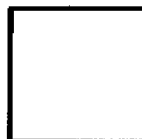
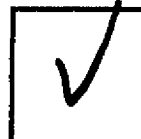




Type



Docs



Plans

BLD07-1415

Building Permit Number

425

Street Number

Bohemian Hwy

Street Name

TW1

Community Code

073-120-030

APN

COUNTY OF SONOMA
PERMIT AND RESOURCE MANAGEMENT DEPARTMENT
 2550 VENTURA AVENUE, SANTA ROSA, CA 95403-2829
 (707) 565-1900 FAX (707) 565-1103

Building Plan Check Invoice : BLD07-1415

This is not a Building Permit**

Project Address: 425 BOHEMIAN HWY TWI
Cross Street: BODEGA HWY
Fire District: GOLD RIDGE FIRE
APN: 073-120-030

Status: PREFINAL
Printed: Tuesday, August 07, 2007
Initialized by: CCAMILLE
Activity Type: B-BLD 601

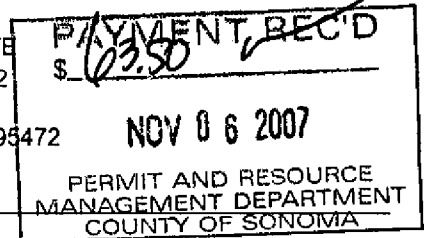
Description: SFD ADDITION & MINOR REMODEL; REMODEL CALC

Res/Com: R
Std/Quick: S
Fire District: GOLD RIDGE FIRE
P/C Multiplier: 1

Insp Area: 07
Site Review File #:
Site Review Fees Paid: \$123.00

Owner: KIRKHAM MARY T ET AL
 425 BOHEMIAN HWY
 FREESTONE CA 95472-9579
 415-479-7880

Applicant: SAUNDERS & ASSOCIATE
 130 S MAIN ST SUITE 212
 SEBASTOPOL CA
 95472
 707-824-8149



Valuation:					
Occupancy	Type	Factor	Sq Feet	Valuation	
Dwellings	DWEL-Type V - wd Frme	127.55	290	\$36,989.50	
	Additional Amount...			113,200.00	
	Totals...		290	\$150,189.50*	

Fees:

Item#	Description	Account Code	Tot Fee	Prev. Pmts	Cur. Pmts
50	S.M.I.P. RESIDENTIAL	327023-4040	15.02	15.02	.00
60	BLDG PERM PLAN CHECK FEE	025015-1341	1,210.77	1,210.77	.00
62	ADDITIONAL PLANCHCK FEE	025015-1341	63.50	.00	.00
100	SITE REVIEW/ELEV. CERT.	025015-1341	123.00	123.00	.00
122	ELECTRICAL FEE	025015-1341	54.00	54.00	.00
123	MECHANICAL FEE	025015-1341	54.00	54.00	.00
124	PLUMBING FEE	025015-1341	54.00	54.00	.00
132	BUILDING PERMIT FEE	025015-1341	1,862.73	1,862.73	.00
140	TECH ENHANCEMENT FEE	025015-4040	35.90	35.90	.00
735	NPDES - BUILDING	025015-1341	149.02	149.02	.00
1165	ZONING PERMITS W/O D.R.	025015-3829	82.00	82.00	.00

\$3,703.94 \$3,640.44

**These fees cover the cost of reviewing your plans prior to permit issuance.
 When your plans are approved, and BEFORE a building permit can be issued,
 payment of building permit fees is required.

Total Fees: \$3,703.94

Total Paid: \$3,640.44

Balance Due: \$63.50

Refunds are regulated by the California Building Code (CBC) which reads: "Under Section 107.6, CBC, the building official may authorize refunding of not more than 80 percent of the plan review fee paid when an application is withdrawn or canceled before any plan reviewing is done. The building official may authorize refunding of not more than 80 percent of the permit fee paid when no work has been done under the permit. There shall be no refunding of any fee paid except on written application filed by the original permittee not later than 180 days after the date of fee payment."

When validated below, this is your receipt.
Plan Check EXPIRES 365 days from date plan check fees are paid.

Special Inspection and Testing Requirements

CNI-012

Highway/Residential
Project Name

425 Bohemian
Project Address

8107-1415
Permit No.

Reinforced Concrete, Gunite, Grout and

Mortar:

CBC 1701.5.1

Concrete	Gunite	Grout	Mortar	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Aggregate Tests
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reinforcing Tests
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mix Designs
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reinforcing Placement
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Batch Plant Inspection
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Inspect Placing
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cast Samples
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pick-up Samples
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compression Tests

CBC 1701.5.1 and .4

Piers	Grade Beams	Pretens	Precast	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Aggregate Tests
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reinforcing Tests
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tendon Tests
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Mix Designs
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reinforcing Placement
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Insert Placement
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Concrete Batching
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Installation Inspection
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cast Samples
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pick-up Samples
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Compression Tests

Structural Observation by Architect or Engineer:

CBC 1702

- ☐ Foundation Observation
- ☒ Framing Observation
- ☐ Final Observation
- ☒ General Conformance Letters

Masonry:

CBC 1701.5.7

- ☐ Special Inspection Stresses Used
- ☐ Prelim. Acceptance Test (Masonry Units, Wall Prisms)
- ☐ Subsequent Tests (Mortar, Grout, Field Wall Prisms)
- ☐ Placement Inspection of Units

Robert M. White
Plans Examiner

5-31-7
Date

Requirements specified by (Architect/Engineer of record) _____ Date _____

Contractor _____ Date _____

Owner _____ Date _____

Embedded Bolts or Inserts:

CBC 1701.5.2 and .15

- ☐ Bolt/Insert Placement Inspection _____ %
- ☐ Bolt/Insert Tension Test _____ %
- ☐ Bolt/Insert Shear Test _____ %
- ☒ Epoxy Mix and Placement Observation _____ %

Structural Steel / Welding:

CBC 1701.5.5 and .8

- ☐ Sample and Test (list specific members below)
- ☐ Shop Material Identification
- ☐ Welding Inspection ☐ Shop ☐ Field
- ☐ Ultra Sonic Inspection ☐ Shop ☐ Field
- ☐ High-Stress Bolting Inspection
- ☐ A325 ☐ Shop ☐ Field
- ☐ A490 ☐ N ☐ X ☐ F

- ☐ Metal Deck Welding Inspection
- ☐ Reinforcing Steel Welding Inspection
- ☐ Metal Stud Welding Inspection
- ☐ Concrete Insert Welding Inspection

Structural Wood:

CBC 1701.5.15

- ☐ Horizontal Diaphragms
- ☐ Shear Wall Nailing Inspection
- ☐ Inspection of Glulam Fabrication
- ☐ Inspection of Truss Joint Fabrication
- ☐ Sample and Test Components

Geotechnical/Foundation:

CBC 1701.5.11 and .13

- ☐ Soils Engineer Plan Review Acceptance Letter
- ☐ Foundation Excavation
- ☐ Pier Holes
- ☐ Site Drainage
- ☐ Fill Material
- ☐ Placement Inspection
- ☐ Field Density
- ☐ Acceptance Letter
- ☐ Acceptance Letter

Fireproofing:

CBC 1701.5.10

- ☐ Placement Inspection
- ☐ Density Tests
- ☐ Thickness Tests
- ☐ Inspect Batching

Insulating Concrete:

CBC 1701.5.9

- ☐ Sample and Test
- ☐ Placement Inspection
- ☐ Unit Weights

Additional Instructions/Other Tests & Inspections:

Sonoma County Permit and Resource Management Department

2550 Ventura Avenue ♦ Santa Rosa, CA ♦ 95403-2829 ♦ (707) 565-1900 ♦ Fax (707) 565-2210

Certificate Of Compliance : Residential

(Part 1 of 3) **CF-1R**

Kirkham / Rossman Residence

3/13/2007

Project Title

425 Bohemian Highway, Freestone

Project Address

RaPiD Energy Compliance

(707) 837-9836

Documentation Author

Telephone

EnergyPro

2

Compliance Method

Climate Zone

Date

Building Permit #

Plan Check/Date

Field Check/Date

TDV (kBtu/sf-yr)	Standard Design	Proposed Design	Compliance Margin
Space Heating	26.45	25.13	1.31
Space Cooling	29.56	25.19	4.37
Fans	6.31	5.46	0.86
Domestic Hot Water	12.42	12.42	0.00
Pumps	0.00	0.00	0.00
Totals	74.74	68.19	6.55

Percent better than Standard:

8.8%

BUILDING COMPLIES - NO HERS VERIFICATION REQUIRED

Building Type: ☒ Single Family ☐ Addition
☐ Multi Family ☒ Existing + Add/Alt

Total Conditioned Floor Area: 2,015 ft²

Existing Floor Area: 1,725 ft²

Building Front Orientation: (N) 0 deg

Raised Floor Area: 1,335 ft²

Fuel Type: Natural Gas

Slab on Grade Area: 0 ft²

Fenestration:

Average Ceiling Height: 9.5 ft

Area: 321 ft²

Avg. U: 0.54

Number of Dwelling Units: 1.00

Ratio: 15.9%

Avg. SHGC: 0.59

Number of Stories: 1

BUILDING ZONE INFORMATION

Zone Name	Floor Area	Volume	# of Units	Zone Type	Thermostat Type	Vent Hgt.	Vent Area
Existing System	1,725	16,262	0.86	Conditioned	Setback	2	n/a
Addition System	290	2,842	0.14	Conditioned	Setback	2	n/a

