

B

Type



Plans

BLD00-0133

Permit Number

819

Street Number

GLORIA DR

Street Name

ROS

Community Code

043-300-021

APN

COUNTY OF SONOMA

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA

(707) 565-1900

FAX (707) 565-1103

BUILDING PERMIT RECEIPT

BLD00-0133

Site Location Information
 Address: 819 GLORIA DR ROS
 Cross Street: DUTTON AVE

Printed By: FWILLIAM 09:04 Jan 12, 2000
 APN: 043-300-021
 Initialized By: FWILLIAM B-BLD 9901

Owner FARRAR JOHN J III & PAMELA R ET 7661 MELODY DR ROHNERT PARK CA 94928	Applicant FARRAR JOHN J III & PAMELA R ET 7661 MELODY DR ROHNERT PARK CA 94928
Contractor Lic. #:	Architect or Engineer Lic. #:

Building Permit Expires 3 YEARS from the Date Permit Fees Are Paid (See Register Validation Date)

Status: PC APRVD
 Issued:
 Type: SNEW

Permit Description: NEW SFD/ATT GARAGE-MASTER PLAN-ST99-0013

Valuation/Contract Price: \$120,216.39

Plancheck Multiplier: 1.00

Penalty Multiplier (Where Applicable):

Occupancy	Type	Factor	Sq. Feet	Valuation
Dwellings	DWEL-Type V - Wd Frme	78.87	1,416	111,679.92
Private Garage/Carport	Wood Frame or Steel	20.77	411	8,536.47
			Subtotal:	120,216.39
			Total Valuation:	120,216.39

Table Date: 07/01/1999

Item #	Item Account Code	Description	Fee	Prev. Paid
0011	1341	INSPECTIONS - OTHER	\$.00	\$.00
0012	1341	INSP. OUTSIDE NORMAL HRS	\$.00	\$.00
0013	1341	REINSPECTION(S) FEE	\$.00	\$.00
0050	327023-4040	S.M.I.P. RESIDENTIAL	\$12.02	\$.00
0060	1341	BLDG PERM PLAN CHECK FEE	\$.00	\$.00
0062	1341	ADDITIONAL PLANCHECK FEE	\$.00	\$.00
0100	1341	SITE REVIEW/ELEV. CERT.	\$.00	\$.00
0119	649103-3661	CO FIRE MARSHAL REVIEW	\$.00	\$.00
0120	1341	FIRE STDS INSPECT - PRMD	\$105.00	\$.00
0121	1341	FIRE SAFE STDS & REF PRMD	\$.00	\$.00
0122	1341	ELECTRICAL FEE	\$62.30	\$.00
0123	1341	MECHANICAL FEE	\$33.46	\$.00
0124	1341	PLUMBING FEE	\$77.88	\$.00
0132	1341	BUILDING PERMIT FEE	\$1,111.35	\$.00
0220	1600	VIO. PENALTY FEE (BLDG)	\$.00	\$.00
0221	4114	VIO. INVEST. FEE (BLDG)	\$.00	\$.00
0707	3140	REF.-GRADING/DRAIN. PLAN	\$.00	\$.00
0708	3140	REF.-GRD/DRAIN DAM/DRVWY	\$.00	\$.00
1165	3829	ZONING PERMITS W/O D.R.	\$24.00	\$.00
2000	335208	CTY-WDE CE TRAFFIC MIT	\$4,307.05	\$.00
2001	335307	CTY-WDE NO TRAFFIC MIT	\$.00	\$.00
2002	335406	CTY-WDE SO TRAFFIC MIT	\$.00	\$.00
2003	335505	CTY-WDE WE TRAFFIC MIT	\$.00	\$.00
2005	335042	EASTMN LN TRAFFIC MIT	\$.00	\$.00
2006	335075	MOORLAND AV DRAINAGE MIT	\$.00	\$.00
2007	335034	LARK/WIKIUP TRAFFIC MIT	\$.00	\$.00
2008	335059	SONOMA VLY TRAFFIC MIT	\$.00	\$.00
2104	332148	PRM-PARK MIT AREA 4	\$1,555.00	\$.00
5011	1341-WAIVED 3505	INSPECTIONS - OTHER	\$.00	\$.00
5012	1341-WAIVED 3505	INSP. OUTSIDE NORMAL HRS	\$.00	\$.00
5013	1341-WAIVED 3505	REINSPECTION(S) FEE	\$.00	\$.00
5060	1341-WAIVED	BLDG PERM PLAN CHECK FEE	\$.00	\$.00
5062	1341-WAIVED	ADDITIONAL PLANCHECK FEE	\$.00	\$.00
5100	1341-WAIVED 3502	SITE REVIEW/ELEV. CERT.	\$.00	\$.00
5119	649103-3661-WAIVED	CO FIRE MARSHAL REVIEW	\$.00	\$.00
5120	1341-WAIVED 3504	FIRE STDS INSPECT - PRMD	\$.00	\$.00
5121	1341-WAIVED	FIRE SAFE STDS & REF PRMD	\$.00	\$.00
5122	1341-WAIVED 3504	ELECTRICAL FEE	\$.00	\$.00
5123	1341-WAIVED 3504	MECHANICAL FEE	\$.00	\$.00
5124	1341-WAIVED 3504	PLUMBING FEE	\$.00	\$.00
5132	1341-WAIVED 3504	BUILDING PERMIT FEE	\$.00	\$.00
5220	1600-WAIVED	VIOLATION PENALTY FEE	\$.00	\$.00
5221	4114-WAIVED 2001	VIOLATION INVESTIG FEE	\$.00	\$.00
5707	3140-WAIVED 6054	REF.-GRADING/DRAIN. PLAN	\$.00	\$.00
5708	3140-WAIVED 6055	REF.-GRD/DRAIN DAM/DRVWY	\$.00	\$.00
6165	3829-WAIVED 6146	ZONING PERMITS W/O D.R.	\$.00	\$.00
7000	335208-4040-WAIVED	PRM-CO-WDE CE DEV FEE TR	\$.00	\$.00
7001	335307-4040-WAIVED	PRM-CO-WDE NO DEV FEE TR	\$.00	\$.00
7002	335406-4040-WAIVED	PRM-CO-WDE SO DEV FEE TR	\$.00	\$.00
7003	335505-4040-WAIVED	PRM-CO-WDE WE DEV FEE TR	\$.00	\$.00
7005	335042-4040-WAIVED	PRM-EASTMN LN DEV FEE TR	\$.00	\$.00
7006	335075-4040-WAIVED	PRM-MOORLAND DEV FEE TR	\$.00	\$.00
7007	335034-4040-WAIVED	PRM LARK/WIK SP PLN DEV	\$.00	\$.00
7008	335059-4040-WAIVED	PRM-SONOMA VLY DEV FEE T	\$.00	\$.00
7104	332148-1347-WAIVED	PRM-PARK MIT AREA 4	\$.00	\$.00

