

House



Los Angeles County  
Public Works  
Building and Safety Division

23757 VALENCIA BOULEVARD  
VALENCIA, CA 91355  
Telephone: (661) 222-2940  
Fax: (661) 222-2947  
http://dpw.lacounty.gov

**BUILDING PERMIT**  
Number: UNC-BLDR191031008348  
Issue Date: 05/11/2020

Permit#: UNC-BLDR191031008348

**Permit Type:** UNINCORPORATED BUILDING RESIDENTIAL **Work Class:** ADDITION/ALTERATION  
**Address:** 24934 OLD STONE WAY STEVENSON RANCH, CA 91381  
**A.P.N. #:** 2826-164-006 **Valuation:** \$145,000.00

Address: 24934 OLD STONE WAY STEVENSON RANCH, CA 91381

<b>Owner:</b> JUNE CURTIS	
<b>Address:</b> 24934 OLD STONE WAY STEVENSON RANCH, CA 91381	<b>Ph:</b> N/A
<b>Agent:</b> EAGLELIFT - DAVID VASQUEZ	
<b>Address:</b> 3175 SEDONA COURT ONTARIO, CA 91764	<b>Ph:</b> 909-334-0456 909-334-0456
<b>Contractor:</b> EAGLELIFT INC	
<b>Address:</b> 3175 SEDONA COURT D ONTARIO, CA 91764	<b>Ph:</b> 877-725-2522
<b>License Number:</b> 778157 <b>Exp. Date:</b> 05/31/2020	
<b>Engineer:</b> WAYPOINT ENGINEERING	
<b>Address:</b> 601 MAIN STREET NO. 400 VANCOUVER, WA 98660	<b>Ph:</b> 360-635-6611

**Description of Work:** FOUNDATION RETROFIT 3,480 SQ FT

**Fire Zone:** VERY HIGH **FEMA Flood Zone:** D **County Flood Zone:** **New Units:** 0  
**Stat Class:** Addition, alteration or repair of residential bldg **Apartment/Condo:**

**Special Conditions:**

3-3-22 <sup>see</sup> Corrections Permitted.  
3-8-22 FINAL OK

**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/> or call your local office at (661) 222-2940 to schedule inspection.

**OWNER BUILDER DECLARATION**

I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s) (Section 7031.5, Business and Professions Code): Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9(commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.):

I, as owner of the property, or my employees with wages as their sole compensation, will do  all of or  portions of the work, and the structure is not intended or offered for sale (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who, through employees' or personal effort, builds or improves the property, provided that the improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the Owner-Builder will have the burden of proving that it was not built or improved for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed Contractors to construct the project (Section 7044, Business and Professions Code: The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the projects with a licensed Contractor pursuant to the Contractors' State License Law).

I am exempt from licensure under the Contractors' State License Law for the following reason:

By my checking here I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web site: <http://www.leoinfo.castovicalaw.html>.

Date: \_\_\_\_\_ Signature of Property Owner or Authorized Agent \_\_\_\_\_

**LICENSED CONTRACTOR'S DECLARATION**

By checking here, 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: \_\_\_\_\_ License No. \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Contractor Signature: \_\_\_\_\_

**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 \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**WORKERS COMPENSATION DECLARATION**

**WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.**

I hereby affirm under penalty of perjury one of the following declarations:  
I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are: Carrier \_\_\_\_\_

Policy Number \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Name of Agent \_\_\_\_\_ Phone Number \_\_\_\_\_

I certify that, in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that, if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**HAZARDOUS MATERIAL DECLARATION**

Will the applicant or future building occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amount specified on the hazardous materials information guide? Yes  No

Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District (SCAQMD)? See permitting checklist for guidelines. Yes  No

I have read the hazardous materials information guide and the SCAQMD permitting checklist, I understand my requirements under the Los Angeles County Code Title 2, Chapter 220 Sections 220.100 through 220.140 concerning hazardous material reporting and for obtaining a permit from the SCAQMD

**ASBESTOS NOTIFICATION**

Notification letter sent to AQMD and/or EPA  I declare that notification of asbestos removal is not applicable to addressed project.

**DECLARATION REGARDING CONSTRUCTION LENDING AGENCY**

I hereby affirm under penalty of perjury that there is a Construction lending agency for the performance of the work for which this permit is issued (Section 3097, Civil Code).

Lender's Name \_\_\_\_\_

Lender's Address \_\_\_\_\_

By my signature below, I certify to each of the following:

I am the property owner or authorized to act on the property owner's behalf.

I have read this application and the information I have provided is correct.

I agree to comply with all applicable city and county ordinances and state laws relating to building construction.