OPAQUE SURFACES

Type	Frame	Area	U-Fac.	Insulation Cav. Cont.	Act. Azim.	Tilt	Gains Y / N	Condition Status	JA IV Reference	Location / Comments
Floor	Wood	1,045	0.037	R-19	R-0.0	0	180	X Existing	20-A4	1st Floor
Wall		397	0.110	R-11	R-0.0	0	90	X Existing	09-A2	1st Floor
Wall	Wood	153	0.110	R-11	R-0.0	90	90	X Removed	09-A2	1st Floor
Wall	Wood	32	0.110	R-11	R-0.0	90	90	X Existing	09-A2	1st Floor
Wall	Wood	322	0.110	R-11	R-0.0	180	90	X Existing	09-A2	1st Floor
Wall	Wood	250	0.110	R-11	R-0.0	270	90	X Existing	09-A2	1st Floor
Door	None	20	0.500	None	R-0.0	270	90	X Existing	28-A4	1st Floor
Roof	Wood	365	0.048	R-19	R-0.0	0	0	X Existing	01-A14	1st Floor
Wall	Wood	179	0.110	R-11	R-0.0	0	90	X Existing	09-A2	2nd Floor
Wall	Wood	198	0.110	R-11	R-0.0	90	90	X Existing	09-A2	2nd Floor
Wall	Wood	179	0.110	R-11	R-0.0	180	90	X Existing	09-A2	2nd Floor
Wall	Wood	187	0.110	R-11	R-0.0	270	90	X Existing	09-A2	2nd Floor
Roof	Wood	885	0.051	R-19	R-0.0	180	34	X Existing	02-A5	2nd Floor
Floor	Wood	290	0.037	R-19	R-0.0	0	180	X New	20-A4	1st Floor Addition
Wall	Wood	89	0.074	R-19	R-0.0	0	90	X New	09-A5	1st Floor Addition
Door	None	20	0.500	None	R-0.0	0	90	X New	28-A4	1st Floor Addition
Wall	Wood	176	0.074	R-19	R-0.0	90	90	X New	09-A5	1st Floor Addition
Wall	Wood	62	0.102	R-13	R-0.0	180	90	X New	09-A3	1st Floor Addition
Roof	Wood	300	0.032	R-30	R-0.0	0	0	X Existing	01-A17	1st Floor Addition

Run Initiation Time: 03/13/07 16:25:49

Run Code: 1173831949

EnergyPro 4.2 by EnergySoft

User Number: 1759

Job Number: 07T111

Page: 4 of 11

Certificate Of Compliance : Residential

(Part 2 of 3) CF-1R

Kirkham / Rossman Residence

3/13/2007

Project Title

Date

FENESTRATION SURFACES

#	Type	Area	U-Factor ¹	SHGC ²	True Azm.	Cond. Tilt	Stat. Glazing Type	Location/ Comments
1	Window Front (N)	20.0	0.580 116-A 0.65	116-B	0	90	Existing Double Non Metal Clear	1st Floor
2	Window Front (N)	12.3	0.580 116-A 0.65	116-B	0	90	Existing Double Non Metal Clear	1st Floor
3	Window Left (E)	66.0	0.580 116-A 0.65	116-B	90	90	Removed Double Non Metal Clear	1st Floor
4	Window Rear (S)	23.0	0.580 116-A 0.65	116-B	180	90	Existing Double Non Metal Clear	1st Floor
5	Window Rear (S)	84.0	0.580 116-A 0.65	116-B	180	90	Existing Double Non Metal Clear	1st Floor
6	Window Right (W)	23.0	0.580 116-A 0.65	116-B	270	90	Existing Double Non Metal Clear	1st Floor
7	Window Front (N)	8.6	0.580 116-A 0.65	116-B	0	90	Existing Double Non Metal Clear	2nd Floor
8	Window Left (E)	11.7	0.580 116-A 0.65	116-B	90	90	Existing Double Non Metal Clear	2nd Floor
9	Window Rear (S)	9.4	0.580 116-A 0.65	116-B	180	90	Existing Double Non Metal Clear	2nd Floor
10	Window Right (W)	23.0	0.580 116-A 0.65	116-B	270	90	Existing Double Non Metal Clear	2nd Floor
11	Window Left (E)	58.7	0.390 NFRC 0.37	NFRC	90	90	New Milgard Classic Low-E Vinyl	1st Floor Addition
12	Window Rear (S)	40.0	0.580 116-A 0.65	116-B	180	90	New Double Non Metal Clear	1st Floor Addition
13	Window Rear (S)	7.0	0.390 NFRC 0.37	NFRC	180	90	New Milgard Classic Low-E Vinyl	1st Floor Addition

1. Indicate source either from NFRC or Table 116A.

2. Indicate source either from NFRC or Table 116B.

INTERIOR AND EXTERIOR SHADING

#	Exterior Shade Type	SHGC	Window Hgt.	Wd.	Overhang Len.	Hgt.	L.Ext.	R.Ext.	Left Fin Dist.	Len.	Hgt.	Right Fin Dist.	Len.	Hgt.
1	Bug Screen	0.76												
2	Bug Screen	0.76	4.3	2.8	1.0	0.1	1.0	1.0						
3	Bug Screen	0.76												
4	Bug Screen	0.76												
5	Bug Screen	0.76	7.3	11.5	1.0	0.1	1.0	1.0						
6	Bug Screen	0.76	4.3	5.3	8.0	0.1	8.0	8.0						
7	Bug Screen	0.76	3.7	2.3	1.0	0.5	1.0	1.0						
8	Bug Screen	0.76												
9	Bug Screen	0.76	3.5	2.7	1.0	0.5	1.0	1.0						
10	Bug Screen	0.76												
11	Bug Screen	0.76												
12	Bug Screen	0.76												
13	Bug Screen	0.76	1.2	6.0	1.0	0.1	1.0	1.0						

