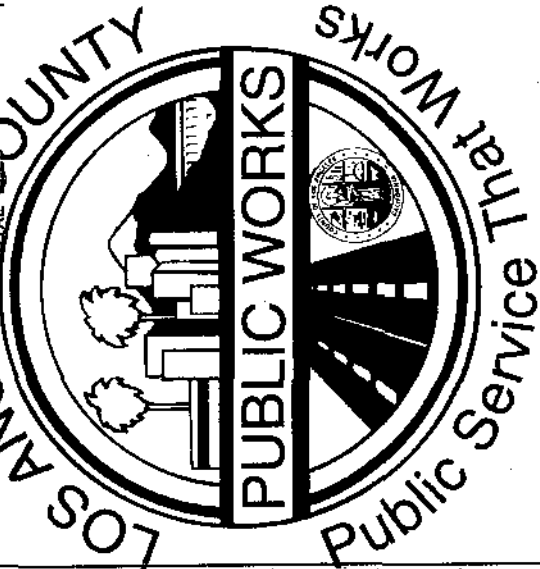


COUNTY OF LOS ANGELES
DEPARTMENT OF PUBLIC WORKS
BUILDING AND SAFETY / LAND DEVELOPMENT

LA PUENTE
16005 CENTRAL AVENUE
LA PUENTE CA
PHONE: (818) 961-9611 EXT:

0200

BUILDING PERMIT
RESIDENTIAL ADD
BL 0200 9608290037

LEGAL ID: ON FILE	NO. OF STORIES 1	CONST TYPE VN	NEW OCCUP GROUP R3																																				
ASSESSOR INFORMATION NUMBER: 8218-015-026	SQ. FT STRUCTURE: 351	USE ZONE: R-1																																					
TENANT:	EXIST BLDG USE: EXIST OCC GRP:	VALUATION: 5,000																																					
OWNER: ZHOU PING P 15475 ROCHLEN ST HACH 917452120	BLDGS. NOW ON LOT:	FEE DESCRIPTION:	AMOUNT:																																				
APPLICANT: AIRFLO INDUSTRIES INC (800) 359-6374-	TEL. NO.:	AA BLDG PERMIT ISSUANCE	18.50																																				
CONTRACTOR: AIRFLO INDUSTRIES 130 W VICTORIA STREET GARDENA CA 90248	TEL. NO.:	AC STRONG MOTION RESID	0.50																																				
ARCHITECT OR ENGINEER:	TEL. NO.:	D1 PLANCHER WORK PERMIT	75.39																																				
		D2 PERMIT WORK PERMIT	88.70																																				
		TOTAL FEES	183.09																																				
MAP NO: SEWER MAP BOOK: PAGE: FIRE ZONE: CWP: 01 1142973293 3	NO. OF FAMILIES: DWELLING UNITS: APT/COND: STAT CLASS: 21																																						
AIR QUALITY: NO	SCHOOL WITHIN 1000 FEET: NO																																						
REQUIRED SET BACK: FRONT PL- 35, SIDE PL- 10	HAZARDOUS MATERIALS: NO	<table border="1"> <tr><td>LOCATION AND SETBACKS</td><td></td></tr> <tr><td>SOILS ENGINEER APPROVAL</td><td></td></tr> <tr><td>FOUNDATION/TRENCH FORMS</td><td></td></tr> <tr><td>SLAB/UNDER FLOOR</td><td></td></tr> <tr><td>RAISED FLOOR FRAMING</td><td></td></tr> <tr><td>UNDERFLOOR INSULATION</td><td></td></tr> <tr><td>1ST LEVEL FLOOR SHEATH</td><td></td></tr> <tr><td>2ND LEVEL FLOOR SHEATH</td><td></td></tr> <tr><td>ROOF SHEATHING</td><td></td></tr> <tr><td>FIRE DEPT. FRAME INSPECT</td><td>9 26 96 MAA</td></tr> <tr><td>BLDG DEPT. FRAME INSPECT</td><td></td></tr> <tr><td>SHEAR PANELS</td><td></td></tr> <tr><td>INSULATION/WEATHER STRIP</td><td></td></tr> <tr><td>INTERIOR LATH/DRYWALL</td><td></td></tr> <tr><td>EXTERIOR LATH</td><td></td></tr> <tr><td>LOT DRAINAGE</td><td></td></tr> <tr><td>SNOKE DETECTION DEVICES</td><td></td></tr> <tr><td>FIRE DEPARTMENT APPROVAL</td><td></td></tr> </table>		LOCATION AND SETBACKS		SOILS ENGINEER APPROVAL		FOUNDATION/TRENCH FORMS		SLAB/UNDER FLOOR		RAISED FLOOR FRAMING		UNDERFLOOR INSULATION		1ST LEVEL FLOOR SHEATH		2ND LEVEL FLOOR SHEATH		ROOF SHEATHING		FIRE DEPT. FRAME INSPECT	9 26 96 MAA	BLDG DEPT. FRAME INSPECT		SHEAR PANELS		INSULATION/WEATHER STRIP		INTERIOR LATH/DRYWALL		EXTERIOR LATH		LOT DRAINAGE		SNOKE DETECTION DEVICES		FIRE DEPARTMENT APPROVAL	
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FIRE DEPARTMENT APPROVAL																																							
APPROVALS	DATE	INSPECTOR SIGNATURE																																					
ISSUED ON: 08/29/96	PROCESSED BY: FM	EXPIRES ON: 08/29/97																																					
FINAL DATE: 9 26 96	FINAL BY: MAA	CODE:																																					
DESCRIPTION OF WORK: ENCLOSED ALUM PATIO COVER 351 SF																																							
SPECIAL CONDITIONS:																																							

