

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. 1736526 Company STATE FUND

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

Date 6-9-05 Applicant STEVE TOTH

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 611176 Lic. Class C-42
 Contractor STEVE TOTH Date 6-9-05

- 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 (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.

Steve Toth 6-9-05
 Signature of Permittee Date

20-0051 DPW Rev. 4/00

APPLICATION FOR PERMIT

SEWER - SEWAGE DISPOSAL

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

FOR APPLICANT TO FILL IN			CONNECTION DATA			
BUILDING ADDRESS <u>4922 INDIANOLA WAY</u>			STATION		DEPTH	
LOCALITY			MANHOLE REFERENCE		UPPER LOWER	
NEAREST CROSS ST.			TYPE OF CONNECTION		LENGTH FROM ML TO PL	
LEGAL DESCRIPTION			CURB PL		P C NO JOB NO	
BLOCK			CO IMP NO		ROAD PERMIT NO	
TRACT			TRUNK PERMIT NO		AFFIDAVIT WAIVER EASEMENT RECORD INSTR NO DATE	
ASSESSOR MAP BOOK			PAGE		PARCEL	
SIZE OF LOT			NO. OF BLDGS. NOW ON LOT		HWY OR ST WIDENING	
USE OF BUILDINGS			STATE ENCROACHMENT PERMIT NO			
OWNER <u>LINDA HADA</u>			CHARGES			
MAIL ADDRESS <u>4922 INDIANOLA WAY</u>			CONNECTION CHARGE FEE			
CITY <u>LA CANADA F.</u> TEL. [REDACTED]			REIMBURSEMENT FEE			
CONTRACTOR <u>SEQUOIA SEWER</u>			DISTRICT NO		GROUP	
ADDRESS <u>480 ROYCE ST.</u>			BK		MAP PG	
CITY <u>ALTADENA</u> TEL. [REDACTED]			3.01		R3	
STATE LICENSE NO. <u>611176</u> LIC. CLASS <u>C-42</u>			FINAL DATE		PROCESSED BY	
NO.			DESCRIPTION OF WORK		FEE	
✓			HOUSE SEWER CONNECTING TO PUBLIC SEWER		50. -	
			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			
OWNER'S AUTHORIZATION			Permit		\$ 16. -	
			TOTAL FEE		66. -	
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 _____ 20 _____			OWNER OR OWNERS AGENT _____			
ADDRESS _____						

SEE REVERSE FOR EXPLANATORY LANGUAGE

INFORMATION

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. 136526 Company STEVE FUND

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

Date 6-9-05 Applicant STEVE TOTH

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 61176 Lic. Class C-H2

Contractor STEVE TOTH Date 6-9-05

- 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.

Steve Toth 6-9-05
Signature of Permittee Date

20-0026 DPW 4/90
76A667A

APPLICATION FOR PLUMBING PERMIT

COUNTY OF LOS ANGELES

DEPT. OF PUBLIC WORKS

1

FOR APPLICANT TO FILL IN (PRINT OR TYPE)				BUILDING ADDRESS
NUMBER	FIXTURE OR ITEM	@	FEE	4922 INDIANOLA WAY
	WATER CLOSET (TOILET)			LOCALITY
	BATH TUB			NEAREST CROSS ST.
	SHOWER			OWNER <u>LINDA HADA</u>
	LAVATORY			MAIL ADDRESS <u>4922 INDIANOLA WAY</u>
	SINK			CITY <u>LACANADA F.</u> TEL. [REDACTED]
	DISHWASHER			CONTRACTOR <u>SEQUOIA SEWER</u>
	CLOTHES WASHER			ADDRESS <u>480 ROYCE ST.</u>
	SWIMMING POOL RECEPTOR			CITY <u>ALTADENA</u> TEL. [REDACTED]
	LAWN SPRINKLER SYSTEMS			STATE LICENSE NO. <u>61176</u> LIC. CLASS <u>C-H2</u>
	WATER HEATER			DISTRICT NO. <u>3.01</u>
	GAS SYSTEM	OUTLETS		PROCESSED BY <u>Benson</u>
	OUTLETS OVER 5 PER SYSTEM			VALIDATION
	HOSE BIB			FINAL DATE
<u>1</u>	<u>REVERSAL</u>		<u>18. -</u>	FINAL BY
Plan check fee				
PLUMBING PERMIT ISSUING FEE \$			<u>16. -</u>	
TOTAL FEE			<u>34. -</u>	
Plan check applicant				
Name				
Address				
City Tel. No.				