THERMAL MASS FOR HIGH MASS DESIGN

Type	Area (sf)	Thick. (in.)	Heat Cap.	Inside Cond.	R-Val.	JA IV Reference	Condition Status	Location/ Comments

PERIMETER LOSSES

Type	Length	R-Val.	Insulation Location	JA IV Reference	Condition Status	Location/ Comments

Run Initiation Time: 03/13/07 16:25:49

Run Code: 1173831949

EnergyPro 4.2 by EnergySoft

User Number: 1759

Job Number: 071111

Page: 5 of 11

Certificate Of Compliance : Residential(Part 3 of 3) **CF-1R**

Kirkham / Rossman Residence

3/13/2007

Project Title

Date

HVAC SYSTEMS

Location	Heating Type	Minimum Eff	Cooling Type	Minimum Eff	Condition Status	Thermostat Type
Existing System	Central Furnace	75% AFUE	No Cooling	13.0 SEER	Existing	Setback
Addition System	Central Furnace	78% AFUE	No Cooling	13.0 SEER	New	Setback

HVAC DISTRIBUTION

Location	Heating	Cooling	Duct Location	Duct R-Value	Condition Status	Ducts Tested?
Existing System	Ducted	Ducted	Attic	4.2	Existing	No
Addition System	Ductless / No Fan	Ducted	Attic	4.2	New	No

Hydronic Piping System Name	Pipe Length	Pipe Diameter	Insul. Thick.

WATER HEATING SYSTEMS

System Name	Water Heater Type	Distribution	# in Syst.	Rated ¹ Input (Btu/hr)	Tank Cap. (gal)	Condition Status	Energy Factor or RE ¹	Standby ¹ Loss (%)	Tank Insul. R-Value Ext.
Standard Gas 50 gal or Less	Small Gas	No Pipe Insulation	1	40,000	50	Existing	0.57	n/a	n/a

Multi-Family Central Water Heating Details

Hot Water Pump			Hot Water Piping Length (ft)			Add 1/2" Insulation
Control	#	HP Type	In Plenum	Outside	Buried	

¹ For small gas storage (rated input <= 75000 Btu/hr), electric resistance and heat pump water heaters, list energy factor.
For large gas storage water heaters (rated input > 75000 Btu/hr), list Rated Input, Recovery Efficiency and Standby Loss.
For instantaneous gas water heaters, list Rated Input, and Recovery Efficiency.

REMARKS

Refer to Special features & Remarks page 7 for additional notes, specifications, and disclaimers of services provided by RaPiD Energy Compliance.

COMPLIANCE STATEMENT

This certificate of compliance lists the building features and specifications needed to comply with Title 24, Parts 1 and 6 of the California Code of Regulations, and the administrative regulations to implement them. This certificate has been signed by the individual with overall design responsibility. The undersigned recognizes that compliance using duct design, duct sealing, verification of refrigerant charge and TXVs, insulation installation quality, and building envelope sealing require installer testing and certification and field verification by an approved HERS rater.

Designer or Owner (per Business & Professions Code)

Name: _____
Title/Firm: Vincent Saunders & Associate
Address: 130 South Main Street, Suite 212
Sebastopol, CA 95472
Telephone: (707) 824-8149
Lic. # C-12692

(signature) *Vincent H. Saunders* (date) *03/23/07*

Enforcement Agency

Name: _____
Title/Firm: _____
Address: _____
Telephone: _____

Documentation Author

Name: Peter Ziedrich
Title/Firm: RaPiD Energy Compliance
Address: 9068 Brooks Road South
Windsor, CA 95492
Telephone: (707) 837-9836

(signature/stamp) *Peter Ziedrich* (date) *2007.03.13*
17:00:00 -07'00'

(signature/stamp) _____ (date) _____

Run Initiation Time: 03/13/07 16:25:49 Run Code: 1173831949

EnergyPro 4.2 by EnergySoft

User Number: 1759

Job Number: 07T111

Page: 6 of 11

HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

PROJECT NAME	Kirkham / Rossman Residence	DATE	3/13/2007
SYSTEM NAME	Existing System	FLOOR AREA	1,725

ENGINEERING CHECKS

Number of Systems	1
Heating System	
Output per System	53,000
Total Output (Btuh)	53,000
Output (Btuh/sqft)	30.7
Cooling System	
Output per System	0
Total Output (Btuh)	0
Total Output (Tons)	0.0
Total Output (Btuh/sqft)	0.0
Total Output (sqft/Ton)	0.0

Air System	
CFM per System	500
Airflow (cfm)	500
Airflow (cfm/sqft)	0.29
Airflow (cfm/Ton)	0.0
Outside Air (%)	0.0
Outside Air (cfm/sqft)	0.00