* ADDITIONAL DATA ON FILE

REPORT ID: DPR261

ROUTE TO: BS0200

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 P Lic. No. 23211
E. Winton Signature 8/29/96 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.).

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (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 contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law.).

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 Reliance
Policy Number QW 031624

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.

E. Winton Applicant Signature 8-29-96 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 3708 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 compiled and will continue to comply therewith through the application process.

E. Winton Applicant Signature 8/29/96 Date

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

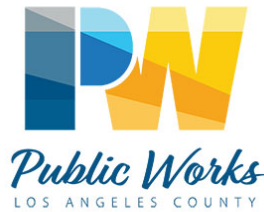
I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, C.V.C.).

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.

E. Winton Applicant or Agent Signature 8-29-96 Date



Los Angeles County
Public Works
Building and Safety Division

16005 EAST CENTRAL AVENUE
LA PUENTE, CA 91744
Telephone: (626) 961-9611
Fax: (626) 961-8166
http://dpw.lacounty.gov
(M-F 8-4:30)

BUILDING PERMIT
Number: UNC-BLDR171213000363
Issue Date: 12/13/2017
Final Date: 12/21/2017

Permit#: UNC-BLDR171213000363

Address: 15475 ROCHLEN STREET HACIENDA HEIGHTS, CA 91745

Permit Type: UNINCORPORATED BUILDING RESIDENTIAL
Work Class: REPAIR/REPLACEMENT
Address: 15475 ROCHLEN STREET HACIENDA HEIGHTS, CA 91745

A.P.N. #: 8218-015-026 **Valuation:** \$9,000.00

Owner: PING ZHEN
Address: 15475 ROCHLEN STREET HACIENDA HEIGHTS, CA 91745 **Ph:** 626-494-3686
Applicant: JOHNNY CRUZ
Address: 1602 LOCKNESS PLACE TORRANCE, CA 90501 **Ph:** 310-534-1033
Contractor: PACIFIC HOMEWORKS
Address: 1602 LOCKNESS PLACE TORRANCE, CA 90501 **Ph:** 310-534-1033
License Number: 784477 **Exp. Date:** 09/30/2020

Description of Work: REROOF SFR WITH ATTACHED GARAGE. TEAROFF (E) ROOF AND INSTALL SHIPLAP AS NEEDED. INSTALL NEW OWNES CORNING SHINGLES 30 YEARS 25 SC

Fire Zone: Coastal Commision Zone: No County Flood Zone: Landfill/Methane Zone: FEMA
Flood Zone: X **New Units:**

Special Conditions:

Note: Permits expire 1 year after issuance or 180 days from the date of the last inspection.

