*Basement shall not be used for habitable area. Owners representative - Greg Padgett 5-12-94

APPLICATION FOR BUILDING PERMIT

1

COUNTY OF LOS ANGELES — BUILDING AND SAFETY

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the county building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

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.

Date 11/23/93 Applicant Wally Padgett

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed underprovisions 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 Number 584750 Lic. Class B

Contractor W LANE Co Date ~~11-23-93~~ 11/31/96

☐ I am exempt under Sec. _____

B.&P.C. for this reason _____

_____ Date: _____

Signature _____

☐ 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 (Section 7044, Business and Professions Code.)

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code.)

CONSTRUCTION LENDING AGENCY

I hereby affirm 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 penalty of perjury that the above information is correct. I agree to comply with all 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.

Wally Padgett 11/23/93
Signature of Applicant or Agent — Date

76 A638A 20-0010 DPW 12/92

BASEMENT 610 # 36,059 #

FOR APPLICANT TO FILL IN

BUILDING ADDRESS	4008 WALNUTHAVEN
CITY	COVINA
ZIP	91722
SIZE OF LOT	59 X 120
NO. OF BLDGS. NOW ON LOT	1
TRACT	17265
BLOCK	
LOT NO.	18
ASSESSOR MAP BOOK	476
PAGE	1+2
PARCEL	
OWNER	KEN, DENISE WILSON
TEL NO.	856-0837
ADDRESS	4008 WALNUTHAVEN
CITY	COVINA
ZIP	91722
ARCHITECT OR ENGINEER	M. VISITACION
TEL NO.	
ADDRESS	603 SENTOUS
CONTRACTOR	W LANE Co.
TEL NO.	814-9493
ADDRESS	201 N. BROMLEY
LIC. NO.	584750
CITY	WEST COVINA
LIC. CLASS	B
SQ. FT. SIZE	~~2470~~
NO. OF STORIES	2
NO. OF FAMILIES	1
DESCRIPTION OF WORK	BUILD NEW HOME. ATTACHED 3 CAR GARAGE
USE OF EXISTING BLDG.	HOME
APPLICANT (PRINT)	W. PADGETT
TEL NO.	814-9493
ADDRESS	201 N. BROMLEY-W.COV.

NEW ☑ ADD ☐ ALTER ☐ REPAIR ☐ DEMOL ☐ URM ☐

WILL THE APPLICANT OR FUTURE BUILDING OCCUPANT HANDLE A HAZARDOUS MATERIAL OR A MIXTURE CONTAINING A HAZARDOUS MATERIAL EQUAL TO OR GREATER THAN THE AMOUNTS SPECIFIED ON THE HAZARDOUS MATERIALS INFORMATION GUIDE?

YES ☐ NO ☐

WILL THE INTENDED USE OF THE BUIDLING 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 2.20 SECTIONS 2.20.100 THROUGH 2.20.140 CONCERNING HAZARDOUS MATERIALS REPORTING AND FOR OBTAINING A PERMIT FROM THE SCAQMD.

OWNER OR AGENT

P.C. FEE	1403.25	PERMIT FEE	2166.24
	406.36	ISSUANCE FEE	17.60
INVESTIGATION FEE		TOTAL FEE	2183.84

+60.

SEE REVERSE FOR EXPLANATORY LANGUAGE

Certab0cc64.10

BUILDING ADDRESS	4008 WALNUTHAVEN COVINA, CA.
LOCALITY	
NEAREST CROSS ST.	BADILLO
USE ZONE	A-1
MAP NO.	144 H 305
SPECIAL CONDITIONS	60000
WITHIN 1000 FT. OF SCHOOL?	YES / NO ✓

DISTRICT	GROUP	TYPE CONST.	FIRE ZONE	PROCESSED BY
5	R-3	V	3	

STATISTICAL CLASSIFICATION CLASS NO. 21 DWELL UNITS _____ APT _____ CONDO _____

REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP LINE	EXIST WIDTH
FRONT P L	20	0	20	54
SIDE P L			#23	

SEWER MAP BK A PG 15

VALUATION $ ~~267,000~~

$ 372,701

LDMA P/C # 1634

LDMA Perm #

FINAL DATE 5-26-95

FINAL BY

VALIDATION

02 140325 1d 16335 11-23-93 00

INSPECTOR COPY

~~12/[illegible] permit [illegible] Penalty [illegible]~~

LDMA 25.00

#6372. 5-12-94

PLANS TO APPLICANT				
To:		Returned		Approved
No.	Date	No.	Date	

Approvals	Required Yes	Required No	Date Received or Approved
Water Certificate			
Health Department			
Fire Department			
Grading			
Geological			
Pedestrian Protection (Fence) (Canopy)			
Special Inspection (Conc.) (Masonry) (Welding)			
Lot Drainage			
Parking			