018357001/12/00801
 0000133
 SIERRA \$7288.06
 *** \$110 \$7288.06
 CHECK \$7288.06
 CHNG- \$0.00

Permit qualified for fee waiver (Y/N): N \$7,288.06

Total Calculated Fees \$7,288.06
 Previously Paid \$.00
 Balance Due \$7,288.06

CASH REGISTER
 VALIDATION
 REQUIRED
 BELOW

REMOVED 12.29.00 Am.

GIBLIN ASSOCIATES

POST OFFICE BOX 6172 SANTA ROSA, CA 95406
TELEPHONE (707) 528-3078 FACSIMILE (707) 528-2837

CONSULTING
GEOTECHNICAL
ENGINEERS

September 6, 2000

Job No. 2553.1.13

George Dexter and John and Pam Farrar
99 Rock Road
Kentfield, CA 94904

Final Report
Soil Engineering Services
Lots 1, 2, and 5 through 10
Dutton Place Subdivision, Phase 1
Santa Rosa, California

This final report summarizes the results of the soil engineering services we provided during site preparation, grading and installation of foundations for residences constructed on Lots 1, 2, and 5 through 10 of Phase 1 of the Dutton Place Subdivision in Santa Rosa, California. On Lots 1 and 2, single-family residences were constructed and on Lots 5 through 10, three separate duplexes were constructed. On Lots 3 and 4, an existing duplex was remodeled. The results of our soil investigation for the subdivision were presented in our dated August 4, 1997.