For inspection requests please visit <https://epicla.lacounty.gov/>

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 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. _____ Date _____
 B. & P.C. for this reason _____ Date _____

Signature _____
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, 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.

Signature of Applicant or Agent _____ Date 1-8-87

APPLICATION FOR BUILDING PERMIT
 COUNTY OF LOS ANGELES BUILDING AND SAFETY

Hacienda / La Puente USD.

FOR APPLICANT TO FILL IN		BUILDING ADDRESS <u>15475 ROCHLEN ST</u>		BUILDING ADDRESS <u>15475 Rochlen</u>	
CITY <u>HACIENDA, CA</u> ZIP <u>91745</u>		LOCALITY <u>Hacienda Heights</u>		NEAREST CROSS ST. <u>HWY</u>	
SIZE OF LOT <u>90x89</u>		NO. OF BLDGS. NOW ON LOT <u>0</u>		ASSESSOR MAP BOOK _____	
TRACT _____		BLOCK _____		PAGE _____	
OWNER <u>BENNY TRAGUCHI</u> TEL. NO. <u>9688839</u>		MAP NO. <u>114</u>		SPECIAL CONDITIONS <u>PP 35141</u>	
ADDRESS <u>15360 S HUFFORD ST</u>		CITY <u>HACIENDA, CA</u> ZIP <u>91745</u>		USE ZONE _____	
ARCHITECT OR ENGINEER <u>BOB FUJIMOTO</u> TEL. NO. <u>9619359</u>		FIRE ZONE <u>3</u>		PROCESSED BY <u>Carne</u>	
ADDRESS <u>15375 S 9TH HACIENDA</u>		DISTRICT <u>2</u>		GROUP <u>R3</u>	
CONTRACTOR <u>OWNED</u>		STATISTICAL CLASSIFICATION _____		APPT. _____	
ADDRESS _____		LIC. NO. _____		CLASS NO. _____	
CITY <u>HACIENDA</u>		NO. OF STORIES <u>1</u>		DWELL. UNITS _____	
SQ. FT. SIZE <u>1330</u>		NO. OF FAMILIES <u>1</u>		SEWER MAP BK. _____	
DESCRIPTION OF WORK <u>SINGLE FAM. RES. ADJ. GARAGE (940#)</u>		CHECK ONE <input checked="" type="checkbox"/> NEW <input type="checkbox"/> ADD <input type="checkbox"/> ALTER <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOL.		VALUATION \$ <u>50,000</u>	
USE OF EXISTING BLDG. <u>0</u>		APPLICANT (PRINT) <u>B. TRAGUCHI</u> TEL. NO. <u>9688839</u>		VALUATION \$ <u>85,000</u>	
ADDRESS <u>15360 S HUFFORD ST</u>		PRESENT BUILDING ADDRESS _____		FINAL DATE <u>7/30/87</u>	
LOCALITY _____		LOCALITY _____		FINAL BY <u>Officer</u>	
MOVING CONTRACTOR ADDRESS _____		TOTAL SETBACK FROM EXIST. PROP. LINE _____		LDMA Ref. # _____	
YARD _____		FRONT P.L. _____		LDMA P/C # <u>5156</u>	
SIDE P.L. _____		TOTAL SETBACK FROM EXIST. PROP. LINE <u>20</u>		LDMA Perm. # <u>5157</u>	
P.C. Fee \$ <u>261.38</u>		Permit Fee <u>465.00</u>		INSURANCE Fee <u>10.50</u>	
Investigation Fee _____		Total Fee <u>475.50</u>		VALIDATION # <u>1763A</u>	

SEE REVERSE FOR EXPLANATORY LANGUAGE

APPLICATION FOR ELECTRICAL PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

INSPECTOR COPY

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. _____
 B.&P.C. for this reason: _____
 Signature _____ Date: _____
 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 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.