Approvals	Date	Inspector's Signature
Location (Setback & Yards)		
Foundations		
Slab	8-9-94	GIRARD M.
Frame	2-22-94	
Energy Insulation		
Lath/Drywall - Interior		
Lath - Exterior		
House Number - Correct & Posted		
Final Enter on Front		
Certificate of Occupancy Issued		

INSPECTOR'S NOTES

6308A O.K. TO GROUT TOP CUPT

* NOTE
SEE ATTACHED SURVEY
FOR THE LOT CORRESPONDING
TO PROPERTY LINE SET BACK
8-24-94

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's 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 is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9) (commencing with Section 7000 of Division 3 of the Business and Professions Code) or that he 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, 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 Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his 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 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 Contractor's 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 Contractor's License Laws.*

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

Date _____ Owner _____

INSPECTOR'S NOTES

20-0019 DPW (12-91)
76A663

APPLICATION FOR ELECTRICAL PERMIT

COUNTY OF LOS ANGELES — DEPT. OF PUBLIC WORKS — BUILDING AND SAFETY DIV.

1

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800 Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the county building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

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.

X Date 5-27-94 Applicant Greg Padgett

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm 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 Number B584750 Lic. Class Gen B

Contractor W. LANE Co, Date 1-31-96

☐ I am exempt under Sec. _____

B.&P.C. for this reason _____

_____ Date: _____

Signature _____

☐ Exemption for Reg. Maint. Elect.

SINGLE FAMILY HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm 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 under penalty of purjury state that the above information is correct. I agree to comply with all County ordinances and State laws regulating Electrical wiring, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Greg Padgett 5-27-94

SIGNATURE OF PERMITTEE — DATE

FOR APPLICANT TO FILL IN

	NO.	EACH	FEE
New Residential Bldgs. & Pools			
1 & 2 -Family, Sq. Ft. _____		$	$
Multi-family Sq. Ft. _____			
Residential Swimming Pools			
Outlets: Rec. ____ Light ____ Sw. ____			
First 20			
Total No. _____ Additional			
Lighting Fixtures First 20			
Total No. _____ Additional			
RESIDENTIAL APPLIANCES NOT OVER 3 HP.			
OTHER APPLIANCES NOT OVER 3 HP.			
Power Apparatus & Large Appliances			
Size & Type HP, KW, KVA, or KVAR			
_____ Over 3 to 10 Incl.			
_____ Over 10 to 50 Incl.			
_____ Over 50 to 100 Incl.			
_____ Over 100			
Services, Swbd., MCC & Panelboards			
0 - 399 Amp. Under 600 V			
400 - 1000 Amp. Under 600 V			
Over 1000 Amp. or Over 600 V			
BRANCH CIRCUIT FEES			
15A, or 20A, 120V, Lighting or Recept.			
_____ 1 To 10 Branch Circuits			
_____ 11 To 40 Branch Circuits			
_____ 41 Or More Branch Circuits			
15A, 20A, 208V To 277V Lighting Br. Circuits			
Temp. Power Pole & Appurtenances	1		27 50
Sign with One Branch Circuit			
Additional Sign Branch Circuits			
Misc. Conduits & Conductors			
Other (See Complete Fee Schedule) _____			
PERMIT FEE (Sub-Total)			27 50
PLAN CHECKING FEE			
PERMIT ISSUING FEE			17 60
TOTAL FEE			45-10

JOB ADDRESS	4008 Walnutharen
LOCALITY	Covina
NEAREST CROSS ST.	Badillo
ASSESSOR MAP BOOK / PAGE / PARCEL	
OWNER OR FIRM NAME	Ken & Denise Wilson
MAIL ADDRESS	Same as above
CITY / Tel. No.	
PLAN CHECK APPLICANT	
ADDRESS	
CITY / Tel. No.	
PERMIT APPLICANT	Greg Padgett
ADDRESS	201 N. Bromley Ave
CITY / Tel. No.	West Covina / 818 814-9993
LICENSE OR REG. NUMBER / Class	B584750 / Gen
DISTRICT NO.	5
PROCESSED BY	
FINAL DATE	5-26-95
FINAL BY	

VALIDATION

INSPECTOR COPY

12/10/95 Expired by limitation

SEE REVERSE FOR EXPLANATORY LANGUAGE

APPROVALS	DATE	INSPECTOR'S SIGNATURE
TEMP. POWER POLE		
UNDERSLAB WORK		
ROUGH CONDUIT		
WIRING		
FIXTURES		
POWER AUTHORIZED	6-30 84	[illegible]
UTILITY CO. NOTIFIED	7-1-84	[illegible]
FINAL	*Enter on Front*	

NOTES

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason *(Section 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 is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he 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, 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 Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself 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 did not build or improve for the purpose of sale.)

I am exempt under Sec. _____

B & P.C. for this reason _____

_____

Date _____

Owner _____

County of Los Angeles
Department of Public Works
Building and Safety / Land Development

ELECTRICAL PERMIT
EL 0500 9501250019

SAN GABRIEL VALLEY # 0500
125 BALDWIN
ARCADIA CA
Phone: (818) 574-0941 Ext:

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.).