I authorize representatives of this county to enter the above-identified property for inspection purposes

I am performing work in at least two trades that exceed the \$500.00 minimum to qualify as unrelated specialty trades or crafts. (Applies to Class B Contractor)

Signature of Property Owner or Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

**PROJECT ADDRESS**  
 STEVENSON RANCH, CA 91381

**SCOPE OF WORK AND LAND USE DESCRIPTION**  
 FOUNDATION REPAIR FOR POLYURETHANE FOAM GROUT INJECTION AT STEVENSON RANCH, CA 91381. THE SCOPE OF WORK IS TO REPAIR THE FOUNDATION OF THE STRUCTURE BY POLYURETHANE FOAM GROUT INJECTION AND TO VERIFY THE INTEGRITY OF THE STRUCTURE.

**BUILDING CODE**  
 2019 CALIFORNIA BUILDING CODE (CBC)

**DESIGN CRITERIA**  
 1. FOUNDATION SHALL BE REPAIRED TO ORIGINAL DESIGN STRENGTH AND RIGIDITY.  
 2. THE REPAIR SHALL BE PERFORMED IN ACCORDANCE WITH THE 2019 CALIFORNIA BUILDING CODE (CBC) AND THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC).  
 3. THE REPAIR SHALL BE PERFORMED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.

**GENERAL NOTES**  
 1. REFER TO THE 2019 CALIFORNIA BUILDING CODE (CBC) AND THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) FOR THE LATEST REQUIREMENTS.  
 2. THE REPAIR SHALL BE PERFORMED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.

**POLYURETHANE FOAM GROUT INJECTION GENERAL NOTES**  
 1. THE POLYURETHANE FOAM GROUT SHALL BE INJECTED INTO THE FOUNDATION THROUGH THE EXISTING FOUNDATION WALLS.  
 2. THE POLYURETHANE FOAM GROUT SHALL BE INJECTED INTO THE FOUNDATION THROUGH THE EXISTING FOUNDATION WALLS.  
 3. THE POLYURETHANE FOAM GROUT SHALL BE INJECTED INTO THE FOUNDATION THROUGH THE EXISTING FOUNDATION WALLS.

**POLYURETHANE FOAM GROUT INJECTION INSTRUCTIONS**  
 1. THE POLYURETHANE FOAM GROUT SHALL BE INJECTED INTO THE FOUNDATION THROUGH THE EXISTING FOUNDATION WALLS.  
 2. THE POLYURETHANE FOAM GROUT SHALL BE INJECTED INTO THE FOUNDATION THROUGH THE EXISTING FOUNDATION WALLS.  
 3. THE POLYURETHANE FOAM GROUT SHALL BE INJECTED INTO THE FOUNDATION THROUGH THE EXISTING FOUNDATION WALLS.

**POLYURETHANE FOAM GROUT SPECIAL INSPECTION AND DATA LOGGING**  
 1. THE POLYURETHANE FOAM GROUT SHALL BE INJECTED INTO THE FOUNDATION THROUGH THE EXISTING FOUNDATION WALLS.  
 2. THE POLYURETHANE FOAM GROUT SHALL BE INJECTED INTO THE FOUNDATION THROUGH THE EXISTING FOUNDATION WALLS.  
 3. THE POLYURETHANE FOAM GROUT SHALL BE INJECTED INTO THE FOUNDATION THROUGH THE EXISTING FOUNDATION WALLS.

**PUSH PIER SPECIAL INSPECTION REQUIREMENTS AND DATA LOGGING**  
 1. THE PUSH PIERS SHALL BE INSTALLED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.  
 2. THE PUSH PIERS SHALL BE INSTALLED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.

**HELICAL PILE DESCRIPTION**  
 1. THE HELICAL PILES SHALL BE INSTALLED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.  
 2. THE HELICAL PILES SHALL BE INSTALLED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.

**HELICAL PILE SPECIAL INSPECTION REQUIREMENTS**  
 1. THE HELICAL PILES SHALL BE INSTALLED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.  
 2. THE HELICAL PILES SHALL BE INSTALLED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.

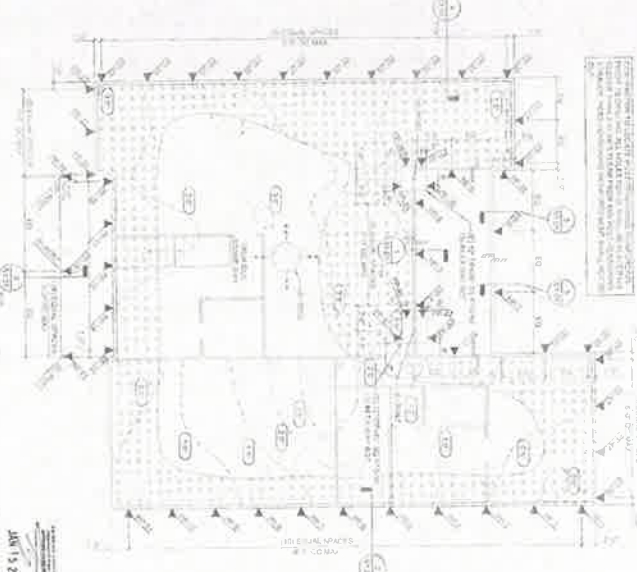
**MARGOCANE REPAIR**  
 1. THE MARGOCANE REPAIR SHALL BE PERFORMED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.  
 2. THE MARGOCANE REPAIR SHALL BE PERFORMED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.