Signature of Permittee _____ Date _____
 Signature of Committee _____

SEE REVERSE FOR EXPLANATORY LANGUAGE

FOR APPLICANT TO FILL IN		EACH	NO.	FEE
		\$	—	\$
New Residential Bldgs. & Pools				
1 & 2-Family, Sq. Ft. _____				
Multi-family Sq. Ft. _____				
Residential Swimming Pools				
Outlets: Rec _____ Light _____ Sw. _____				
Total No. _____ First 20 _____ Additional _____				
Lighting Fixtures _____ First 20 _____ Additional _____				
Total No. _____				
Fixed Appliances Not Over 1 HP				
Range _____ Heater _____ D.W. _____				
Oven _____ Dryer _____ W.M. _____				
Top _____ FAU _____ W.H. _____				
Hood _____ Fan _____ Other _____				
Disp. _____ Room Air Cond. _____				
Power Apparatus & Large Appliances				
Size & Type HP, KW, KVA, or KVAR				
_____ Up to 1 Incl.				
_____ Over 1 to 10 Incl.				
_____ Over 10 to 50 Incl.				
_____ Over 50 to 100 Inc.				
_____ Over 100				
Services, Swbd., MCC & Panelboards				
0 - 200 Amp. Under 600 V				
201 - 1000 Amp. Under 600 V				
Over 1000 Amp. or Over 600 V				
Temp. Power Pole & Appurtenances				
Sign with One Branch Circuit				
Additional Sign Branch Circuits				
Misc. Conduits & Conductors				
Other (See Complete Fee Schedule) _____				
				(Sub-Total)
PERMIT FEE				15
PLAN CHECKING FEE				10.50
PERMIT ISSUING FEE				25.50
TOTAL FEE				51.00

JOB ADDRESS 15475 Rafter
 LOCALITY H.A.
 NEAREST CROSS ST. Kwis
 OWNER OR FIRM NAME BEN TAGALAN
 MAIL ADDRESS 1139 TUENBULL
 CITY HAC. HES Tel. No. 968-8839
 PLAN CHECK APPLICANT _____
 ADDRESS _____
 CITY _____ Tel. No. _____
 PERMIT APPLICANT ADDRESS Oliver Buid
 CITY _____ Tel. No. _____
 LICENSE OR REG. NUMBER _____ Class. _____
 DISTRICT NO. _____ PROCESSED BY _____
 FINAL DATE 3/30/87
 FINAL BY oah

VALIDATION
 # 5452A
*****2
1-2550
...25503
0327-87

APPLICATION FOR ELECTRICAL PERMIT
COUNTY OF LOS ANGELES
BUILDING AND SAFETY

76A863 10/81
CE-8086

INSPECTOR COPY

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 4/30/82 Applicant Vince Hart
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 447683 Lic. Class C-10
Contractor HART BROS. ELEC. Date 4/30/82
 I am exempt under Sec. _____
B&P.C. for this reason _____

Signature Vince Hart
 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 704.4, 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 Electrical wiring, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.
Signature of Permittee Vince Hart Date 4/30/82

FOR APPLICANT TO FILL IN		EACH	NO.	FEE
New Residential Bldgs. & Pools 1 & 2-Family, Sq. Ft. <u>1500</u>		<u>04</u>		<u>56.00</u>
Multi-family Sq. Ft. _____				
Residential Swimming Pools _____				
Outlets: Rec _____ Light _____ Sw. _____ First 20 _____ Additional _____				
Total No. _____				
Lighting Fixtures: _____ First 20 _____ Additional _____				
Total No. _____				
Fixed Appliances Not Over 1 HP _____ Range _____ Heater _____ DW. _____ Oven _____ Dryer _____ W.M. _____ Top _____ FAU _____ W.H. _____ Hood _____ Fan _____ Other _____ Disp. _____ Room Air Cond. _____				
Power Apparatus & Large Appliances Size & Type HP, KW, KVA, or KVAR Up to 1 Incl. _____ Over 1 to 10 Incl. _____ Over 10 to 50 Incl. _____ Over 50 to 100 Inc. _____ Over 100 _____				
Services, Swbd., MCC & Panelboards 0 - 200 Amp. Under 600 V _____ 201 - 1000 Amp. Under 600 V _____ Over 1000 Amp. or Over 600 V _____				
Temp. Power Pole & Appurtenances Sign with One Branch Circuit _____ Additional Sign Branch Circuits _____				
Misc. Conduits & Conductors _____ Other (See Complete Fee Schedule) _____				
PERMIT FEE _____		(Sub-Total)		<u>56.00</u>
PLAN CHECKING FEE _____				<u>10.50</u>
PERMIT ISSUING FEE _____				<u>66.50</u>
TOTAL FEE _____				