Note: values above given at ARI conditions

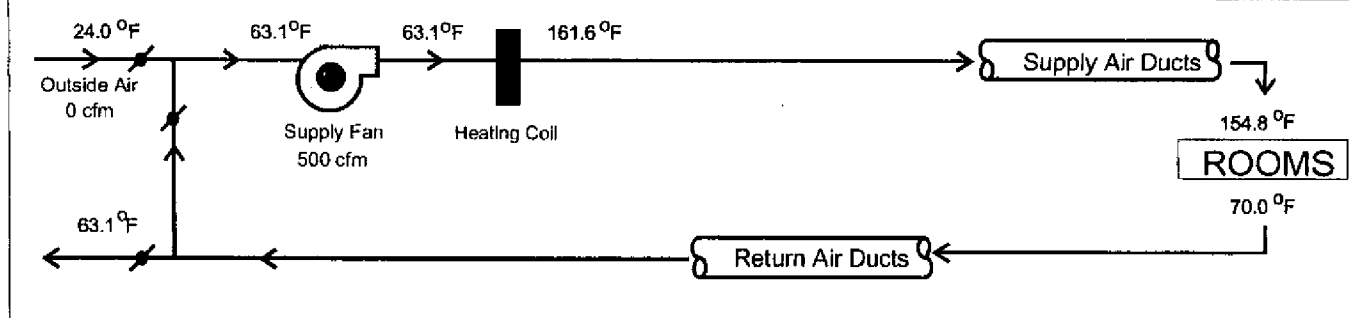
SYSTEM LOAD

	COIL COOLING PEAK			COIL HTG. PEAK	
	CFM	Sensible	Latent	CFM	Sensible
Total Room Loads	1,212	21,934	813	277	25,237
Return Vented Lighting		0			
Return Air Ducts		3,323			3,703
Return Fan		0			0
Ventilation	0	0	0	0	0
Supply Fan		0			0
Supply Air Ducts		3,323			3,703
TOTAL SYSTEM LOAD		28,580	813		32,642

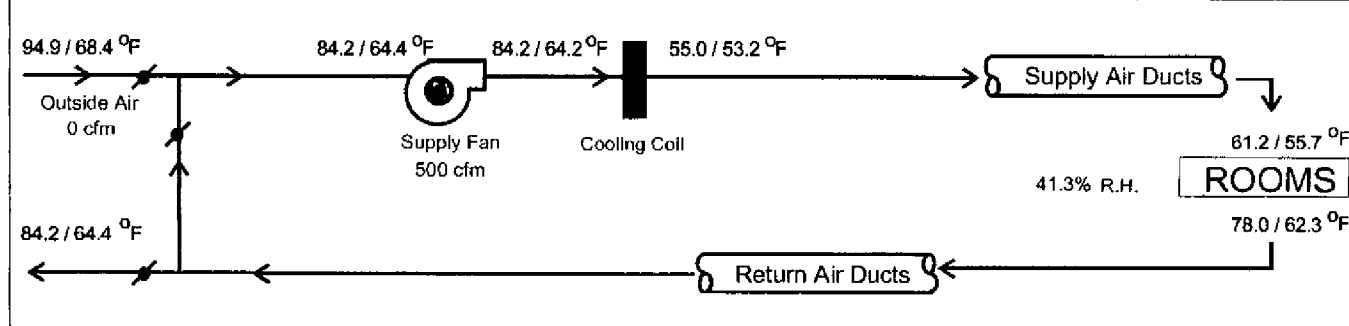
HVAC EQUIPMENT SELECTION

Exist 53k btuh FAU Pre-1978	0	0	53,000
Total Adjusted System Output (Adjusted for Peak Design Conditions)	0	0	53,000
TIME OF SYSTEM PEAK	Aug 2 pm	Jan 12 am	

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



HVAC SYSTEM HEATING AND COOLING LOADS SUMMARY

PROJECT NAME	Kirkham / Rossman Residence	DATE	3/13/2007
SYSTEM NAME	Addition System	FLOOR AREA	290

ENGINEERING CHECKS

Number of Systems	1
Heating System	
Output per System	30,000
Total Output (Btuh)	30,000
Output (Btuh/sqft)	103.4
Cooling System	
Output per System	0
Total Output (Btuh)	0
Total Output (Tons)	0.0
Total Output (Btuh/sqft)	0.0
Total Output (sqft/Ton)	0.0

Air System	
CFM per System	500
Airflow (cfm)	500
Airflow (cfm/sqft)	1.72
Airflow (cfm/Ton)	0.0
Outside Air (%)	0.0
Outside Air (cfm/sqft)	0.00