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the county building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

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.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm 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 Number 459141 Lic. Class C-10

Contractor K.G.G. Electric Date 1-25-95

☐ I am exempt under Sec. _____

B.&P.C. for this reason _____

Date _____

Signature _____

SINGLE FAMILY HOME OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5 Business and Professions Code):

☐ I, as owner of the property, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm 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 that the above information is correct. I agree to comply with all 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.

Signature of Applicant or Agent _____ Date 1-25-95

BUILDING ADDRESS:
4008 WALNUTHAVEN DR
COVI CA 91722

LOCALITY:
COVINA

NEAREST CROSS STREET:
BADILLO

ALIAS:

LEGAL ID:
TR: 17265 LT: 18

ASSR INFO NBR:
8435-029-002

OWNER: TEL. NO:
WILSON, KEN
4008
WALNUTHAVEN DR
COVINA CA 91722

CONTRACTOR: TEL. NO:
K G G ELECTRIC (805) 943-5616
P O BOX 3241 LIC. NO:
QUARTZ HILL CA 93586 459141 C10

APPLICANT: TEL. NO:
K G G ELECTRIC (805) 943-5616
P O BOX 3241
QUARTZ HILL CA 93586

DESCRIPTION OF WORK:
ELECTRICAL FOR NEW SINGLE FAMILY RESIDENCE

ISSUED ON:	PROCESSED BY:	EXPIRES ON:
01/25/95	FM	01/25/96

FINAL DATE:	FINAL BY:
5-26-95	

FEES PAID-

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
A1 PERMIT ISSUANCE FEE			17.90
B2 1 OR 2 FAMILY DWELL	1180.00	SQ FT	82.60
	TOTAL FEES		100.50

12/16/95 ~~Expired by limitation~~

APPROVALS	DATE	INSPECTOR'S SIGNATURE
TEMP. POWER POLE		
UNDERSLAB WORK		
ROUGH CONDUIT		
WIRING	2-22-95	
FIXTURES		
POWER AUTHORIZED		
UTILITY CO. NOTIFIED		
FINAL	(ENTER ON FRONT)	

NOTES-

OWNER-BUILDER DECLARATION

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I am exempt under Sec. _____,

B & P.C. for this reason _____

_____

Date _____

Owner _____

REQUEST BY: XXXXXXX
ROUTE TO: BS0500

County of Los Angeles
Department of Public Works
Building and Safety / Land Development

PLUMBING PERMIT
PL 0500 9407250002

SAN GABRIEL VALLEY # 0500
125 BALDWIN
ARCADIA CA
Phone: (818) 574-0941 Ext: #6615

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation insurance, or a certified copy thereof (Sec. 3800, Lab. C.).

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the county building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

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.

Date 7-25-94 Applicant Greg Parfett

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

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I hereby affirm 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 Number 584750 Lic. Class B

Contractor W. LANE Co. Date 7-25-94

☐ I am exempt under Sec. _____

B.&P.C. for this reason _____

_____ Date _____

Signature _____

SINGLE FAMILY
HOME OWNER-BUILDER DECLARATION

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I hereby affirm 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 that the above information is correct. I agree to comply with all 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.

Greg Parfett 7-25-94

Signature of Applicant or Agent Date

BUILDING ADDRESS:
[redacted]
COVI CA 91722

LOCALITY:
[redacted]

NEAREST CROSS STREET:
SAN BERNARDINO ROAD

ALIAS:
WILSON RES

LEGAL ID:
TR: 17265 LT: 18

ASSR INFO NBR:
8435-029-002

OWNER: TEL. NO:
WILSON, KEN
4008
WALNUTHAVEN DR
COVINA CA 91722

CONTRACTOR: TEL. NO: (818) 814-9493
W. LANE CONSTRUCTION
201 N. BROMLEY AVENUE
COVINA, CA 91790
LIC. NO: 584750 B-1

APPLICANT: TEL. NO: (818) 814-9493
W. LANE CONSTRUCTION
201 N. BROMLEY AVENUE
COVINA, CA 91790

DESCRIPTION OF WORK:
[redacted]
1 SINK IN THE LAUNDRY AREA *

ISSUED ON:	PROCESSED BY:	EXPIRES ON:
07/25/94	COZBY, LESLIE	12/10/21

FINAL DATE: 5-26-95 **FINAL BY:** [signature]

FEES PAID-

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE			17.90
07 BATHTUB(S)	3.00	TUBS	31.50
11 CLOTHESWASHER(S)	1.00	WASHERS	10.50
13 DISHWASHER(S)	1.00	DISHWSH	10.50
21 HOSE BIBB(S)	2.00	HSBIBBS	21.00
25 LAVATORY(S)	5.00	LAVATRY	52.40
31 SHOWER(S)	1.00	SHOWERS	10.50
33 SINK(S)	3.00	SINKS	31.50
45 WATER CLOSET(S)	4.00	WTCLOST	41.90
47 WATER HEATER(S)	1.00	WTHETRS	10.50
51 LOW PRS GAS SYS 5OUT	1.00	SYSTEMS	10.50
	TOTAL FEES		248.70