Site Grading

During September 1998 through January 1999, site preparation, grading and development of building pads were accomplished by the FEDCO Construction Company of Santa Rosa, California. Initially, areas to be graded were cleared of surface obstructions and stripped of the upper few inches of soil containing root growth and organic matter. The cleared materials and strippings were removed from the site. Areas to be filled then were scarified, moisture conditioned, and compacted with a segmented, self-propelled, sheepsfoot-wheel roller. Approved materials from on-site excavations then were placed in layers, moisture conditioned and similarly compacted. In general, cuts and fills on the lots were on the order of less than 6 inches. Representative samples of the materials used for fill were compacted in our laboratory in general accordance with the ASTM 1557-91 compaction test procedure to determine the optimum moisture contents and maximum dry densities. Our representative was at the site on an intermittent basis to observe the work in progress, obtain samples for laboratory testing, and perform field density tests at representative locations in the lot fills. The field densities were compared to the corresponding maximum densities to determine the relative compaction attained. Summaries of the compaction and field density test data are retained in our files and are available for review if requested.

Lot 21 819 GLORIA DR
Site Address

Permit Number

An installation certificate is required to be posted at the building site or made available for all appropriate inspections. (The information provided on this form is required; however, use of this form to provide the information is optional.) After completion of final inspection, a copy must be provided to the building department (upon request) and the building owner at occupancy, per Section 10-103(b).

HVAC SYSTEMS:

Heating Equipment

Equip. Type (pkg. heat pump)	CEC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) ¹ [≥CF-1R value]	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)

Cooling Equipment

Equip. Type (pkg. heat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) ¹ [≥CF-1R value]	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)

1. ≥ reads greater than or equal to.

I, the undersigned, verify that equipment listed above is: 1) is the actual equipment installed, 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings, and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Signature, Date

Installing Subcontractor (Co. Name)
OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model Number	Distribution Type (Std. Point-of-Use)	If Recirculation, Control Type	# of Identical Systems	Rated ² Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency ³ (EF, RE)	Standby ³ Loss (%)	External Insulation R-value
NAT GAS	STATE PR 640 NDC T	STANDARD			35000	40	.62	3.24	R16

2 For small gas storage (rated input of less than or equal to 75,000 Btu/hr), electric resistance and heat pump water heaters, list Energy Factor. For large gas storage water heaters (rated input of greater than 75,000 Btu/hr), list Recovery Efficiency, Standby Loss and Rated Input. For instantaneous gas water heaters, list Recovery Efficiency and Rated Input.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Subchapter 2, Section 111.

I, the undersigned, verify that equipment listed above my signature: 1) is the actual equipment installed; 2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Signature, Date 8/31/00

EMPIRE-SWIFT PLUMBING
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner

COPY TO: Building Department
Building Owner at Occupancy

DUTTON PLACE ~~LOT~~ 819 GLORIA
Site Address

Permit Number

An installation certificate is required to be posted at the building site or made available for all appropriate inspections. (The information provided on this form is required; however, use of this form to provide the information is optional.) After completion of final inspection, a copy must be provided to the building department (upon request) and the building owner at occupancy, per Section 10-103(b).

HVAC SYSTEMS:

Heating Equipment

Equip. Type (pkg., heat pump)	CEC Certified Mfr Name & Model Number	# of Identical Systems	Efficiency (AFUE, etc.) (\geq CF-1R value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
FURNACE	BRYANT 373LAN036070		80%	FLOOR/ATTIC	4.2	69,000	56,000

Cooling Equipment

Equip. Type (pkg., heat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) (\geq CF-1R value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
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I, the undersigned, verify that equipment listed above my signature (1) is the actual equipment installed; (2) is equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and (3) the equipment meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

Cat C 9/1/00
Signature, Date CARTER CUMMINGS

HENRY MECHANICAL LIC. # 702288
Installing Subcontractor (Co. Name)
OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model Number	Distribution Type (Std. Point-of-Use)	If Recirculation, Control Type	# of Identical Systems	Rated ¹ Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency ¹ (EF, RE)	Standby ¹ Loss (%)	External Insulation R-value

¹ For small gas storage (rated input \leq 75,000 Btu/hr), electric resistance and heat pump water heaters, list Energy Factor. For large gas storage water heaters (rated input $>$ 75,000 Btu/hr), list Recovery Efficiency, Standby Loss and Rated Input. For instantaneous gas water heaters, list Recovery Efficiency and Rated Input.