Note: values above given at ARI conditions

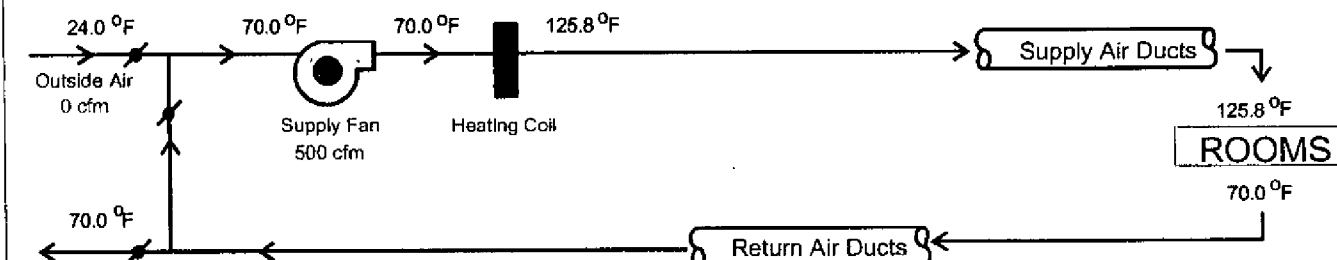
SYSTEM LOAD

	COIL COOLING PEAK			COIL HTG. PEAK	
	CFM	Sensible	Latent	CFM	Sensible
Total Room Loads	464	10,188	668	96	5,769
Return Vented Lighting		0			
Return Air Ducts		1,384			0
Return Fan		0			0
Ventilation	0	0	0	0	0
Supply Fan		0			0
Supply Air Ducts		1,384			0
TOTAL SYSTEM LOAD		12,956	668		5,769

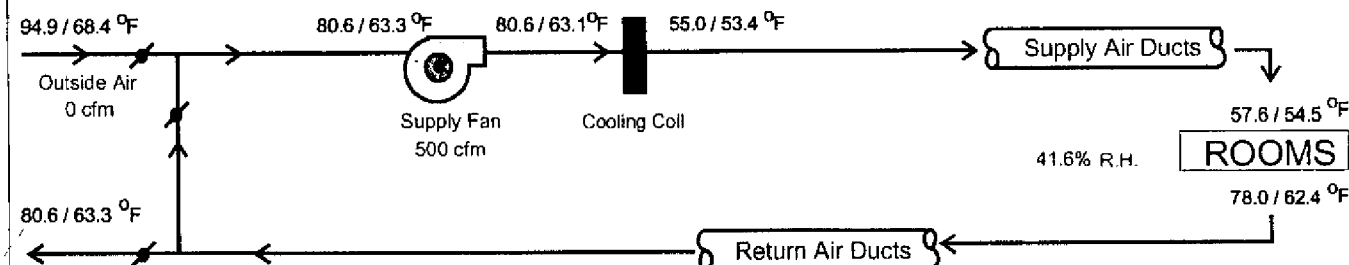
HVAC EQUIPMENT SELECTION

Wood Burning Stove / Fireplace	0	0	30,000
Total Adjusted System Output (Adjusted for Peak Design Conditions)	0	0	30,000
TIME OF SYSTEM PEAK	Aug 2 pm	Jan 12 am	

HEATING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Heating Peak)



COOLING SYSTEM PSYCHROMETRICS (Airstream Temperatures at Time of Cooling Peak)



Mandatory Measures Summary: Residential (Page 1 of 2)

MF-1R

NOTE: Lowrise residential buildings subject to the Standards must contain these measures regardless of the compliance approach used. More stringent compliance requirements from the Certificate of Compliance supercede the items marked with an asterisk (*) below. When this checklist is incorporated into the permit documents, the features noted shall be considered by all parties as minimum component performance specifications for the mandatory measures whether they are shown elsewhere in the documents or on this checklist only.

DESCRIPTION	Check or initial applicable boxes or check NA if not applicable and included with the permit application documentation.	N/A	DESIGNER	ENFORCEMENT
Building Envelope Measures				
* § 150(a): Minimum R-19 in wood ceiling insulation or equivalent U-factor in metal frame ceiling.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
§ 150(b): Loose fill insulation manufacturer's labeled R-Value: _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
* § 150(c): Minimum R-13 wall insulation in wood framed walls or equivalent U-factor in metal frame walls (does not apply to exterior mass walls).		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
* § 150(d): Minimum R-13 raised floor insulation in framed floors or equivalent U-factor.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
§ 150(e): Installation of Fireplaces, Decorative Gas Appliances and Gas Logs.				
1. Masonry and factory-built fireplaces have:				
a. closable metal or glass door covering the entire opening of the firebox		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. outside air intake with damper and control, flue damper and control		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. No continuous burning gas pilot lights allowed.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
§ 150(f): Air retarding wrap installed to comply with §151 meets requirements specified in the ACM Residential Manual.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
§ 150(g): Vapor barriers mandatory in Climate Zones 14 and 16 only.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
§ 150(i): Slab edge insulation - water absorption rate for the insulation alone without facings no greater than 0.3%, water vapor permeance rate no greater than 2.0 perm/inch.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
§ 118: Insulation specified or installed meets insulation installation quality standards. Indicate type and include CF-6R Form: _____		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
§ 116-17: Fenestration Products, Exterior Doors, and Infiltration/Exfiltration Controls.				
1. Doors and windows between conditioned and unconditioned spaces designed to limit air leakage.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Fenestration products (except field fabricated) have label with certified U-Factor, certified Solar Heat Gain Coefficient (SHGC), and infiltration certification.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3. Exterior doors and windows weatherstripped; all joints and penetrations caulked and sealed.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Space Conditioning, Water Heating and Plumbing System Measures				
§ 110-13: HVAC equipment, water heaters, showerheads and faucets certified by the Energy Commission.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
§ 150(h): Heating and/or cooling loads calculated in accordance with ASHRAE, SMACNA or ACCA.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
§ 150(i): Setback thermostat on all applicable heating and/or cooling systems.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
§ 150(j): Water system pipe and tank insulation and cooling systems line insulation.				
1. Storage gas water heaters rated with an Energy Factor less than 0.58 must be externally wrapped with insulation having an installed thermal resistance of R-12 or greater.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Back-up tanks for solar systems, unfired storage tanks, or other indirect hot water tanks have R-12 external insulation or R-16 internal insulation and indicated on the exterior of the tank showing the R-value.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The following piping is insulated according to Table 150-A/B or Equation 150-A Insulation Thickness:				
1. First 5 feet of hot and cold water pipes closest to water heater tank, non-recirculating systems, and entire length of recirculating sections of hot water pipes shall be insulated to Table 150B.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Cooling system piping (suction, chilled water, or brine lines), piping insulated between heating source and indirect hot water tank shall be insulated to Table 150-B and Equation 150-A.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Steam hydronic heating systems or hot water systems > 15 psi, meet requirements of Table 123-A.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Insulation must be protected from damage, including that due to sunlight, moisture, equipment maintenance, and wind.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Insulation for chilled water piping and refrigerant suction piping includes a vapor retardant or is enclosed entirely in conditioned space.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Solar water-heating systems/collectors are certified by the Solar Rating and Certification Corporation.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Mandatory Measures Summary: Residential (Page 2 of 2)