12/16/02 Expired by limitation [signature]

* ADDITIONAL DATA ON FILE

APPROVALS	DATE	INSPECTOR'S SIGNATURE
UNDER SLAB WORK	6-30-94	DARUS / GM
ROUGH PLUMBING	2-22-95	
GAS PIPING		
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES		
GAS TEST 2-16-95	5-1-95	
UTILITY CO. NOTIFIED		
FINAL	(ENTER ON FRONT)	
INDUSTRIAL WASTE APPROVAL		

INSPECTOR'S NOTES

INSPECTOR'S NOTES

OWNER-BUILDER DECLARATION

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I am exempt under Sec. _____,

B & P.C. for this reason _____

Date _____

Owner _____

REQUEST BY: E159497
ROUTE TO: BS0500

County of Los Angeles
Department of Public Works
Building and Safety / Land Development

HEATING - VENTILATING - AIR CONDITIONING
ME 0500 9502170004

SAN GABRIEL VALLEY # 0500
125 BALDWIN
ARCADIA CA
Phone: (818) 574-0941 Ext:

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation insurance, or a certified copy thereof (Sec. 3800, Lab. C.).

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the county building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars ($100) or less.)

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.

Date _____ Applicant Robert D. Olson

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm 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 Number 448602 Lic. Class C-20

Contractor Bob Olson HVAC Date 2-17-95

☐ I am exempt under Sec. _____

B.&P.C. for this reason _____

_____ Date _____

Signature Robert D. Olson

☐ 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 (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm 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 that the above information is correct. I agree to comply with all 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.

Robert D. Olson 2-17-95
Signature of Applicant or Agent Date

BUILDING ADDRESS:
[redacted]

NEAREST CROSS STREET:
BADILLO

ALIAS:

LEGAL ID:
TR: 17265 LT: 18

ASSR INFO NBR:
8435-029-002

OWNER: TEL. NO:
WILSON, KEN
4008
WALNUTHAVEN DR
COVINA CA 91722

CONTRACTOR: TEL. NO:
BOB OLSON HEATING AND AIR CONDITION (818) 331-7645
16664 KINGSIDE DR LIC. NO:
COVINA CA 91722 448602 C20

APPLICANT: TEL. NO:
BOB OLSON HEATING AND AIR CONDITION (818) 331-7645
16664 KINGSIDE DR
COVINA CA 91722

DESCRIPTION OF WORK:
[redacted] SINGLE FAMILY RESIDENCE W/INLET & OUTL

ISSUED ON:	PROCESSED BY:	EXPIRES ON:
02/17/95	FM	02/17/96

FINAL DATE:	FINAL BY:
5-26-95	

FEES PAID-

FEE DESCRIPTION:	QUANTITY:	UOM:	AMOUNT:
01 PERMIT ISSUANCE FEE			17.90
02 COMPRSR LE 100 KBTU	2.00	COMPRSR	34.80
08 FURNACE LE 100 KBTU	2.00	FURNACE	34.80
30 AIR INLETS,OUTLETS	17.00	IN/OUTS	45.90
	TOTAL FEES		133.40

12/16/02 Expired by limitation
Ronald G. Rosales

INSPECTOR'S NOTES

Ducts & location
3-8-95

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 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 is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he 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, 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 Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself 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 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 Contractor's 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 Contractor's License Law).

I am exempt under Sec. _____

B & P.C. for this reason _____

Date _____

Owner _____

REQUEST BY: XXXXXXX
ROUTE TO: BS0500

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.

☐ Certified copy is filed with the county building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by the permit is for one hundred dollars ($100) or less.)

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.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm 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 Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt under Sec. _____ of the L.A. Co. Plumbing Code and/or Sec. _____ of the B. & P. Code for the following reason _____

_____ Date _____

Signature _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Secton 7031.5, Buisness and Professions Code):

☐ 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 (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

CONSTRUCTION LENDING AGENCY

I hereby affirm 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 that the above information is correct. I agree to comply with all County ordinances and State laws regulating Plumbing and Sewers, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

_____

Signature of Permittee Date

20-0051 DPW 6/89
76A642D

1

APPLICATION FOR PERMIT
SEWER - SEWAGE DISPOSAL
COUNTY OF LOS ANGELES BUILDING AND SAFETY

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: 4008 Walnut haven
LOCALITY: Covina
NEAREST CROSS ST.: Badillo / Vincent
LEGAL DESCRIPTION: LOT NO. 18
BLOCK: TRACT 17265
ASSESSOR MAP BOOK: 476 PAGE 1 & 2 PARCEL 18
SIZE OF LOT: 59 X 120 NO. OF BLDGS. NOW ON LOT: 1
USE OF BUILDINGS: Single Family dwelling
OWNER: Ken & Denise Wilson
MAIL ADDRESS: 4008 Walnut haven
CITY: Covina TEL. NO. 856-0837
CONTRACTOR: W. Lane Co.
ADDRESS: 201 N. Bromley Ave
CITY: West Covina TEL. NO. 814-9493
STATE LICENSE NO.: B584750 LIC. CLASS: B