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Signature, Date

Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner

COPY TO: Building Department
Building Owner at Occupancy

SCHOOL DISTRICT CERTIFICATION OF COMPLIANCE

BUDCO-0133

RETURN TO: Permit and Resource Management, County of Sonoma, 2550 Ventura Ave., Santa Rosa, California 95403

FROM: High School District SRMSD Elementary District Bell

THIS CERTIFICATION IS VOID IF NOT RETURNED TO THE BUILDING INSPECTION DEPARTMENT WITHIN 30 DAYS AFTER THIS FORM IS SIGNED AND DATED BY THE SCHOOL DISTRICTS

[To be completed by applicant for building permit(s) and verified by Permit and Resource Management]

EFFECTIVE DATE _____ (Date Plan Check Fee Was Paid) CITY RECEIPT NO. _____

PROJECT ADDRESS 819 Gloria Dr

PROPERTY OWNER'S NAME Ann Farrell / George Dexter

If applicable: Mobilehome Park Name _____ Lot/Space Number _____

ASSESSOR'S PARCEL NO. 043 300 021

PROJECT DESCRIPTION - Include number of dwelling units. If agricultural, state specific use. Also include information regarding whether or not replacement dwelling, building used for religious purposes, private school or owned and occupied by governmental entity.

New SFD

Building Type: Residential Commercial/Industrial Mobilehome/Manufactured Home

Square footage breakdown per residential unit: residential area* _____

Total No. of residential units _____ Total Square Feet of Eligible Building Area* 1416

I declare under penalty of perjury under the laws of the State of California on behalf of that the information furnished above is accurate and correct to the best of my knowledge. [Signature] (Developer/Owner)

Applicant's Signature

The County of Sonoma Permit and Resource Management on December 30, 1999, has verified the square footage and use information furnished by the above developer.

County of Sonoma Signature B. Keams

- * **Residential Buildings** are building occupancies for single and multiple family dwellings, apartments, condominiums, and residential hotels where the primary purpose is to provide a residence and not a services, such as health care.
- * **Commercial/Industrial Buildings** are building occupancies other than residential. Includes those buildings where the primary purpose is to provide a service, such as health care. Also includes senior citizen housing (Civil Code 51.3), residential care facility for elderly [H&S Code 15432(d)(9)], and adult only mobilehomes [Gov. Code 65995.2(a)]
- * **Eligible Commercial/Industrial Area** is all chargeable covered and enclosed space calculated by the building department. **Chargeable Covered and Enclosed Space** include all the covered and enclosed space within the perimeter of a commercial or industrial structure but does not include any storage areas incidental to the principal use of the development, garage, parking structure, unenclosed walkway, or utility or disposal area.
- * **Eligible Residential Area** means the **Assessable Space** calculated by the building department which includes all the square footage within the perimeter of a residential structure, but does not include any carport, walkway, overhang, patio detached accessory structure, or similar area.

[To be completed by school districts] SCHOOL DISTRICT CERTIFICATION

School District requirements for the above project have been satisfied pursuant to (circle one):

Gov. Code 53080
 Mitigation Agreement
 Not subject to fee requirement

This Certification covers only the amount of square footage identified above. Any additional square footage for the project is subject to another certification of compliance.

ELEM. SCHOOL DISTRICT recpt. no. 356899

HIGH SCHOOL DISTRICT recpt. no. 000464

Square footage: 1416 at \$ 1.35 / sq. ft.

Square footage: 1416 at \$.58 / sq. ft.

Total Fee Amount collected: \$ 1911.60

Total Fee Amount collected: \$ 821.28

Authorized School District Official Marti Roeder signature

Authorized School District Official Jane Benway signature

Date: 1-7-00 Business Mgr title

Date: 1-5-00 As. Secretary title

With regard to mobilehomes / manufactured homes, it is understood that the validity of any certificate of occupancy or Statement of Installation Acceptance issued by the City is conditioned on the concurrent payment of fees set forth above.

Applicant is hereby noticed that anyone filing a protest on the imposition of Government Code Section 53080 fees must do so within 90 days from payment of the fee.

