19625 BENWOOD ST

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 0203210009

LEGAL ID:
TR: 21951 LT: 19

ASSESSOR INFORMATION NUMBER:
8404-013-016

TENANT:

OWNER: TEL. NO:
CARPENTER, ROBERT W (626) 339-8106-
19625 BENWOOD ST
COVI 917242034

APPLICANT: TEL. NO:
SAME AS OWNER -

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

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

MAP NO: SEWER MAP BOOK: PAGE: FIRE ZONE: CMP:
147-325 3 01

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:	0		VN

EXIST BLDG USE: RESID USE ZONE: A-1
EXIST OCC GRP:

BLDGS. NOW ON LOT: VALUATION: 1,500

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
AA BLDG PERMIT ISSUANCE		20.60
AC STRONG MOTION RESID	1500.00 VAL	0.50
AX BUILDING REVIEW FEE		60.80
D2 PERMIT W/O EN-HC	1500.00 VAL	60.90
	TOTAL FEES	142.80

REPORT ID: DPR261 ROUTE TO: BS0500

BUILDING ADDRESS:
19625 BENWOOD ST E
COVI CA 917242034
NEAREST CROSS STREET: GRAND AVE/COVINA BLVD.
THOMAS PAGE: 599 GRID: G4 LOCALITY: COVINA

ISSUED ON: PROCESSED BY: EXPIRES ON:
03/29/02 DS 09/25/02

FINAL DATE FINAL BY: CODE:
8-21-2 Jacobson

DESCRIPTION OF WORK
INSTALL PRE-FAB FIREPLACE IN DINING ROOM

SPECIAL CONDITIONS:
*UL APP'D**

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 PLACE	5-20-2	
FIRE SPRINKLER HANGERS		
INSULATION/WEATHER STRIP		
INTERIOR LATH/DRYWALL	5-23-2	
EXTERIOR LATH		
RATED FLOOR/CEIL ASSEM.		
RATED WALL ASSEMBLIES		
RATED SHAFTS/OPENINGS		
T-BAR CEILINGS		
LOT DRAINAGE		

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]

☐ 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.).

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Billie U. Carpenter 3-29-02

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.

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.

Billie U. Carpenter 3-29-02

Applicant or Agent Signature **Date**

19625 BENWOOD ST.

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 0203210009~~
DUPLICATE

Soff Covina Blvd on Westridge E of Grand

LEGAL ID:
TR: 21951 LT: 19

ASSESSOR INFORMATION NUMBER:
8404-013-016

TENANT:

OWNER: TEL. NO:
CARPENTER, ROBERT W (626) 339-8106-
19625 BENWOOD ST
COVI 917242034

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

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

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AX BUILDING REVIEW FEE			60.80
D2 PERMIT W/O EN-HC	1500.00	VAL	60.90
	TOTAL FEES		142.80

5/20/02 FP - Framing & Gas test OK - [illegible]

5/23/02 FP. vent & Clearance w/ Gas test OK. [illegible]

No Final will be given until all BRICK non-Combustible MTL is installed. [illegible]

REPORT ID: DPR261 ROUTE TO: BS0500

BUILDING ADDRESS:
19625 BENWOOD ST E
COVI CA 917242034
NEAREST CROSS STREET: GRAND AVE/COVINA BLVD.
THOMAS PAGE: 599 GRID: G4 LOCALITY: COVINA

ISSUED ON:	PROCESSED BY:	EXPIRES ON:
03/29/02	DS	09/25/02

FINAL DATE	FINAL BY:	CODE:
12/13/04	Don	

DESCRIPTION OF WORK
INSTALL PRE-FAB FIREPLACE IN DINING ROOM

SPECIAL CONDITIONS:
*UL APP'D**

APPROVALS	DATE	INSPECTOR SIGNATURE
LOCATION AND SETBACKS		
SOILS ENGINEER APPROVAL		
FOUNDATION/TRENCH FORMS		
SLAB/UNDER FLOOR	3/26/04	Don
RAISED FLOOR FRAMING		
UNDERFLOOR INSULATION		
FLOOR SHEATHING		
ROOF SHEATHING		
SHEAR PANELS		
FRAME INSPECTION		
FIRE SPRINKLER HANGERS		
INSULATION/WEATHER STRIP		
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EXTERIOR LATH		
RATED FLOOR/CEIL ASSEM.		
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_____

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Policy Number _____

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_____ _____
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_____ _____
Applicant (Print Name) Applicant Signature

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

JOB ADDRESS
LOCALITY

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_____ _____
Applicant or Agent Signature **Date**

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:

PLUMBING PERMIT
PL 0500 0203210004

LEGAL ID:
TR: 21951 LT: 19

ASSESSOR INFORMATION NUMBER:
8404-013-016

TENANT:

OWNER: TEL. NO:
CARPENTER, ROBERT W (626) 339-8106-
19625 BENWOOD ST
COVI 917242034

APPLICANT: TEL. NO:
SAME AS OWNER -

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

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

FEES PAID

FEE DESCRIPTION:	QUANTITY: UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE		20.60
51 LOW PRS GAS LE5 OUTS	1.00 SYS	12.10
	TOTAL FEES	32.70