NO.	DESCRIPTION OF WORK	FEE	
	HOUSE SEWER CONNECTING TO PUBLIC SEWER		
	SEPTIC TANK SEEPAGE PIT OR PITS AND OR DRAINFIELD		
	HOUSE SEWER CONNECTING TO PRIVATE DISPOSAL SYSTEM		
	CONNECT ADDITIONAL BLDG OR WORK TO HOUSE SEWER		
	OVERFLOW SEEPAGE PIT DRAINFIELD EXTN. CESSPOOL DRYWELL MANHOLE		
	ALTER REPAIR OR ABANDON HOUSE SEWER OR DISPOSAL SYSTEM	19.	30

OWNER'S AUTHORIZATION

Permit	$ 17.	60
TOTAL FEE	39.	90

I HAVE AT THIS DATE A CONTRACT WITH THE HEREIN NAMED CONTRACTOR TO CONNECT THE ABOVE DESCRIBED EXISTING DWELLING TO THE PUBLIC SEWER

SIGNED THIS 12th DAY OF May 1994

OWNER OR OWNERS AGENT: Greg Parlett

ADDRESS: 201 Bromley Ave. West Covina CA

CONNECTION DATA

STATION DEPTH

MANHOLE REFERENCE UPPER / LOWER

TYPE OF CONNECTION Y CURB P L LENGTH FROM M L TO P L

CO IMP NO P C NO JOB NO

TRUNK PERMIT NO ROAD PERMIT NO

AFFIDAVIT	WAIVER	EASEMENT	RECORD INSTR NO	DATE

HWY OR ST WIDENING

STATE ENCROACHMENT PERMIT NO

CHARGES

CONNECTION CHARGE FEE

REIMBURSEMENT FEE

DISTRICT NO	GROUP	MAP BK	MAP PG	PROCESSED BY
5				[signature]

FINAL DATE: 5-16-95

FINAL BY: [signature]

VALIDATION

02* *39.90
*39.90
1.8 1 ***
6376
05-12-94
0

12/16/02 Expired by limitation
Donald B. Rhoads

INSPECTION COPY

SEE REVERSE FOR EXPLANATORY LANGUAGE

APPROVALS	DATE	INSPECTOR'S SIGNATURE
NEW HOUSE SEWER	2-22-[illegible]	[illegible]
CONNECT ADDITIONAL BUILDING OR WORK		
SEPTIC TANK, SEEP, PIT(S) AND/OR DRAINFIELD		
CESSPOOL ☐ DRYWELL ☐		
ALTER, REPAIR, SEWER OR SEWAGE DISPOSAL SYSTEM		
DISCONNECT PLUG AND ABANDON HOUSE SEWER		
BACKFILL SEPTIC TANKS ☐ SEEP, PIT(S) ☐ CESSPOOLS ☐		

INSPECTOR'S NOTES

INSPECTOR'S NOTES

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason *(Section 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 is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he 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, as the 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 Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself 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 did not build or improve for the purpose of sale.)

I am exempt under Sec. _____,

B & P.C. for this reason _____

_____

Date _____

Owner _____

FORM 195
12/90

INFORMATION ON FIRE FLOW AVAILABILITY
FOR BUILDING PERMIT

SINGLE AND TWO FAMILY DWELLINGS (R-3)
AND BUSINESS OCCUPANCIES UNDER 2500 SQUARE FEET

PROJECT INFORMATION
(To be Completed by Applicant)

BUILDING ADDRESS 4008 N. WALNUTHAVEN DR.

CITY OR AREA COVINA, CA 91722

NEAREST CROSS STREET BADILLO DISTANCE TO NEAREST CROSS STREET 300'

PROPERTY OWNER M/M KEN WILSON

ADDRESS 4008 N. WALNUTHAVEN DR. TELEPHONE (818) 966-3175

OCCUPANCY (USE OF BUILDING) SINGLE FAMILY DWELLING

TYPE OF CONSTRUCTION FRAME/STUCCO

SQUARE FOOTAGE 2910 # NUMBER OF STORIES 2

PRESENT ZONING RESIDENTIAL

4-8-94
DATE

SIGNATURE OF APPLICANT

SINGLE FAMILY DWELLINGS: See Reverse Side

BUSINESS OCCUPANCIES UNDER 2500 SQUARE FEET:
Regardless of Fire Flow, B-2 Occupancies (Small Business) under 2500 Square Feet require Fire Department approval. Plans to be submitted to the Area Detail for Plan Check approval. Contact (213) 720-5141

INFORMATION ON FIRE FLOW AVAILABILITY
(To be Completed by Water Purveyor)

THE FIRE HYDRANT NEAREST THE PROPOSED STRUCTURE IS WITHIN 50 FEET VIA VEHICULAR ACCESS. THE FIRE FLOW SERVICES WILL BE RENDERED FROM A _____ INCH DIAMETER WATER MAIN.