15
129 +3400
+3400
13 1 4443
41945
08-27
08-09-05
81

INSPECTOR COPY

SEE REVERSE FOR EXPLANATORY LANGUAGE



8398

APPLICATION FOR BUILDING PERMIT

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 Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. 005446-05 Company STATE FUND

Certified copy is hereby furnished.

Certified copy is filed with the county building inspection department.

Date 9/29/05 Applicant William Gabe

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 684372 Lic. Class B-1
Contractor ABEL BOWEN INC Date 9/29/05

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 of 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.

Signature William Gabe

Date _____

FOR APPLICANT TO FILL IN		
BUILDING ADDRESS <u>4922 INDIANOLA WAY</u>		
CITY <u>LA CANADA</u>	ZIP <u>91001</u>	
SIZE OF LOT <u>11,400 SF</u>	NO. OF BLDGS. NOW ON LOT <u>2</u>	
TRACT	BLOCK	LOT NO.
ASSESSOR MAP BOOK	PAGE	PARCEL
OWNER <u>EDWIN & LINDA HADA</u>		
ADDRESS <u>4922 INDIANOLA WAY</u>		
CITY <u>LA CANADA</u>	ZIP <u>91011</u>	
ARCHITECT OR ENGINEER <u>JAMES MCCUTCHEON</u>		
ADDRESS <u>PO BOX 1506 SUMMITRIDGE CA 93067</u>		
CONTRACTOR <u>ABEL BOWEN INC</u>		
ADDRESS <u>5233 PALM DR</u>		LIC. NO. <u>684372</u>
CITY <u>LA CANADA CA</u>	LIC. CLASS <u>B-1</u>	
SO. FT. SIZE <u>750 SF</u>	NO. OF STORIES <u>1</u>	NO. OF FAMILIES <u>1</u>
DESCRIPTION OF WORK <u>ADDITION TO (E) SFD</u>		
<u>REMODEL KITCHEN</u>		
USE OF EXISTING BLDG. <u>SFD</u>		
APPLICANT (PRINT) <u>LINDA HADA</u>		
ADDRESS <u>4922 INDIANOLA WAY, LA CANADA</u>		
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 <input type="checkbox"/> NO <input type="checkbox"/>		
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 <input type="checkbox"/> NO <input type="checkbox"/>		
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 <u>2,081.00</u>	PERMIT FEE <u>2449.00</u>	
	ISSUANCE FEE <u>30.00</u>	
INVESTIGATION FEE	ISSUANCE FEE <u>2449.00</u>	

BUILDING ADDRESS <u>4922 INDIANOLA WAY</u>				
LOCALITY <u>LCF</u>				
NEAREST CROSS ST. <u>KNIGHT WAY / HOUSEMAN</u>				
USE ZONE <u>R-1</u>	MAP NO.			
SPECIAL CONDITIONS				
WITHIN 1000 FT. OF SCHOOL? YES NO				
DISTRICT <u>3-01</u>	GROUP <u>R-3</u>	TYPE CONST. <u>U</u>	FIRE ZONE <u>4</u>	PROCESSED BY <u>NS</u>
STATISTICAL CLASSIFICATION CLASS NO. <u>21</u> DWELL UNITS <u>0</u>		APT	CONDO	
REQUIRED SET BACK FRONT P L	YARD	HWY	TOTAL SETBACK FROM PROP LINE	EXIST WIDTH
SIDE P L				
SEWER MAP BK PG		<u>Sub 1125.00</u>		
VALUATION <u>\$200,000.-</u>				
\$				
LDMA P/C #				
LDMA Perm #				
FINAL DATE <u>2-11-07</u>				
FINAL BY <u>#23</u>				
<u>\$2,081.00</u>				
<u>NO 5058</u>				
<u>8-19-05</u>				
<u>NS</u>				

VALIDATION

PLANS TO APPLICANT

INSPECTOR'S NOTES

To.		Returned		Approved
No.	Date	No.	Date	

Approvals	Required		Date Received or Approved
	Yes	No	
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	11-2-05	J. Benson
Stab		
Frame	2-5-06	J. Benson
Energy Insulation		
Lath/Drywall-Interior		
Lath-Exterior	2-16-06	J. Benson
House Number-Correct & Posted		
Final Enter on Front		
Certificate of Occupancy Issued	11-15-05	J. Benson

10-15-05
 Let's check & not mailing 1-23-06 JB

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

11-15-05

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. 16-1944 Company State Farm