COUNTY OF SONOMA - PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403 (707) 565-1900 FAX (707) 565-1103

Please Print Your Name: PAM FARRAR Date Applied: 12/30/89

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: 819 GLORIA DR. City: SANTA ROSA ZIP: _____
 Cross-Street: DUTTON AVE APN: 043 380 021 Project Phone #: () Project Fax #: ()
 Directions: _____ Subd. Name: DUTTON PLACE I. Unit #: 1 Lot #: 10
 Describe Project: SUBDIVISION AFFORDABLE HOUSING SFD/ATT GARAGE Living Area: 1416 Garage: 411 Contract Price: _____
 OWNER NAME AND ADDRESS: PAM FARRAR / GEORGE DEXTER APPLICANT NAME AND ADDRESS: SAME
 Mailing Address: 7661 MELODY DR Mailing Address: _____
 City: R.P. State: CA ZIP: 94928 City: _____ State: _____ ZIP: _____
 Day Ph: () 795-7611 Fax: () 795-7633 Day Ph: () _____ Fax: () _____

CONTRACTOR INFORMATION

OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)

Company Name: PALO CONSTRUCTION Name: RICHARD REKLEWITZ
 Address: P.O. BOX 835 Address: 4795 MEDICAL RD
 City: CLOVERDALE State: CA ZIP: 95425 City: SR. State: CA ZIP: _____
 Day Ph: () 894-3622 Fax: () 894-4735 Day Ph: () 539-1336 Fax: () _____

WORKER'S COMPENSATION DECLARATION

CONSTRUCTION LENDING 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: _____ Policy No.: _____
 (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 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.
 Exp. Date: _____ Applicant: _____

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, Civ. C.)
 Lenders Name: _____ Lenders Address: _____

FOR DEPARTMENT USE

Zoning: R1 File No: AP97-0006 Acres: _____
 Existing Use/Structures: Residential
 Proposed Use/Structures: Guest
 Zoning Min. Yard Requirements: Front _____ Left _____ Right _____ Back _____
 NOTE: Fire Safe Standards require all parcels greater than 1/2 acre to have a min. 30' setback unless mitigated. Mitigation Required Address subject to change
 Approval for Permit Issuance: _____ Approval for Occupancy: _____
 By: _____ Date: 1/11/90
 Conditions: _____

OWNER-BUILDER DECLARATION

Sewer Connection: Available Fees Paid PERMIT READ
 Approved by: Angela Cidell Date: 1-11-00

Road Encroachment: Fees Paid
 Approved by: J. Conroy Date: 1/11/2000

Septic System Permit/Clearance: SEWER COMPLETION CERTIFICATE
 Approved by: REQUIRED PRIOR TO OCCUPANCY

Flood Zone: Yes No 100 Year Flood Elevation: _____
 Site Review: X

Code Enforcement Violation Yes No Violation # _____
 This permit is limited to _____ days.

Work Authorized: NEW SFD/ATT GARAGE
 New Addition Alteration Repair Moving Occ/Chg

THIS PERMIT SHALL EXPIRE IN THREE(3) YEARS FROM DATE FEES ARE PAID UNLESS OTHERWISE NOTED BY CODE ENFORCEMENT

Plans Approved No Plans Subject to Field Inspection
 Machine Space for Permit Fee
 Plancheck Cleared By: Scherne Date: 8/24/99 18357 01/12/00B01
 Permit Cleared By: [Signature] Date: 1/11/00 # 0000133
 Post FIRM Alquist Priolo Report Available
 Pre FIRM Geotechnical report Available
 Type of Construction: _____ Occupancy: _____ No. of Stories: _____ No. of Bedrooms: _____
 Auto. Fire Sprinklers Req'd: _____ No. of Units: _____ Certificate of Occupancy: _____
 Final Date: _____ Inspector: _____
 **TTL \$7288.06
 CHECK \$7288.06
 CHNG \$0.00

LICENSED CONTRACTOR'S DECLARATION

ASBESTOS DECLARATION

PERMITTEE SIGNATURE

ADDRESS: _____ CITY: _____ ZIP: _____
 Contractor Owner Agent for Contractor Agent for Owner

