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:

BUILDING PERMIT
ALTERATION/REPAIR
BL 0500 1004140039

LEGAL ID:
TR: 36264 UN: 13

ASSESSOR INFORMATION NUMBER:
8403-017-038

TENANT:

OWNER: TEL. NO:
GARDEN OAKS TOWN HOMES -
20296 ARROW HWY
COVINA CA 91724

APPLICANT: TEL. NO:
A1 QUALITY ROOFING, INC. (951) 808-4251-

CONTRACTOR: TEL. NO:
A1 QUALITY ROOFING, INC. (951) 808-4251-
750 S LINCOLN AVE #104-368 LIC. NO
CORONA,CA 92882 605240 C39 *

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

MAP NO: SEWER MAP BOOK: PAGE: FIRE ZONE: CMP:
150329 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-

	SQ. FT	NO. OF STORIES	CONST TYPE
STRUCTURE:	4000		V-B

EXIST BLDG USE: RESID USE ZONE: R-3
EXIST OCC GRP:

BLDGS. NOW ON LOT: VALUATION: 8,000

FEES PAID

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE			26.10
AB STATE GREEN BLDG FEE	8000.00	VAL	1.00
AC STRONG MOTION RESID	8000.00	VAL	0.80
AX BUILDING REVIEW FEE			77.10
D2 PERMIT W/O EN-HC	8000.00	VAL	172.80
	TOTAL FEES		277.80

processed refund 6-18-10
Job cancelled by contractor

* ADDITIONAL DATA ON FILE

REPORT ID: DPR261 ROUTE TO: BS0500

BUILDING ADDRESS:
20296 ARROW HW E A
COVI CA 917241132
NEAREST CROSS STREET: BANNA
THOMAS PAGE: 599 GRID: F2 LOCALITY: COVINA

ISSUED ON: 04/14/10 PROCESSED BY: MM

FINAL DATE FINAL BY: CODE:

DESCRIPTION OF WORK
REMOVE ROOF INSTALL NEW BUR. Units A thru D

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		
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).

(_) 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 39 License No. 605240

Date 4-14-10 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
3013232810 — Policy Number
1-1-11 — 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)
Robert Shelton — Applicant Signature
Alquality Roofing — Company Name
4-14-10 — 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 4-14-10

Since 1991®

A1 QUALITY ROOFING™ INC.

THE INDUSTRY LEADER IN SERVICE AND INSTALLATIONS

May 17, 2010

County of Los Angeles
Department of Public Works
Building and Safety/Land Development
San Gabriel Valley
125 Baldwin
Arcadia, CA 91007

To Whom It May Concern:

Please be informed that the roofing project located at: Garden Oaks Town Homes, 20296 Arrow Hwy, Covina, CA 91724 has been cancelled. Due to the fact that this project has been canceled we are requesting that our permit fees be refunded.

Kind Regards,

Robert Shelton
President
A1 Quality Roofing, Inc.

INSURED & BONDED • LIC. #605240 GAFMC CERT. # ME10533
750 S. Lincoln Avenue, Suite 104, Corona, CA 92882 • **Ph:** (951) 808-4251 • **Fax:** (951) 278-8527
Toll Free: (877) 631-ROOF • (800) 400-2799 • **Web:** www.a1qualityroofinginc.com

20-0035 DPW 5/89
76@212V4

4. DIST. OFF.

TO: COUNTY OF LOS ANGELES
DEPARMENT OF PUBLIC WORKS

Date 6-18-10

CLAIM FOR REFUND

Claim for refund of Permit and other fees paid, as provided by Los Angeles County Code: Title 20, Sanitary Sewer and Industrial Waste; Title 26, Building; Title 27, Electrical; Title 28, Plumbing; Title 29, Mechanical.

Claim is hereby made for the refund of $ 222.24, which is eighty percent (80%) of the fee paid ($ 277.80) for the permit or other service shown below. (Check one only.)

- [x] BUILDING PERMIT
- [ ] GRADING PERMIT
- [ ] PLUMBING PERMIT
- [ ] FEE FOR INSPECTIONS & RECORD PLANS
- [ ] FEE FOR PROCESSING SEWER EASEMENT
- [ ] PLAN CHECK FEE, INDUSTRIAL WASTE FACILITIES
- [ ] ELECTRICAL PERMIT
- [ ] PLAN CHECK FEE, BLDG. & SAFETY
- [ ] SEWER-SEWAGE DISPOSAL PERMIT
- [ ] _____
- [ ] REGISTRATION FEE, CONTRACTOR
- [ ] REGISTRATION FEE, JOURNEYMAN
- [ ] MECHANICAL PERMIT
- [ ] FEE FOR SPECIAL STUDY
- [ ] PLAN CHECK FEE, SANITARY SEWERS
- [ ] FEE FOR PROCESSING REIMBURSEMENT JOBS

Permit No. BL1004140037 Receipt No. BS05000117280 Date Issued 4-14-10

Job Number or Job Address 20296 E. Arrow Hwy "A-D", Covina, CA 91724

I hereby certify that no work was commenced or done under the permit or receipt issued and that the information written above is true and correct to my best knowledge and belief, and that this claim is justly due and has not been paid.

CLAIMANT [signature]

Address 725 S. Lincoln Ave Suite [illegible] CA 92882 Suite 102
STREET CITY ZONE

Claimant to fill in all necessary spaces above this line

I hereby certify that all the terms and conditions of Titles 20, 26, 27, 28 and 29 governing refunds have been strictly and fully complied with, and this refund is APPROVED.

APPROVED BY [signature]
(District Engineer or Other Supervisor)

The original copy of the permit or receipt issued must be attached to and made a part of this claim