- 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 647165 Lic. Class C-36

Contractor B.R. Bowers Date 11-17-05

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

Signature _____ Date: _____

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 11-17-05

20-0026 DPW 4/90
76A657A

APPLICATION FOR PLUMBING PERMIT

COUNTY OF LOS ANGELES

DEPT. OF PUBLIC WORKS

1

FOR APPLICANT TO FILL IN (PRINT OR TYPE)				BUILDING ADDRESS	
NUMBER	FIXTURE OR ITEM	@	FEE		
1	WATER CLOSET (TOILET)			4922 Indiana	
1	BATH TUB			LA CAUSA	
1	SHOWER			NEAREST CROSS ST. Knight	
2	LAVATORY			OWNER	
	SINK			MAIL ADDRESS	
	DISHWASHER			CITY TEL. NO.	
	CLOTHES WASHER			CONTRACTOR B.R. Bowers Plumbing	
	SWIMMING POOL RECEPTOR			ADDRESS 2513 Community	
	LAWN SPRINKLER SYSTEMS			CITY MONTE ROSE TEL. NO. [REDACTED]	
1	WATER HEATER			STATE LICENSE NO. 647165 LIC. CLASS C-36	
1	GAS SYSTEM 2 OUTLETS			DISTRICT NO. 3.01 PROCESSED BY [Signature]	
	OUTLETS OVER 5 PER SYSTEM			FINAL DATE 2-1-07	
	HOSE BIB			FINAL BY [Signature]	
	7 fixtures		126		
Plan check fee					
PLUMBING PERMIT ISSUING FEE \$				16	
TOTAL FEE				142	
Plan check applicant					
Name					
Address					
City Tel. No.					

VALIDATION

INSPECTOR COPY

SEE REVERSE FOR EXPLANATORY LANGUAGE

APPROVALS	DATE	INSPECTOR'S SIGNATURE
UNDER SLAB WORK		
ROUGH PLUMBING	2-8-06	[Signature]
GAS PIPING		
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES		
GAS TEST		
UTILITY CO. NOTIFIED		
FINAL	Enter on Front	
INDUSTRIAL WASTE APPROVAL		

INSPECTOR'S NOTES

[Blank lined area for 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 am exempt under Sec. _____

B & P.C. for this reason _____

Date _____

Owner _____

INSPECTOR'S NOTES

[Blank lined area for Inspector's Notes]

IM26ECLOR CO6A

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. 1085580 Company state fund

Certified copy is hereby furnished.

Certified copy is filed with the county building inspection department.

Date 1/21/2006 Applicant robinson electric

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 505575 Lic. Class C10

Contractor robinson electric Date 1/21/2006

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 [Signature] Date 1/21/2006

20-0019 DPW 4/87
76A663
(CE-906G)

APPLICATION FOR ELECTRICAL PERMIT
COUNTY OF LOS ANGELES BUILDING AND SAFETY

1

FOR APPLICANT TO FILL IN				JOB ADDRESS	
	EACH	NO.	FEE		
New Residential Bldgs. & Pools				4922 madisonala way	
1 & 2-Family, Sq. Ft.	\$	—	\$	La Canada	
Multi-family Sq. Ft.				NEAREST CROSS ST. Knight way	
Residential Swimming Pools				OWNER OR FIRM NAME Ed Hada	
Outlets: Rec. <u>23</u> Light <u>36</u> Sw. <u>18</u>				MAIL ADDRESS 4922 madisonala way	
Total No. <u>77</u> First 20			154-	CITY La Canada Tel. No.	
				PLAN CHECK APPLICANT Bob Habel	
Lighting Fixtures First 20				ADDRESS 5233 palm ave.	
Total No. <u>22</u> Additional			44-	CITY la canada Tel. No. [Redacted]	
Fixed Appliances Not Over 1 HP				PERMIT APPLICANT robinson electric inc	
Range _____ Heater _____ D.W. <u>/</u>				ADDRESS 5329 linda vista dr.	
Oven _____ Dryer _____ W.M. <u>/</u>				CITY la canada Tel. No. [Redacted]	
Top _____ FAU _____ WH _____				LICENSE OR REG. NUMBER 505575 Class. C10	
Hood _____ Fan _____ Other _____			70-	DISTRICT NO. 3.01 PROCESSED BY Benson	
Disp. <u>/</u> Room Air Cond. _____				FINAL DATE 2-13-07	
Power Apparatus & Large Appliances				FINAL BY [Signature]	
Size & Type HP, KW, KVA, or KVAR				VALIDATION	
_____ Up to 1 Incl.			21-		
_____ 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			2 88-		
_____ 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)			
PLAN CHECKING FEE					
PERMIT ISSUING FEE			16-		
TOTAL FEE			393.00		

INSPECTOR COPY

SEE REVERSE FOR EXPLANATORY LANGUAGE

APPROVALS	DATE	INSPECTOR'S SIGNATURE
TEMP POWER POLE		
UNDERSLAB WORK		
ROUGH CONDUIT		
WIRING	2-9-06	LB
FIXTURES		
POWER AUTHORIZED		
UTILITY CO. NOTIFIED		
FINAL	<i>Enter on Front</i>	

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 _____

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. 1169877 Company State Fund

Certified copy is hereby furnished.