JOB ADDRESS 15475 ROSKLEN ST.
LOCALITY HAS. HGTS.
NEAREST CROSS ST. KWIK
OWNER OR FIRM NAME BEN TAGULUA
MAIL ADDRESS 1139 TURNBULL
CITY HAS. HGTS. Tel. No. 968-8829
PLAN CHECK APPLICANT _____
ADDRESS _____
CITY _____ Tel. No. _____
PERMIT APPLICANT HART BROS. ELEC.
ADDRESS 2362 ALMAZA
CITY ROWLAND HGTS. Tel. No. 912-7971
LICENSE OR REG. NUMBER 447683 Class. S-10
DISTRICT NO. _____ PROCESSED BY nmw
FINAL DATE 7/30/81 VALIDATION _____
FINAL BY [Signature]

27009A
66650
66650H
0501-87

SEE REVERSE FOR EXPLANATORY LANGUAGE

APPLICATION FOR PLUMBING PERMIT

DEPT. OF PUBLIC WORKS

COUNTY OF LOS ANGELES

79A667A
OE 817 (REV. 8/86)

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. _____
 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 regulating Plumbing, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Permittee _____ Date 3-27-87

NUMBER	FOR APPLICANT TO FILL IN (PRINT OR TYPE)	FIXTURE OR ITEM	@	FEE
2	WATER CLOSET			12
2	BATH TUB			12
1	SHOWER			6
2	LAVATORY			12
1	SINK			6
1	DISHWASHER			6
1	CLOTHES WASHER			6
	SWIMMING POOL RECEPTOR			
	LAWN SPRINKLER SYSTEM			
	WATER HEATER			6
10	GAS SYSTEM	4 OUTLETS		6
	OUTLETS OVER 5 PER SYSTEM			
Plan check fee				
	PLUMBING PERMIT ISSUING FEE \$			10 50
	TOTAL FEE			82 50
Plan check applicant				
Name _____				
Address _____				
City _____ Tel. No. _____				

BUILDING ADDRESS	15475 Rochism
LOCALITY	HAC HAR
NEAREST CROSS ST.	KWIS
OWNER	BEN TAGUCHI
MAIL ADDRESS	1139 TUEBEN
CITY	HAC, CA
TEL. NO.	968-8859
CONTRACTOR	OWNER / SUBMITTER
ADDRESS	
CITY	
STATE LICENSE NO.	
DISTRICT NO.	2
PROCESSED BY	Mick
FINAL DATE	7/30/87
FINAL BY	OK
VALIDATION	

5499A
 # 5
 1 8250
 82503
 0330-87

SEE REVERSE FOR EXPLANATORY LANGUAGE

INSPECTOR COPY

APPLICATION FOR PERMIT HEATING - VENTILATING - AIR CONDITIONING

COUNTY OF LOS ANGELES
BUILDING AND SAFETY

FOR APPLICANT TO FILL IN
(PRINT OR TYPE ONLY)

BUILDING ADDRESS: 15475 Rochester
 LOCALITY: HAS. HILLS
 NEAREST CROSS ST.: Kewis
 DISTRICT NO.: 2

APPROVALS: _____ DATE: 5/7/87 INSPECTOR'S SIGNATURE: [Signature]
 PROCESSED BY: _____ DATE: 7/30/88 INSPECTOR'S SIGNATURE: _____

ROUGH: _____
 FINAL: _____

VALIDATION

76A364C
CE - 816 (REV. 10/81)

NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE
	ABSORPTION UNIT, BTU _____	
	AIR HANDLING UNIT, CFM _____	
	BOILER, BTU _____	
	COMPRESSOR, BTU <u>10000</u>	<u>10.00</u>
	VENTILATION SYSTEM _____	
	EVAPORATIVE COOLER _____	
	FURNACE: FAU _____ GRAVITY _____ FLOOR _____ BTU _____	<u>5.00</u>
	HEATER: SUSPENDED _____ UNIT _____ WALL _____	
<u>9</u>	<u>OUTLETS</u>	<u>15.75</u>
<u>1</u>	<u>INLET</u>	<u>1.75</u>
Plan check fee		
PERMIT ISSUING FEE \$		<u>10.50</u>
TOTAL FEE		<u>43.09</u>