MAIN LOCATED ON 4008 Walnut Haven
(Street)

_____ (Feet) _____ (Direction) OF _____ (Nearest Cross-Street)

UNDER NORMAL OPERATING CONDITIONS THE FIRE FLOW AVAILABLE FROM THIS 4"x2.5" (Size)

HYDRANT IS 2636 GPM AT 20 PSI RESIDUAL FOR 2 HOURS AT 70 PSI STATIC

City of Azusa
WATER PURVEYOR

SIGNATURE

28 April 94
DATE

Superintendent
TITLE

CONDITIONS FOR APPROVAL BY BUILDING AND SAFETY DIVISION
(To be Completed by Building Department)

THE FIRE FLOW MAY BE APPROVED FOR SINGLE AND TWO FAMILY DWELLINGS WHEN THE ABOVE INFORMATION IS COMPLETE AND SHOWS THAT THE FOLLOWING MINIMUM REQUIREMENTS ARE MET AND THE PROPERTY IS NOT IN FIRE ZONE 4.

THE WATER SYSTEM IS CAPABLE OF DELIVERING AT LEAST 750 GPM AT 20 PSI FO TWO HOURS.

THE DISTANCE FROM THE STRUCTURE TO THE FIRE HYDRANT DOES NOT EXCEED 45(FEET VIA VEHICULAR ACCESS.

APPROVED BY _____ DATE _____

OFFICE _____

THIS APPROVAL VALID FOR SIX MONTHS

Where the Water Service does not meet the requirements of the Building and Safety Division, Fire Department approval of plot plan will be required before a Building Permit can be issued by the Building Department. Any and all approvals by the Fire Department will be issued by the Fire Prevention Division only.

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS

DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

No. 553745

PERMIT

Permit Issued To
(Insert Employer's Name, Address and Telephone No.)

W. LANE CO.
201 N Bromley Avenue
West Covina CA 91790
(818) 814-9493

No.

Date April 19, 1994

Region 4

District 4

Tel: 818-966-1166

FAX: 818-966-7041

Type of Permit SINGLE ACTIVITY TRENCH AND/OR EXCAVATION

Pursuant to Labor Code Sections 6500 and 6502, this Permit is issued to the above-named employer for the projects described below.

State Contractor's License Number		Permit Valid Through		
B584750		07/30/94		
Description of Project	Location Address	City and County	Anticipated Dates	
			Starting	Completion
Construction of basement storage	4008 Walnuthaven	Covina Los Angeles	04/19/94	07/30/94

WARNING

THE INJURY AND ILLNESS PREVENTION PROGRAM SUBMITTED FOR THIS PERMIT IS ACCEPTED BY DOSH FOR PERMIT PURPOSES ONLY. ALTHOUGH IT ADDRESSES THE PRIMARY POINTS REQUIRED, FAILURE TO IMPLEMENT IT OR ASSURE ITS EFFECTIVENESS MAY RESULT IN CITATIONS. THE APPROPRIATE SUBCONTRACTOR SHALL BE NOTIFIED AND REQUIRED TO HAVE A SEPARATE CAL/OSHA PERMIT PRIOR TO EXCAVATION AND TRENCH WORK ON THIS JOBSITE.

This Permit is issued upon the following conditions:

1. That the work is performed by the same employer. If this is an annual permit the appropriate District Office shall be notified, in writing, of dates and location of job site prior to commencement.
2. The employer will comply with all occupational safety and health standards or orders applicable to the above projects, and any other lawful orders of the Division.
3. That if any unforeseen condition causes deviation from the plans or statements contained in the Permit Application Form the employer will notify the Division immediately.
4. Any variation from the specification and assertions of the Permit Application Form or violation of safety orders may be cause to revoke the permit.
5. This permit shall be posted at or near each place of employment as provided in 8 CCR 341.4

Received From	Received By	
G. PADGETT	MYLEEN	
☐ Cash ☒ Check	Amount $50.00	Date 04/19/94

Investigated by Joan Lee, ASE — JOAN LEE, ASE, Safety Engr. — 04/19/94 Date

Approved by ISAAC CHAE & ISAAC CHAE — Dist Manager — 04/19/94 Date

EMPLOYER ORIGINAL-GREEN DISTRICT COPY-PINK
ACCOUNTING COPY-CANARY REGION COPY-WHITE

COUNTY SANITATION DISTRICTS
OF LOS ANGELES COUNTY

1955 Workman Mill Road / Room 207 / Whittier, California
Mailing Address: P.O. Box 4998, Whittier, California 90607
Telephone: (310) 699-7411 / From Los Angeles (213) 685-5217
Hours: 7:00 a.m. - 4:30 p.m. Mon. - Thurs.
7:00 a.m. - 3:30 p.m. Fri.