Certified copy is filed with the county building inspection department.

Date 8-19-96 Applicant Arroyo Plumbing

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 629923 Lic. Class C-36

Contractor Arroyo Plumbing Date 8-19-96

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] 8-19-96
Signature of Permittee Date

20-0026 DPW 4/90
76A667A

APPLICATION FOR PLUMBING PERMIT

COUNTY OF LOS ANGELES

DEPT. OF PUBLIC WORKS

1

FOR APPLICANT TO FILL IN (PRINT OR TYPE)				BUILDING ADDRESS <u>4922 Indianola Way</u>	
NUMBER	FIXTURE OR ITEM	@	FEE	LOCALITY <u>La Canada / Plintridge</u>	
	WATER CLOSET (TOILET)			NEAREST CROSS ST. <u>RIGHT</u>	
	BATH TUB			OWNER <u>Ed + Linda Hady</u>	
	SHOWER			MAIL ADDRESS <u>same</u>	
	LAVATORY			CITY _____	TEL. NO. [REDACTED]
	SINK			CONTRACTOR <u>Arroyo Plumbing, Inc</u>	
	DISHWASHER			ADDRESS <u>300 N. Santa Anita Ave</u>	
	CLOTHES WASHER			CITY <u>Arcadia</u>	TEL. [REDACTED]
	SWIMMING POOL RECEPTOR			STATE LICENSE NO. <u>629923</u>	LIC. CLASS <u>C-36</u>
	LAWN SPRINKLER SYSTEMS			DISTRICT NO. <u>3.01</u>	PROCESSED BY <u>Denson</u>
<u>1</u>	WATER HEATER		<u>14.50</u>	FINAL DATE <u>10-10-96</u>	VALIDATION
<u>1</u>	GAS SYSTEM	<u>1</u> OUTLETS	<u>14.50</u>	FINAL BY <u>J. Denson</u>	
	OUTLETS OVER 5 PER SYSTEM				
	HOSE BIB				
<u>1</u>	<u>Re pipe</u>		<u>48.00</u>		
	<u>Watersevier</u>		<u>14.50</u>		
Plan check fee					
PLUMBING PERMIT ISSUING FEE \$				<u>12.75</u>	
TOTAL FEE				<u>104.25</u>	
Plan check applicant					
Name _____					
Address _____					
City _____			Tel. No. _____		

#5
02* *10425
*10425
2d 1. ***
42428
09-46-
08-19-96
#1

INSPECTOR COPY

SEE REVERSE FOR EXPLANATORY LANGUAGE

APPLICATION FOR BUILDING PERMIT

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. 885-95 UNIT 312 Company STATE FUND

Certified copy is hereby furnished.

Certified copy is filed with the county building inspection department.

Date 8-29-95 Applicant VICTOR HERNANDEZ

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 567245 Lic. Class C-39

Contractor HERNANDEZ ENTERPRISES Date 8-29-95

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.