Permit # BLD99-0133 Area 3

Permit Coordinator: _____

JOB ADDRESS: 819 Gloria Dr SRD
 MAP REFERENCE: _____
 PERMIT NUMBER: BLD99-0133

SPECIAL INSPECTION REQUIRED		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, SEE ADDITIONAL SHEET
INSPECTION RECORD	DATE	NAME		REMARKS
FOUNDATION				ENGINEER IS TO REVIEW
FORMS/SETBACK	3-20-00	BS		EXCAVATIONS AND
FOOTING				FOUNDATION
WALLS				NOTIFY CONSTRUCTION INSPECTOR
UNDER GROUND #	3/20/00	BS		APPROVAL PRIOR TO CALLING
CAISSONS/PIERS	3-15-00	BS		FOUNDATION INSPECTION.
SLAB				
MASONRY				Firewall INSPECTIONS:
RETAINING WALLS				4-3-00 Layer between PL walls RC
FIREPLACE				for 1st story.
FOOTING				4-12-00 Layer between PL walls
HEARTH/PROTECTION				@ end story.
THROAT				5-22-00 Permit Firewalls RC
CHIMNEY				
UNDERFLOOR/UNDERSLAB				
U/F ELECTRICAL				
U/F MECHANICAL				
U/F PLUMBING				
U/F FRAMING				
U/F INSULATION				
SHEAR WALLS				
<input type="checkbox"/> INTERIOR				
<input checked="" type="checkbox"/> EXTERIOR	Straps & Plywood 5/26/00	RC		garage shear 6/23/00 J
DIAPHRAGMS				
<input type="checkbox"/> ROOF				
<input type="checkbox"/> FLOOR	waived 5/8/00	RC		
SIDING/SHEATHING				
HOLD DOWNS				
CLOSE-IN				
ROUGH ELECTRICAL				MUST provide 3rd party
ROUGH MECHANICAL				Truss certification for JPB
ROUGH PLUMBING				Built Trusses.
ROUGH FRAME				
SMOKE DETECTORS				
INSULATION				
WALLBOARD				
STUCCO/PLASTER				
<input type="checkbox"/> LATH <input type="checkbox"/> SCRATCH				
ROOFING				
TUB/SHOWER PAN				
SUSPENDED CEILING				
ROUGH ELECTRICAL				
ROUGH MECHANICAL				
EXITING				
STAIRS/HANDRAILS				
RAMPS				
CORRIDORS/DOORS				
HANDICAP REQUIREMENTS				
ENERGY REQUIREMENTS				
TEMPORARY OCCUPANCY				
TEMPORARY ELECTRICAL				
TEMPORARY GAS				
ELECTRIC METER AUTHORIZATION				
PANEL BOARDS/SERVICE				
GAS METER AUTHORIZATION				
GAS PRESSURE TEST				
HOUSE				
YARD				
MANUF. HOME FOUNDATION				
MANUF. HOME INSTALLATION				
CONTINUITY				
STAIRS/SKIRTS				
RIDGE BOLTING				
SWIMMING POOLS				
PRE-GUNITE				
PRE-DECK				
PRE-PLASTER/FENCE				
GRADING FINAL				
ELECTRICAL FINAL				
MECHANICAL FINAL				
PLUMBING FINAL				
FINAL				
OCCUPANCY (OK TO OCCUPY)				

SOILS ENGINEER IS TO REVIEW EXCAVATIONS AND FOUNDATION NOTIFY CONSTRUCTION INSPECTOR PRIOR TO CALLING FOUNDATION INSPECTION.

Firewall INSPECTIONS:
 4-3-00 Layer between PL walls RC for 1st story.
 4-12-00 Layer between PL walls @ end story.
 5-22-00 Permit Firewalls RC

3-28-00 RC

garage shear 6/23/00 J

waived 5/8/00 RC

MUST provide 3rd party Truss certification for JPB Built Trusses.

6/23/00 J

9/19/00 (U)

6/28/00 (L)

1st Layer at Sep wall 6/23/00 (U)
 2nd Layer " " " 6/28/00 (U)

770	Top Acceptance
775	Water Supply/Tank
779	Gas System
780	Food & Duct System
78	Aboveground
19	Fire final

SEWER COMPLETION CERTIFICATE REQUIRED PRIOR TO OCCUPANCY. Commercial Fire Inspections:

770	Sprinkler Final
771	Aboveground Hydrostatic
772	Underground Hydrostatic
773	Underground Flush
774	Thrust Blocks
775	Pipe Weld
776	Hydrants/Appliances

8/24/00 (U)

9/25/00 (U)

FIRE INSPECTION REQUIRED Yes No
 Inspected by:

Subdivision Approvals

Sound Mitigation

CLEARANCES:
 FIRE Local County

HEALTH DEPARTMENT
 ZONING
 SANITATION
 N.C.A.P.C.D.

PLAN RETENTION REQUIRED?
 Yes No

PERMIT # B1000-0133