**SITE PLAN**

**LEGEND**  
 1. POLYURETHANE FOAM GROUT INJECTION  
 2. HELICAL PILE  
 3. MARGOCANE REPAIR  
 4. FOUNDATION REPAIR

**FOUNDATION REPAIR PLAN**  
 1. THE FOUNDATION REPAIR SHALL BE PERFORMED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.  
 2. THE FOUNDATION REPAIR SHALL BE PERFORMED IN ACCORDANCE WITH THE 2019 CALIFORNIA FOUNDATION TREATMENT CODE (CFTC) SECTION 1001.1.1.1.



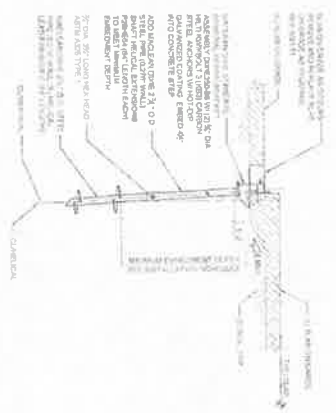
**FOUNDATION REPAIR PLAN**

Professional Engineer Seal: **WAVEPOINT ENGINEERING**, License No. 50512, State of California. The seal includes the name of the engineer, the license number, and the state of California.

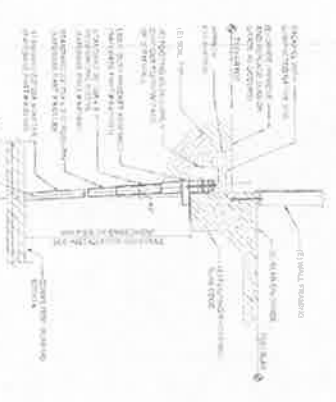
**FOUNDATION REPAIR**  
 24934 OLD STONE WAY  
 STEVENSON RANCH, CA 91381



**DATE:** 09/01/2019  
**SCALE:** AS SHOWN  
**PROJECT:** S10



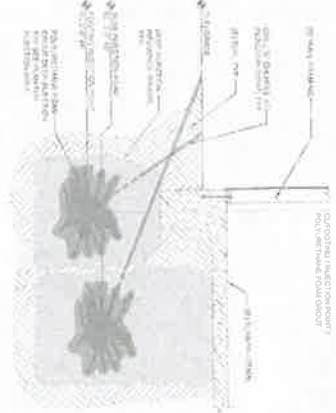
NOTE: POLYURETHANE FOAM SHOULD NOT BE USED FOR CLAMPS.  
**1 HELICAL PILE TO EXISTING STEP**



NOTE: POLYURETHANE FOAM SHOULD NOT BE USED FOR CLAMPS.  
**2 TYPICAL SLAB HEADER**



NOTE: POLYURETHANE FOAM SHOULD NOT BE USED FOR CLAMPS.  
**3 POST-TENSIONING AT POST**



NOTE: POLYURETHANE FOAM SHOULD NOT BE USED FOR CLAMPS.  
**4 POLYURETHANE FOAM GROUT**



NOTE: POLYURETHANE FOAM SHOULD NOT BE USED FOR CLAMPS.  
**5 HELICAL PILE TO EXISTING GRADE**



NOTE: POLYURETHANE FOAM SHOULD NOT BE USED FOR CLAMPS.  
**6 TYPICAL SLAB HEADER**

Professional Engineer Seal  
 State of California  
 License No. 12345  
 Date: JAN 15 2020

NO.	DESCRIPTION	DATE
1	FOUNDATION REPAIR	1/15/20
2	FOUNDATION REPAIR	1/15/20
3	FOUNDATION REPAIR	1/15/20

**FOUNDATION REPAIR**  
 24934 OLD STONE WAY  
 STEVENSON RANCH, CA 91381

**WAVP OILING ENGINEERING**  
 3000 53rd Street  
 Suite 100  
 Stevenson Ranch, CA 91381  
 Tel: 818.888.8888  
 Fax: 818.888.8888  
 www.wavpoiling.com