Signature of Applicant or Agent [Signature] Date 8-29-95

FOR APPLICANT TO FILL IN				BUILDING ADDRESS				
BUILDING ADDRESS <u>4922 INDIANOLA WAY</u>				<u>4922 INDIANOLA WAY</u>				
CITY <u>LA CANADA</u>		ZIP <u>91011</u>		LOCALITY				
SIZE OF LOT		NO. OF BLDGS. NOW ON LOT		NEAREST CROSS ST. <u>GOULD</u>				
TRACT	BLOCK	LOT NO.		USE ZONE <u>R-1</u>	MAP NO.			
ASSESSOR MAP BOOK		PAGE	PARCEL	SPECIAL CONDITIONS				
OWNER <u>ED HADA</u>				WITHIN 1000 FT. OF SCHOOL? YES <input type="checkbox"/> NO <input type="checkbox"/>				
ADDRESS <u>4922 INDIANOLA WAY</u>				DISTRICT <u>301</u>	GROUP <u>R-3</u>	TYPE CONST. <u>1006</u>	FIRE ZONE <u>III</u>	PROCESSED BY <u>[Signature]</u>
CITY <u>LA CANADA</u>		ZIP <u>91011</u>		STATISTICAL CLASSIFICATION				
ARCHITECT OR ENGINEER				TEL. NO.	CLASS NO. <u>21</u>	DWELL UNITS <u>0</u>		APT <input type="checkbox"/> CONDO <input type="checkbox"/>
ADDRESS				REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP LINE	EXIST WIDTH
CONTRACTOR <u>HERNANDEZ ENTERPRISES</u>				FRONT P.L.				
ADDRESS <u>11828 CHERYLLEE DR</u>				SIDE P.L.				
CITY <u>EL MONTE</u>		LIC. NO. <u>567245</u>		SEWER MAP				
CITY <u>EL MONTE</u>		LIC. CLASS <u>C-39</u>		BK	PG			
SQ. FT. SIZE <u>2500</u>	NO. OF STORIES <u>1</u>	NO. OF FAMILIES <u>1</u>		VALUATION <u>\$ 5800</u>				
DESCRIPTION OF WORK <u>REMOVE EXTG RE-SHEET WITH 1/2" COR PLYWOOD. INSTALL CLASS "A" 40-YEAR COMP. SHINGLES</u>				LDMA P/C #				
USE OF EXISTING BLDG. <u>RESIDENCE</u>				LDMA Perm #				
APPLICANT (PRINT) <u>VICTOR HERNANDEZ</u>				FINAL DATE <u>9-14-95</u>				
ADDRESS <u>11828 CHERYLLEE DR EL MONTE CA.</u>				FINAL BY <u>[Signature]</u>				
<p>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?</p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>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.</p> <p>YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p>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.</p>								
OWNER OR AGENT				PERMIT FEE <u>119.25</u>				
P.C. FEE				ISSUANCE FEE <u>24.00</u>				
INVESTIGATION FEE				TOTAL FEE <u>143.25</u>				

VALIDATION #1
02** *14325
*14325-87
23 1 ***E
11822
08-17
08-29-95
\$1

Smoke detector
OK

SEE REVERSE FOR EXPLANATORY LANGUAGE

PLANS TO APPLICANT					INSPECTOR'S NOTES	
To:		Returned		Approved		
No.	Date	No.	Date			
Approvals		Required		Date Received or Approved		
		Yes	No			
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						
Frame						
Energy Insulation						
Lath/Drywall - Interior						
Lath - Exterior						
House Number - Correct & Posted						
Final - Enter on Front						
Certificate of Occupancy Issued						
Roof sheathing	8/30/95	Nade				

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

APPLICATION FOR BUILDING PERMIT

1

DIVISION OF BUILDING AND SAFETY Department of County Engineer County of Los Angeles JOHN A. LAMBIE, COUNTY ENGINEER CASSATT D. GRIFFIN, SUP'T OF BUILDING				BUILDING ADDRESS 4922 INDIANOLA					
				LOCALITY LA CAN.					
				NEAREST CROSS ST. FOOTHILL					
FOR APPLICANT TO FILL IN				DISTRICT NO. 3.1	GROUP Pool	TYPE Pool <small>CONSTR.</small>	SEWER BK	MAP PG	
BUILDING ADDRESS 4922 Indianola				MAP NUMBER 1019		STATE HWY YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
LOT NO. 15 BLOCK				USE ZONE R1		SPECIAL CONDITIONS			
TRACT 13649				MAP NUMBER 10000					
SIZE OF LOT 60 x 190 NO. OF BLDGS. NOW ON LOT				BUILDING SETBACK YARD		HWY		STREET NAME	
USE OF EXISTING BLDG. Dwelling & Gar.				FRONT P. L. 20				EXIST. WIDTH	
OWNER Tom Clark				SIDE P. L.					
MAIL ADDRESS 4922 Indianola				0 TRACT DWELL. 1 UNIT		5 INDUSTRIAL			
CITY La Canada				1 DWELL. 1 UNIT		6 PUBLIC BLDG.			
ARCHITECT OR ENGINEER MacDonald				2 DUPLEX 2 UNITS		7 ADDN., ALT., ETC.			
ADDRESS 3702 Foothill				3 APT. UNITS		8 MISCEL.			
CONTRACTOR MacDonald Bros				INSPECTION RECORD					
ADDRESS				12/12/58 (1) PLANS TO BE (2) 7013 FOR 7150 (3) BLOCK STEEL (4) PROVIDE JACKING (5)					
DESCRIPTION OF WORK				APPROVALS					
NEW <input type="checkbox"/> ADD <input checked="" type="checkbox"/> ALTER <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>				DATE INSPECTOR'S SIGNATURE					
SQ. FT. SIZE 18x36 NO. OF STORIES NO. OF FAMILIES				FOUNDATION: LOCATION FORMS, MATERIALS		12-18-58		[Signature]	
USE OF STRUCTURE Private Swim Pool				FRAME: FIRE STOPS, BRACING, BOLTS					
Std. Plan # 12514				FURNACE: LOCATION, GAS VENT, DUCTS					
SIGNATURE OF APPLICANT Roderick Mac Donald				LATH, INT.					
ADDRESS 3702 Foothill				LATH, EXT.					
\$ 2500		P. C. FEE \$ 250		HOUSE NUMBER CORRECT AND POSTED					
VALUATION		FEE \$ 10.5		FINAL		12/15/58		[Signature]	
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION.									
SIGNATURE OF PERMITTEE Roderick Mac Donald									
ADDRESS 3702 Foothill									