CHARLES W. CARRY
Chief Engineer and General Manager

Account No.: 389890
District No.: 22

SEWERAGE SYSTEM CONNECTION FEE

Complete Items 1 through 10 — PLEASE TYPE OR PRINT

Date: 5 (MONTH), 12 (DAY), 94 (YEAR)

1. Property Owner: KEN WILSON
2. Facility Name: _____
3. Address of Property: 4008 Walnut haven (STREET) COVINA (CITY) CA (STATE) 91722 (ZIP)
   Major Cross Streets: BADILLO / VINCENT (STREET) Thomas Guide Page: _____
4. Contact: GREG PADGETT Phone Number: (818) 814-9493
5. Mailing Address (IF DIFFERENT FROM ABOVE): 201 N. BROMLEY AVE (STREET) WEST COVINA (CITY) CA (STATE) 91790 (ZIP)
6. County Assessor Map Book, Page, and Parcel Number: 476 - 12 - #18 8435-039-006
7. Structure is: ☒ Proposed ☐ Existing, Date of Construction _____
8. User Category and Units of Usage: *(Check the appropriate box and provide the applicable information)*

a. Residential:	☒ Single Family Home(s) Tract # 17265 Lots 18	► Number of Units: 1
	☐ Duplex ☐ Triplex ☐ Fourplex	► Number:
	☐ Five Units or More	► Number of Units:
	☐ Mobile Home Park	► Number of Spaces:
	☐ Condominium	► Number of Units:
b. Commercial:	☐ Hotel/Motel	► Number of Rooms:
	☐ Convalescent Hospital/Home for the Aged	► Number of Beds:
	☐ Other (Specify):	► Improvement Square Footage:
c. Institutional:	☐ College/University	► Number of Students:
	☐ Private School	► Improvement Square Footage:
	☐ Church	► Improvement Square Footage:
d. Industrial:	☐ All Categories	► All industrial dischargers must obtain a permit for industrial wastewater discharge.

9. **In order to process this application a complete set of architectural blue prints must be submitted. This is not required for conversion from septic tank to sewer connection.**
10. **I certify that the information provided in this application is true and correct to the best of my knowledge.**

Greg Padgett (SIGNATURE) 5-12-94 (DATE) ☐ **OWNER** ☒ **AGENT FOR OWNER**

Please pay by check or money order only. **(Cash will not be accepted.)**
Make checks payable to: COUNTY SANITATION DISTRICTS OF LOS ANGELES COUNTY.
Returned checks will be subject to a penalty.

FEE CALCULATION FOR RESIDENTIAL, COMMERCIAL, AND INSTITUTIONAL CATEGORIES

Number of Units of Usage	×	Connection Fee Per Unit of Usage	=	Connection Fee
1	×	$ 1320.00	=	$ 1320.00

SPECIAL CREDITS (Only If Applicable)
☒ DEMOLITION CREDIT* SFR
☐ CHANGE IN USE CREDIT*
☐ AD VALOREM TAX CREDIT
Annexation Date _____

*In order to receive credit, proof of demolition or former use must be submitted with your application (e.g. Demolition Permits, original plans).

- $ 1320.00

(If Less Than Zero, Enter Zero) $ 0
Connection Fee Due

(For Districts' Use Only)

FEE PAYMENT RECEIVED:
From: _____ D.C. ☐ Yes ☒ No
Amount: $ 0 Ck. No. _____ Permit No.: _____ Date: _____

Processed by: _____
Approved by: _____
SANITATION DISTRICTS OF LOS ANGELES COUNTY
APPROVED
5/12/94
CHARLES W. CARRY
CHIEF ENGINEER & GEN. MGR.

WHITE COPY — COUNTY SANITATION DISTRICTS OF LOS ANGELES COUNTY
YELLOW COPY — BUILDING DEPARTMENT
PINK COPY — APPLICANT
DO NOT SEPARATE

FN 789

COVINA-VALLEY
UNIFIED SCHOOL DISTRICT

2469

CERTIFICATION OF COMPLIANCE
WITH THE FEE PROVISIONS OF
GOVERNMENT CODE SECTIONS 65995 AND 53080

DEVELOPER/OWNER Ken Wilson
ADDRESS 4008 Walnut Haven
Covina 91722
TELEPHONE 856-0837

DATE 4/20/94

FEE SCHEDULE: The Developer Fees levied by the Covina-Valley Unified School District under provision of Sections 65995 and 53080 of the Government Code are:

Residential Development	$1.65	~~$2.65~~/sq. ft.
Commercial/Industrial Development		0.27/sq. ft.