MF-1R

NOTE: Low-rise residential buildings subject to the Standards must contain these measures regardless of the compliance approach used. More stringent compliance requirements from the Certificate of Compliance supersede the items marked with an asterisk (*) below. When this checklist is incorporated into the permit documents, the features noted shall be considered by all parties as minimum component performance specifications for the mandatory measures whether they are shown elsewhere in the documents or on this checklist only.

DESCRIPTION	Instructions: Check or initial applicable boxes when completed or check N/A if not applicable.		ENFORCE-	
	N/A	DESIGNER	MENT	
Space Conditioning, Water Heating and Plumbing System Measures: (continued)				
§ 150(m): Ducts and Fans				
1. All ducts and plenums installed, sealed and insulated to meet the requirements of the CMC Sections 601, 602, 603, 604, 605, and Standard 6-5; supply-air and return-air ducts and plenums are insulated to a minimum installed level of R-4.2 or enclosed entirely in conditioned space. Openings shall be sealed with mastic, tape or other duct-closure system that meets the applicable requirements of UL 181, UL 181A, or UL 181B or aerosol sealant that meets the requirements of UL 723. If mastic or tape is used to seal openings greater than 1/4 inch, the combination of mastic and either mesh or tape shall be used.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Building cavities, support platforms for air handlers, and plenums defined or constructed with materials other than sealed sheet metal, duct board or flexible duct shall not be used for conveying conditioned air. Building cavities and support platforms may contain ducts. Ducts installed in cavities and support platforms shall not be compressed to cause reductions in the cross-sectional area of the ducts.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Joints and seams of duct systems and their components shall not be sealed with cloth back rubber adhesive duct tapes unless such tape is used in combination with mastic and draw bands.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Exhaust fan systems have back draft or automatic dampers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5. Gravity ventilating systems serving conditioned space have either automatic or readily accessible, manually operating dampers.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6. Protection of Insulation. Insulation shall be protected from damage, including that due to sunlight, moisture, equipment maintenance, and wind. Cellular foam insulation shall be protected as above or painted with a coating that is water retardant and provides shielding from solar radiation that can cause degradation of the material.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7. Flexible ducts cannot have porous inner cores.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
§ 114: Pool and Spa Heating Systems and Equipment				
1. A thermal efficiency that complies with the Appliance Efficiency Regulations, on-off switch mounted outside of the heater, weatherproof operating instructions, no electric resistance heating and no pilot light.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. System is installed with:				
a. At least 36" of pipe between filter and heater for future solar heating.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
b. Cover for outdoor pools or outdoor spas.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Pool system has directional inlets and a circulation pump time switch.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
§ 115: Gas fired fan-type central furnaces, pool heaters, spa heaters or household cooking appliances have no continuously burning pilot light. (Exception: Non-electrical cooking appliances with pilot < 150 Btu/hr)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
§ 118 (i): Cool-Roof material meets specified criteria	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Lighting Measures				
§ 150(k)1: HIGH EFFICACY LUMINAIRES OTHER THAN OUTDOOR HID: contain only high efficacy lamps as outlined in Table 150-C, and do not contain a medium screw base socket (E24/E26). Ballasts for lamps 13 Watts or greater are electric and have an output frequency no less than 20 kHz.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
§ 150(k)1: HIGH EFFICACY LUMINAIRES - OUTDOOR HID: contain only high efficacy lamps as outlined in Table 150-C, luminaire has factory installed HID ballast.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
§ 150(k)2: Permanently installed luminaires in kitchens shall be high efficacy luminaires. Up to 50% of the Wattage, as determined in Section 130(c), of permanently installed luminaires in kitchens may be in luminaires that are not high efficacy luminaires, provided that these luminaires are controlled by switches separate from those controlling the high efficacy luminaires.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
§ 150(k)3: Permanently installed luminaires in bathrooms, garages, laundry rooms, utility rooms shall be high efficacy luminaires. OR are controlled by an occupant sensor(s) certified to comply with Section 119(d).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
§ 150(k)4: Permanently installed luminaires located other than in kitchens, bathrooms, garages, laundry rooms, and utility rooms shall be high efficacy luminaires (except closets less than 70 ft) OR are controlled by a dimmer switch OR are controlled by an occupant sensor that complies with Section 119(d) that does not turn on automatically or have an always on option.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
§ 150(k)5: Luminaires that are recessed into insulated ceilings are approved for zero clearance insulation cover (IC) and are certified to ASTM E283 and labeled as air tight (AT) to less than 2.0 CFM at 75 Pascals.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
§ 150(k)6: Luminaires providing outdoor lighting and permanently mounted to a residential building or to other buildings on the same lot shall be high efficacy luminaires (not including lighting around swimming pools/water features or other Article 680 locations) OR are controlled by occupant sensors with integral photo control certified to comply with Section 119(d).	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
§ 150(k)7: Lighting for parking lots for 8 or more vehicles shall have lighting that complies with Sections 130, 132, and 147. Lighting for parking garages for 8 or more vehicles shall have lighting that complies with Section 130, 131, and 146.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
§ 150(k)8: Permanently installed lighting in the enclosed, non-dwelling spaces of low-rise residential buildings with four or more dwelling units shall be high efficacy luminaires OR are controlled by occupant sensor(s) certified to comply with Section 119(d).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Percentage of Remodel Improvement Determination Worksheet

