL. NO:
ARNEL DEVELOPMENT (714) 481-1150-28
949 SOUTH COAST DR
COSTA MESA, CA92626

APPLICANT: TEL. NO:
WALKER, CHRISTINE (949) 500-3648-
3857 BIRCH ST
#472 NEWPORT BEACH

CONTRACTOR: TEL. NO:
CITY ROOFING AND MAINTENANCE, INC. (949) 500-3648-
3857 BIRCH STREET #472 LIC. NO
NEWPORT BEACH, CA 92660 NONE

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

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

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

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

	SQ. FT	NO. OF STORIES	CONST TYPE
STRUCTURE:			VN

EXIST BLDG USE: APART USE ZONE: X
EXIST OCC GRP:

BLDGS. NOW ON LOT: VALUATION:
10,200

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE			27.90
AB STATE GREEN BLDG FEE	10200.00	VAL	1.00
AE STRONG MOTION OTHER	10200.00	VAL	2.10
AX BUILDING REVIEW FEE			82.60
D2 PERMIT W/O EN-HC	10200.00	VAL	235.90
	TOTAL FEES		349.50

REPORT TO: [illegible] ROUTE TO: LS0200

BUILDING ADDRESS:
17800 COLIMA RD 201-208
ROWH CA 91748
NEAREST CROSS STREET:
THOMAS PAGE: 678 GRID: H4 LOCALITY: ROWLAND HEIGHT

ISSUED ON: PROCESSED BY:
08/17/12 GD

FINAL DATE FINAL BY: CODE:
EXPIRED

DESCRIPTION OF WORK
T/O AND RE-ROOF COMP-SHINGLES CLASS A 30 FELT LIFETIME DIMENSIONAL

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	08/20/12	[illegible]
SOLAR PANELS		
FRAME INSPECTION		
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.).

(_) 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).

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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 C-39 License No. 944471

Date 8/17/12 Contractor Signature [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 — 1449183-12 — 2/2013

Carrier — Policy Number — Expiration Date

CHOICE PLUS

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] 8/17/12

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

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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

[signature]

Date 8/17/12

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DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

LA PUENTE (UNIC)
16005 CENTRAL AVENUE
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NEWPORT BEACH, CA 92660 NONE

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LIC. NO:

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

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

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

STRUCTURE:	SQ. FT	NO. OF STORIES	CONST TYPE
			VN

EXIST BLDG USE: APART USE ZONE: X
EXIST OCC GRP:

BLDGS. NOW ON LOT: VALUATION: 11,300

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE			27.90
AB STATE GREEN BLDG FEE	11300.00	VAL	1.00
AC STRONG MOTION RESID	11300.00	VAL	1.10
AX BUILDING REVIEW FEE			82.60
D2 PERMIT W/O EN-HC	11300.00	VAL	252.90
	TOTAL FEES		365.50

REPORT ID: DPR261 ROUTE TO: BS0200

BUILDING ADDRESS:
17800 COLIMA RD 65-76
ROWH CA 91748
NEAREST CROSS STREET:
THOMAS PAGE: 678 GRID: H4 LOCALITY: ROWLAND HEIGHT

ISSUED ON: PROCESSED BY:
08/17/12 GD

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FOUNDATION/TRENCH FORMS		
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FLOOR SHEATHING		
ROOF SHEATHING		
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FRAME INSPECTION		
FIRE SPRINKLER HANGERS		
INSULATION/WEATHER STRIP		
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RATED WALL ASSEMBLIES		
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License Class C39 License No. 944471

Date 8/17/12 Contractor Signature [signature]

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Policy No. _____

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STATEFUND 1949183-12 2/2013

Carrier Policy Number Expiration Date

CHOICE PLUS

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] 8/17/12

Signature of Applicant Date

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_____ _____

Applicant (Print Name) Applicant Signature

_____ _____

Company Name Date

JOB ADDRESS
LOCALITY

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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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Lender's Name

_____

Lender's Address

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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

[signature]

Date 8/17/12

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

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

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

	SQ. FT	NO. OF STORIES	CONST TYPE
STRUCTURE:			VN

EXIST BLDG USE: APART USE ZONE: X
EXIST OCC GRP:

BLDGS. NOW ON LOT: VALUATION: 16,300

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE			27.90
AB STATE GREEN BLDG FEE	16300.00	VAL	1.00
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AX BUILDING REVIEW FEE			82.60
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REPORT ID: DPR261 ROUTE TO: BS0200

BUILDING ADDRESS:
17800 COLIMA RD 607-614
ROWH CA 91748
NEAREST CROSS STREET:
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