ADDRESS OR TRACT/PROJECT NUMBER

NUMBER OF BUILDING(S) IN PROJECT

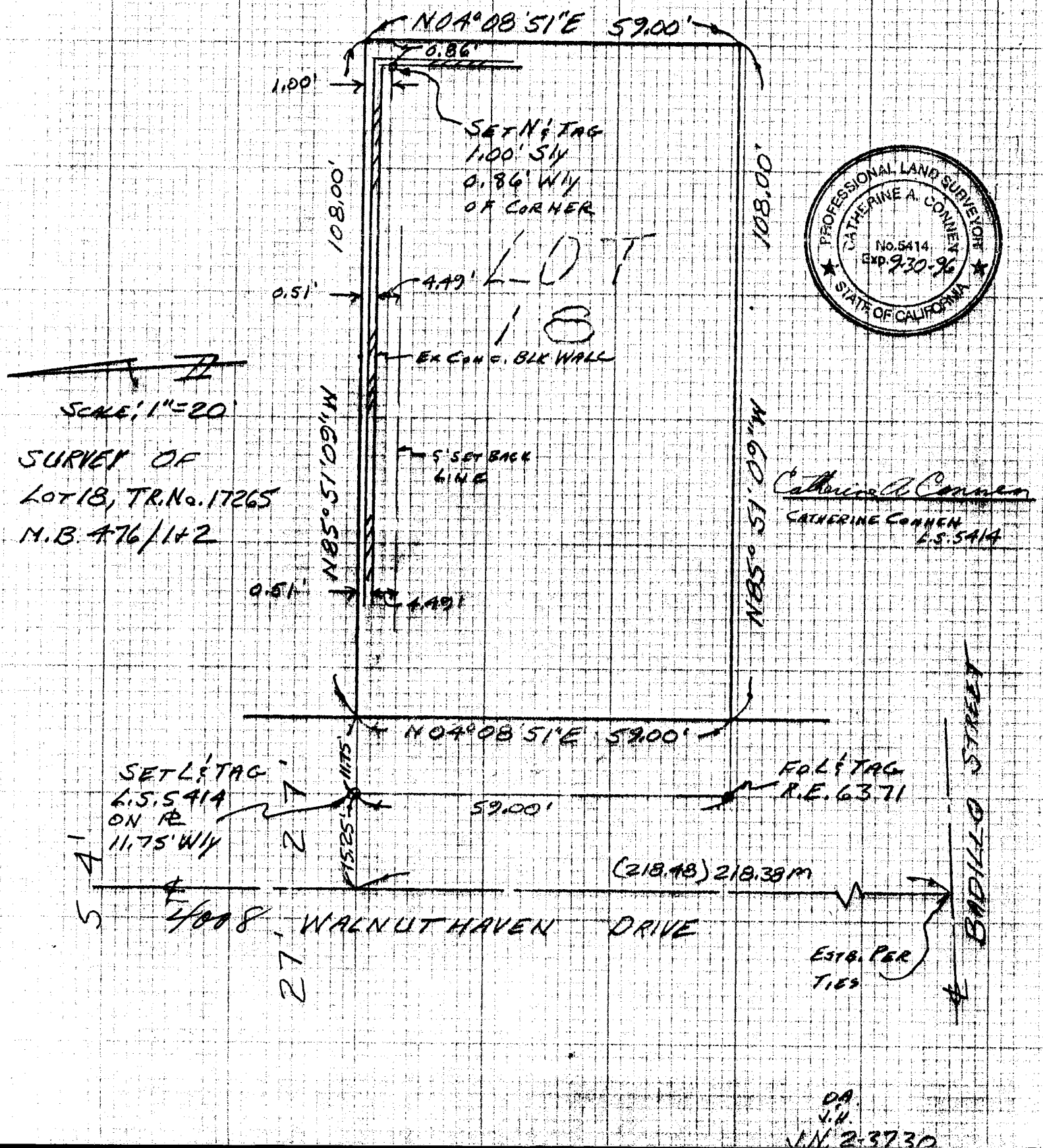
	Lot/Bldg. No.	Use of Building	Area (sq. ft.)	Fee
1.		New Home	2910	$4,801.50
2.				
3.				
4.				
5.				

TOTAL FEES DUE $4,801.50

This is to certify that fees due to the Covina-Valley Unified School District under provision of Government Codes 53080 and 65995 as a prerequisite to the issuance of a Building Permit have been received. Based on the above data presented, this Certification of Completion is hereby executed.

Carrie L Sernicky
Covina-Valley Unified School District

COVINA-VALLEY
UNIFIED SCHOOL DISTRICT
PAID
Business Office
By B. Schrock

	Copies
Developer/Owner	- white
City/County Planning Dept.	- yellow
School District	- pink

John B. Abell, Inc. Civil Engineer - Surveyor
140 W. Orange St. • Covina, CA 91723 • (818) 915-7671