BUILDING PERMIT

Permit #: BLD20-01201 Issued Date 05/05/2021 Issued By: DJO Expire Date: 11/1/2021 Inspector: JCP Zone: R1 Group: R-3

Type of Const: VB Valuation: \$100000.00 Fees Paid: \$7230.52

2

В

6

G

R

ADDRESS: 2614 GRAND SUMMIT RD

APN: 7536-014-007

LOT:

BLOCK:

CITY OF TORRANCE

COMMUNITY DEVELOPMENT DEPARTMENT 3031 Torrance Blvd.Torrance, CA90503 (310) 618-5910 For inspections call (310) 618-5901 Inspectors Office Phone: (310) 618-5951 M-Th 7:00-8:00am; 4:00-5:00 pm Alternating Fridays 7:00-8:00am: 3:30 -4:00 pm

TRACT:

Owner:

2614 GRAND SUMMIT ROAD TORRANCE, CA 90505

		BUILDING INFORMATION				
TYPE OF WORK:	Addition	ROOF COVER:		PLANS:		
TYPE OF USE:	Single Family Residential			UNDERGND UTL F	UNDERGND UTL REQ?:	
OCC LOAD:		# OF SQUARES:		HILLSIDE?:	HILLSIDE?:	
ATTACHED/DETACH	IED UNIT:	COOL ROOF REQ:		YR BLT (demo):	YR BLT (demo):	
SETBACKS		BLDG AREA:	729	SCHOO	SCHOOL FEE AREAS	
Front YRD Ft:	Side YRD Ft:	HTD/COOL:	729	RES:	729	
Front R/W Ft:	Side R/W Ft:	BUILDINGS:		COM:		
Front C/L Ft:	Side C/L Ft:	STORIES:				
Interior YRD Ft:		DWELL UNITS:				

Professions Code, and my license is in full force and effect.

ESFAHANI CONSTRUCTION COMPANY 314 TEJON PLACE PALOS VERDES, CA 90274 310-791-6600 LIC#: 985813 EXP: **CLASSIFICATION CODES:...**

- () I have and will maintain workers' comp. ins., or a certificate of consent to self insure for workers' comp. for the performance of the work for which the permit is issued. WC#: EXP: 1/1/0001
- () I certify that in the performance of work for which the permit is issued, I shall not employ any person in any manner so as to become subject to the workers' comp laws of CA, and agree that if I should become subject to the workers' comp provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions

Signature	Date:	Signature:	Date:
CONSTRUCTION I ENDING AG	ENCV		

I hereby affirm that there IS a construction lending agency for the performance of this work for which this permit is issued (Section 3097 California Civil code). Address:

RIGHT OF ENTRY: I certify that I have read this application and state that the above information is correct. I agree to comply with all City and applicable County ordinances, and State laws relating to building construction and hereby authorize representatives of the City to enter upon the above mentioned property for the purposes of inspections.

ANY PERMIT ISSUED AS A RESULT OF THIS APPLICATION BECOMES NULL AND VOID IF WORK IS NOT COMMENCED WITHIN 180 DAYS FROM DATE OF ISSUANCE OF SUCH PERMIT OR FROM THE DATE WORK IS SUSPENDED OR ABANDONED. CLAIMS FOR REFUNDS OF ANY FEES MUST BE FILED WITHIN 100 CALENDAR DAYS FROM THE DATE COLLECTED BY THE CITY.

Signature:Date:				
DATE	SIGNATURE	INSPECTIONS	DATE	SIGNATURE
		FRAMING (150)		
		READY TO WRAP EXT. (160)		
		INSULATION (170)		
		T-BAR CEILING (175)		
		INTERIOR LATH/GYP (180)		
		EXTERIOR LATH/SIDING (185)		
	•	HANDICAP ACCESS/PARKING (195)		
		FINAL (190)		
			DATE SIGNATURE INSPECTIONS FRAMING (150) READY TO WRAP EXT. (160) INSULATION (170) T-BAR CEILING (175) INTERIOR LATH/GYP (180) EXTERIOR LATH/SIDING (185) HANDICAP ACCESS/PARKING (195)	DATE SIGNATURE INSPECTIONS DATE FRAMING (150) READY TO WRAP EXT. (160) INSULATION (170) T-BAR CEILING (175) INTERIOR LATH/GYP (180) EXTERIOR LATH/SIDING (185) HANDICAP ACCESS/PARKING (195)

Building Permit

1) Inspector

2) File

3) Applicant