JOHN A. LAMBIE, COUNTY ENGINEER

VALIDATION
CK NO CASH

CLYDE N. DIRLAM, CHIEF BLDG. INSPECTOR

ACo 28808 DEC 17 16

250 A ACo 28818 DEC 17 1

10.00 #

MacDonald

APPLICATION FOR ELECTRIC PERMIT

1

DIVISION OF BUILDING AND SAFETY

Department of County Engineer
County of Los Angeles
JOHN A. LAMBIE, COUNTY ENGINEER
CASSATT D. GRIFFIN, SUP'T OF BUILDING

BUILDING ADDRESS	4922 Indianola		
LOCALITY	La Canada		
NEAREST CROSS ST.			
OWNER	Tom Clark		
MAIL ADDRESS	4922 Indianola		
CITY	La Canada	TEL. NO.	
ELECTRICIAN	Smith Electric Co		
ADDRESS	1515 W Blunsdale		
CITY	Blunsdale	TEL. NO.	
STATE LICENSE NO.	133734		

FOR APPLICANT TO FILL IN PERMIT FEES

NUMBER	DESCRIPTION	QUANTITY	UNIT PRICE	TOTAL	FEE
1	LIGHT OUTLETS				
	RECEPTACLES				
1	WALL SWITCHES				
2	TOTAL OUTLETS @		5¢	\$	10
	ELEC. RANGES		25		
	ELEC. HEATERS		25		
	KW EA				
1	FIXTURES		5		05
MOTORS					
NUMBER		HORSEPOWER			FEE
NEW	MVD.	HP	OVER	INC.	EACH
				1/2 & LESS	\$.25
1		3/4	1/2	2	.50
			2	5	1.00
			5	15	1.50
			15	50	2.50
			50	200	5.00
MISC.					
NO. SIGNS		NO. TRANS.			
NO. SIGNS		NO. LAMPS			
FOR EACH PERMIT:					
WIRING				\$1.00	1.00
FIXTURES				\$1.00	1.00
SUPPLEMENTARY				.50	
TOTAL FEE				\$ 2.50	2.50

DISTRICT NO.	GROUP	ZONE	READY FOR INSPECTION
3.1	Pool		<input checked="" type="checkbox"/>

INSPECTION RECORD

APPROVALS

	DATE	INSPECTOR'S SIGNATURE
CONDUIT	11/16/57	Banks
WIRING	11/15/57	Banks
FIXTURES		
POWER		
UTILITY CO. NOTIFIED		
FINAL	6/1/57	Banks

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

SIGNATURE OF PERMITTEE: *J. Smith*

JOHN A. LAMBIE, COUNTY ENGINEER

VALIDATION
CK MO CASH

ARTHUR C. VEIT, CHIEF ELECT. INSPECTOR

LACo 28848 DEC 17 2 265 P

Smith

78A667
DBS-17 10-55

APPLICATION FOR PLUMBING PERMIT

1

DIVISION OF BUILDING AND SAFETY

Department of County Engineer
County of Los Angeles
JOHN A. LAMBIE, COUNTY ENGINEER
CASSATT D. GRIFFIN, SUP'T OF BUILDING

BUILDING ADDRESS *4832 Indian @ 19*

LOCALITY *La Canada*
NEAREST CROSS ST.