PLAN CHECK APPLICANT _____
 NAME _____
 ADDRESS _____ TEL. NO. _____
 CITY _____
 OWNER _____
 MAIL ADDRESS _____ TEL. NO. _____
 CITY _____
 CONTRACTOR DU PERR
 ADDRESS _____
 CITY _____ TEL. NO. _____
 STATE LICENSE NO. _____ LIC. CLASS _____

27147A
 #8
 1...4300
4300
 0505-87

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. _____
 B.&P.C. for this reason _____ Date: _____
 Signature _____

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, 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 I hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent _____ Date _____

SEE REVERSE FOR EXPLANATORY LANGUAGE

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 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 _____

INSPECTOR'S NOTES

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 OK
 Certified copy is hereby furnished.
 Certified copy is filed with the county building inspection department.

Date 4-13-87 Applicant Walter Peterson
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 202509 Lic. Class C-42
 Contractor Walter Peterson 4-13-87

I am exempt under Sec. _____ of the L.A. Co. Plumbing Code and/or Sec. _____ of the _____ 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 (Section 7031.5, Business 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.
Walter Peterson 4-13-87
 Signature of Permittee _____ Date _____

76A42D
 CE 808 (REV. 8/81)
 ②

**APPLICATION FOR PERMIT
 SEWER - SEWAGE DISPOSAL**

COUNTY OF LOS ANGELES BUILDING AND SAFETY

FOR APPLICANT TO FILL IN		CONNECTION DATA	
BUILDING ADDRESS <u>15475 ROACHELLEN</u>	STATION	DEPTH	UPPER LOWER
LOCALITY <u>LA PALM MEADOWS HTS</u>	MANHOLE REFERENCE		
NEAREST CROSS ST. <u>KIRKUS</u>	TYPE OF CONNECTION CURB	P.L.	LENGTH FROM M.L. TO P.L.
OWNER <u>BEN TAGUCHI</u>	CO. IMP. NO.	P.C. NO. JOB NO.	
MAIL ADDRESS	TRUNK PERMIT NO.	ROAD PERMIT NO.	
CITY	AFFIDAVIT	WAIVER	EASEMENT
LEGAL DESCRIPTION	RECORD	INSTR. NO.	DATE
LOT NO.	HWY. OR ST. WIDENING PERMIT NO.		
TRACT	STATE ENCROACHMENT PERMIT NO.		
NO. OF BLDGS. NOW ON LOT	CONNECTION CHARGE FEE		
USE OF BUILDINGS	REIMBURSEMENT FEE		
CONTRACTOR <u>MICHAEL W. PETERSON</u>	DISTRICT NO.	GROUP	MAP
ADDRESS <u>23601 Falcon View Dr</u>	<u>2</u>	<u>R3</u>	BK
CITY <u>DIA BRN</u>	PG		
STATE LICENSE NO. <u>202509</u>	FINAL DATE <u>4/14/87</u>	FINAL BY <u>OK</u>	PROCESSED BY <u>Caum</u>
DESCRIPTION OF WORK HOUSE SEWER CONNECTING TO PUBLIC SEWER	VALIDATION		
SEPTIC TANK, SEWAGE PIT OR PITS AND/OR DRAINFIELD	#		<u>6138A</u>
HOUSE SEWER CONNECTING TO PRIVATE DISPOSAL SYSTEM			<u>10</u>
CONNECT ADDITIONAL BLDG. OR WORK TO HOUSE SEWER			<u>104550</u>
OVERFLOW SEWAGE PIT, DRAINFIELD EXTN., CESSPOOL, DRYWELL, MANHOLE			<u>4550B</u>
ALTER, REPAIR OR ABANDON HOUSE SEWER OR DISPOSAL SYSTEM			<u>0413-87</u>
OWNER'S AUTHORIZATION	Permit	TOTAL FEE	
	\$ <u>10.50</u>	<u>45.50</u>	
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 _____ DAY OF _____ 19____			
OWNER OR OWNERS AGENT			
ADDRESS			