REPORT ID: DPR263 ROUTE TO: BS0500

BUILDING ADDRESS:
19625 BENWOOD ST E
COVI CA 917242034
NEAREST CROSS STREET: GRAND AVE/COVINA BLVD.
THOMAS PAGE: 599 GRID: G4 LOCALITY: COVINA

ISSUED ON:	PROCESSED BY:	PLAN BY:	EXPIRES ON:
03/29/02	DS		09/25/02

FINAL DATE FINAL BY: CODE:
8-21-2 [illegible] Jacobsen

DESCRIPTION OF WORK
GAS LINE FOR PRE-FAB FIREPLACE IN DINING ROOM

SPECIAL CONDITIONS:

APPROVALS	DATE	INSPECTOR SIGNATURE
UNDER SLAB WORK		
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		
PRE FAB F/P VENT	5-23-2	WKJ

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LOCALITY

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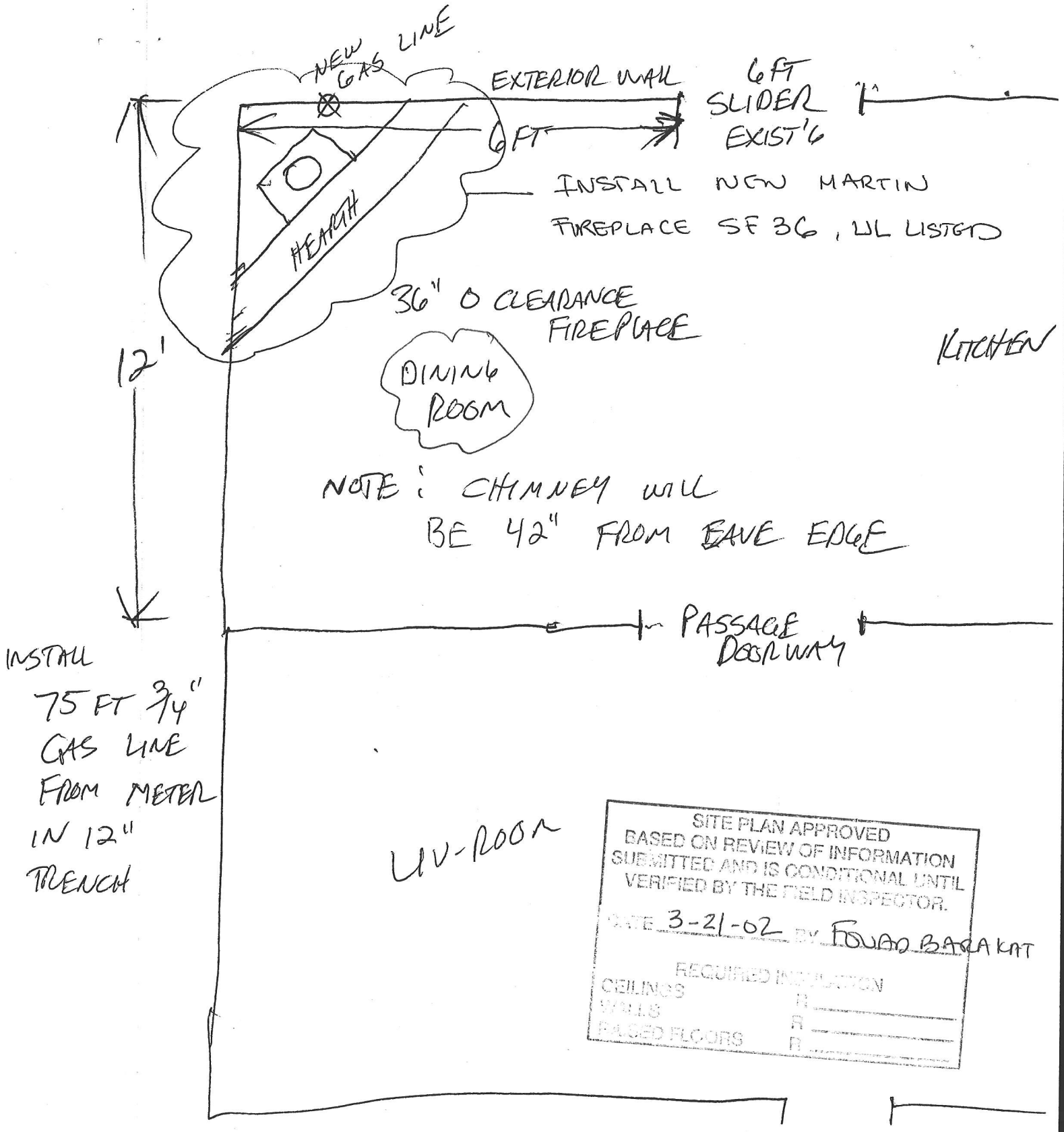
Applicant or Agent Signature **Date**



ROBERT CARPENTER
19625 E. BENWOOD ST.
COVINA CA 91724

BL020329009