FOR APPLICANT TO FILL IN

OWNER *Mrs E R Miller*

MAIL ADDRESS *4558 Indian @*

CITY *La Canada* TEL. NO. *CU*

PLUMBER *Mac Donald Bros*

ADDRESS *3702 Foothill*

CITY *LaCres* TEL. NO. [REDACTED]

LICENSE NO. *98691*

NUMBER	TYPE OF FIXTURE OR ITEM	FEE
	WATER CLOSET (TOILET) @ \$1.00	\$
	BATH TUB @ \$1.00	
	SHOWER @ \$1.00	
	LAVATORY (WASH BASIN) @ \$1.00	
	KITCHEN SINK @ \$1.00	
	DISHWASHER @ \$1.00	
	LAUNDRY TUB OR TRAY @ \$1.00	
	CLOTHES WASHER @ \$1.00	
	WATER HEATER @ \$1.00	
	GAS SYSTEM @ \$1.00	
	<i>Pool water</i>	<i>1.00</i>

PERMIT \$ 1 00
TOTAL FEE *2.00*

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

SIGNATURE OF PERMITTEE *Roderick Mac Donald*

DISTRICT NO. *311* GROUP *Pool* ZONE READY FOR INSPECTION

INDUSTRIAL WASTE APPROVAL

INSPECTION RECORD

Ante sight service
Boyle

APPROVALS

	DATE	INSPECTOR'S SIGNATURE
UNDER SLAB WORK		
ROUGH PLUMBING		
GAS PIPING		
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES		
GAS TEST		
UTILITY CO. NOTIFIED		
FINAL		

JOHN A. LAMBIE, COUNTY ENGINEER

VALIDATION

ROBERT A. WOOD, CHIEF PLBG. INSPECTOR

CK. M. O. CASH

LAC 28838 DEC 17 3 2.00 P

Wood

APPLICATION FOR ELECTRIC PERMIT

1

COUNTY OF LOS ANGELES
 DEPARTMENT OF COUNTY ENGINEER
 BUILDING AND SAFETY DIVISION
 JOHN A. LAMBIE, COUNTY ENGINEER
 CASSATT D. GRIFFIN, SUPT OF BUILDING

FOR APPLICANT TO FILL IN
 PERMIT FEES

ITEM	NUMBER	EACH	FEE
OUTLETS: LIGHTS RECEPT. SW.		.10	
LIGHTING FIXTURES		.10	
ELEC. RANGES			
WATER HEATERS		.50	50
ELEC. SPACE HTRS. DISHWASHERS			
GARBAGE DISPOSERS AUTO.- WASHERS STA. COOKING UNITS		.25	
MOTORS: OVER INC. H.P.			
0 — 1/2		.25	
1/2 — 2		.50	
2 — 5		1.00	
5 — 15		1.50	
15 — 50		2.50	
50 — 200		5.00	
SIGNS: NO. TRANS. NO. LAMPS			
SERVICE 0-600V		1.00	1.00
SERVICE OVER 600V		5.00	
MISC.			
WIRING PERMIT		1.00	1.00
FIXTURE PERMIT		1.00	
SUPPLEMENTARY PERMIT		.50	
TOTAL FEE			\$ 250

BUILDING ADDRESS 4922 Indianola Way
 LOCALITY La Canada
 NEAREST CROSS ST. Knight Way
 OWNER Clark
 MAIL ADDRESS 4922 Indianola Way
 CITY La Canada TEL. NO. _____
 ELECTRICIAN Imperial Elect.
 ADDRESS 2616 Montrose Ave
 CITY Montrose TEL. NO. _____
 STATE LICENSE NO. 175074

DISTRICT NO. 3-1 GROUP F ZONE A-1 PROCESSED BY _____

10/5/59 INSPECTION RECORD
 1 Service Over Loaded
 2 method of split service not as per Code (imp)

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

SIGNATURE OF PERMITTEE [Signature]

APPROVALS

	DATE	INSPECTOR'S SIGNATURE
CONDUIT	10/20/59	[Signature]
WIRING		
FIXTURES		
POWER		
UTILITY CO. NOTIFIED	10/31/59	[Signature]
FINAL	10/20/59	[Signature]

VALIDATION
 CK MO CASH

ARTHUR C. VEIT,
 SUPERVISING ELECTRICAL ENGINEER

LAP 51338 OCT 23 250

[Handwritten mark]

APPLICATION FOR ELECTRIC PERMIT

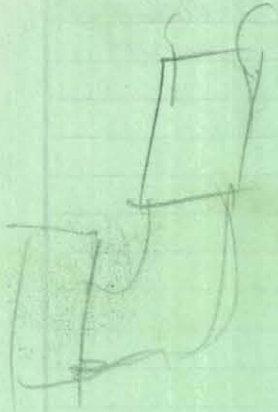
COUNTY OF LOS ANGELES
 DEPARTMENT OF COUNTY ENGINEER
 BUILDING AND SAFETY DIVISION
 JOHN A. LAMBLE COUNTY ENGINEER
 CLARENCE STREET DEPT. OF BUILDING