INSPECTION COPY

SEE REVERSE FOR EXPLANATORY LANGUAGE

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 _____

APPROVALS	DATE	INSPECTOR'S SIGNATURE
NEW HOUSE SEWER		
CONNECT ADDITIONAL BUILDING OR WORK		
SEPTIC TANK, SEEP PIT(S) AND/OR DRAINFIELD		
CESSPOOL <input type="checkbox"/> DRYWELL <input type="checkbox"/>		
ALTER, REPAIR, SEWER OR SEWAGE DISPOSAL SYSTEM		
DISCONNECT PLUG AND ABANDON HOUSE SEWER		
BACKFILL SEPTIC TANKS <input type="checkbox"/> SEEP PIT(S) <input type="checkbox"/> CESSPOOLS <input type="checkbox"/>		

INSPECTOR'S NOTES

4/14/83 1200 #3 Septic tank and 3 - 17ft seepage tank in loc of 2-25 seepage tank
 Joe Brown

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. 2616655 Company FAR MOUNT
 Certified copy is hereby furnished.
 Certified copy is filed with the county building inspection department.

Date 10-24-86 Applicant James Powell
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 _____ Lic. Class _____
 Contractor _____ Date _____
 I am exempt under Sec. _____
 B.&P.C. for this reason _____ Date: _____

Signature _____
OWNER-BUILDER DECLARATION
 I hereby affirm that I am exempt from the Contractor's License 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 FAR EAST
 Lender's Address 109 SUNSET BLVD

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 James Powell Date _____

APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 15475 Roehlen
 CITY HAGLENDALE
 SIZE OF LOT 91x75 NO. OF BLDGS. NOW ON LOT 1
 TRACT _____ BLOCK _____ LOT NO. _____
 OWNER AMY LIE TEL. NO. _____
 ADDRESS 1191 WILHARSH
 CITY L.A. ZIP 913
 ARCHITECT R. Flores DR. NO. 345-SIL
 ADDRESS SEBEL-DIM TEL. NO. 366-141
 CONTRACTOR 10701 Des Moines LIC. NO. 80-292
 CITY Northridge LIC. CLASS B-1
 SQ. FT. 1730 NO. OF STORIES 2 NO. OF FAMILIES 1 CHECK ONE
 NEW ADD ALTER REPAIR DEMOL

DESCRIPTION OF WORK New Residence

USE OF EXISTING BLDG. _____
 APPLICANT (PRINT) SEBEL-DIM TEL. NO. 366-141
 ADDRESS 10701 Des Moines LIC. NO. 80-292
 PRESENT BUILDING ADDRESS _____
 LOCALITY _____ TEL. NO. _____
 MOVING CONTRACTOR _____
 ADDRESS _____

REQUIRED SETBACK FRONT	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXISTING WIDTH
SIDE P.L.	5'			

P.C. Fee \$ 376.13 Permit Fee _____
 Investigation Fee _____ Insurance Fee _____
 Total Fee _____

BUILDING ADDRESS 15475 Roehlen
 LOCALITY HH
 NEAREST CROSS ST. Kwis
 ASSESSOR MAP BOOK 18-82 PAGE _____ PARCEL _____
 USE ZONE R-1 MAP NO. 114-293
 SPECIAL CONDITIONS 6000
CC 5753 cup 84-201757

DISTRICT 2 TYPE CONST. II FIRE ZONE 3 PROCESSED BY _____
 STATISTICAL CLASSIFICATION 00 DWELL. UNITS +1 APT. CONDO. _____
 CLASS NO. _____

SEWER MAP BK. 2 PG. 35
 VALUATION \$ 80,000
 VALUATION \$ _____
 FINAL DATE _____
 FINAL By _____

VALIDATION # 34667A
 # 000023
 # 137613
 # 0020-76

APPROVED AT REQUEST 11/2/87

LDMA Ref. # _____
 LDMA P/C # _____
 LDMA Perm. # _____