FOR APPLICANT TO FILE IN
 PERMIT FILE

TYPE	
OUTPUT	
LIGHTS	
WATER	
HEATING	
POWER	
WATER	
SEWER	
REFRIG.	
AC	
PLUMBING	
MECHANICAL	
OTHER	

10.2 $\frac{3}{4}$ H.P. motor

8000
 1000
 5690 + 3/4 H.P. motor
 14.690
 4.2
 1469
 5876
 59.129
 10.2
 69.3



INSPECTION RECORD

APPROVAL

COUNTY ENGINEER

35

APPLICATION FOR BUILDING PERMIT

1

COUNTY OF LOS ANGELES
DEPARTMENT OF COUNTY ENGINEER
BUILDING AND SAFETY DIVISION
 JOHN A. LAMBIE, COUNTY ENGINEER
 COLEMAN W. JENKINS, SUP'T OF BUILDING

FOR APPLICANT TO FILL IN (PRINT OR TYPE ONLY)			
BUILDING ADDRESS 4922 Indianola Way			
LOT NO. 15		BLOCK 1	
TRACT MB 295 28-29			
SIZE OF LOT		NO. OF BLDGS. NOW ON LOT	
USE OF EXISTING BLDG. house & garage			
OWNER Thomas Clark		TEL. NO.	
ADDRESS 4922 Indianola			
CITY La Canada			
ARCHITECT OR ENGINEER		TEL. NO.	
ADDRESS			
CONTRACTOR Champion Roofs		LIC. NO. [REDACTED]	
ADDRESS 2139 Verdugo		LIC. NO. 155389	
CITY Montrose		LIC. CLASS C39	
CONSTRUCTION LENDER NAME AND BRANCH None			
ADDRESS			
SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES	NEW <input type="checkbox"/>
USE OF STRUCTURE Install composition shingles on house & garage roofs.			ADD <input type="checkbox"/>
			ALTER <input type="checkbox"/>
			REPAIR <input checked="" type="checkbox"/>
			DEMOL <input type="checkbox"/>
SIGNATURE OF APPLICANT			
VALUATION \$ 970.00			
P.C. FEE \$		PMT. FEE \$ 8.00	
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING BUILDING CONSTRUCTION. I CERTIFY THAT IN DOING THE WORK AUTHORIZED HEREBY I WILL NOT EMPLOY ANY PERSON IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA IN RELATING TO WORKMEN'S COMPENSATION INSURANCE. SIGNATURE OF PERMITTEE By Harry Dimmock Partner ADDRESS 2139 N. Verdugo, Montrose			

BUILDING ADDRESS 4922 Indianola Way			
LOCALITY La Canada			
NEAREST CROSS ST. W. Knight Way			
DISTRICT NO. 3.1	GROUP F	TYPE CONST. J	PROCESSED BY Dube
STATISTICAL CLASSIFICATION			SEWER MAP
CLASS NO. 21	DWELL. UNITS 2		BK PG
USE ZONE R-1	MAP NO. 1019		
10,000	SPECIAL CONDITIONS		
BLDG. SETBACK FROM FRONT PROP. LINE OF Indianola (STREET)			
TYPE OF HIGHWAY	EXISTING WIDTH	SETBACK FROM C.L.	HIGHWAY + YARD = TOTAL
LOC 60			+ 20 = 20
BLDG. SETBACK FROM SIDE PROP. LINE OF _____ (STREET)			
TYPE OF HIGHWAY	EXISTING WIDTH	SETBACK FROM C.L.	HIGHWAY + YARD = TOTAL
			+ =
CORNER CUTOFF YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
SEE REVERSE SIDE FOR SPECIAL APPROVALS			
APPROVALS		DATE	INSPECTOR'S SIGNATURE
FOUNDATION: LOCATION FORMS, MATERIALS			
FRAME: FIRE STOPS, BRACING, BOLTS			
FURNACE: LOCATION, GAS VENT, DUCTS			
LATH, INT.			
LATH, EXT.			
HOUSE NUMBER CORRECT AND POSTED			
FINAL		4/6/70	Dube

INSPECTOR COPY

PLAN CHECK VALIDATION

CK. M.O. CASH

JOHN F. LEWIS, PRINCIPAL STRUCTURAL ENGINEER

PERMIT VALIDATION

CK. M.O. CASH

LAC 610570 FEB 13 1

8.00

Dube