WLS-029

Purpose: This worksheet is intended to be used with the Permit & Resource Management Department (PRMD) Policy 9-2-29, Percentage of Remodel Improvement Determination. Please refer to the calculation method illustration in the policy. This policy is required to determine if a proposed remodel and/or addition complies with PRMD Policy 9-2-12, Guidelines for Remodeling and Additions with Respect to Septic Systems.

I. Calculate existing linear footage of all walls in habitable areas.

A. Walls between floors, or between floors and ceilings or roofs shall be considered as separate walls.

- | | |
|--------------------------------------|-----------------|
| 1. First Floor | <u>252'</u> |
| 2. Second Floor, if applicable | <u>188'</u> |
| 3. Third Floor, if applicable | <u> </u> |

Total linear footage of existing walls

	<u>440'</u>
--	-------------

B. Exterior foundations of all types, and continuous interior foundations, shall be considered as walls. (Cripple walls are considered part of the foundation.)

- | | |
|--|-------------|
| 1. Exterior Foundation | <u>144'</u> |
| 2. Interior Foundations, if applicable | <u>48'</u> |

Total linear footage of existing foundation

	<u> </u>
--	-----------------

C. Roofs and gable ends shall be considered as a wall above the wall to which they connect. (Dormers and overhangs are not part of the calculation.)

- | | |
|--------------------------------|-------------|
| 1. Roof | <u>160'</u> |
| 2. Gables, if applicable | <u>48'</u> |

Total linear footage of existing roof

	<u>208'</u>
--	-------------

D. Add totals of A, B & C above.

Total linear footage of structure

	<u>696'</u>
--	-------------

II. Calculate the linear footage of all removed, added, reconstructed and altered walls.

A. Walls

- | | |
|--------------------------------------|-----------------|
| 1. First Floor | <u>104'</u> |
| 2. Second Floor, if applicable | <u> </u> |
| 3. Third Floor, if applicable | <u> </u> |

Total linear footage of walls

	<u>104'</u>
--	-------------

B. Foundation

- | | |
|---|-----------------|
| 1. Demolition/removal of foundation | <u> </u> |
| 2. New or repaired foundation | <u>62'</u> |

Total linear footage of foundation

	<u>62'</u>
--	------------

Sonoma County Permit and Resource Management Department

2550 Ventura Avenue ♦ Santa Rosa, CA ♦ 95403-2829 ♦ (707) 565-1900 ♦ Fax (707) 565-1103

C. Roof

1. Demolition/removal of roof framing 60'
2. Linear footage of new or repaired roof 80'
Total linear footage of altered roof 140'

D. Add totals of A, B & C above.

Total altered linear footage of structure 306'

III. Calculate the percentage of remodel improvement, if applicable

Total altered linear footage of structure 60'
Divide by total linear footage of existing structure + ~~696'~~ 696'

Equals total percent of remodel improvement ~~8.6%~~ 8.6% 8.6%

IV. Calculate the percentage of additions, if applicable

Square footage of addition 290
Divide by square footage of existing structure + 1896

Equals total percent of addition ~~0.15%~~ 15.3%

V. Calculate the percentage of remodel improvement and addition.

Percentage of Remodel Improvement 0.086
Add Percentage of Addition 0.150

Equals total percent of remodel improvement ~~0.236%~~ 23.6%

VI. Calculate the percentage of remodel improvement of all building permits in the past 24 months (based on the date of "issuance" of the initial building permit).

Percentage Improvement:

Bld NA
Bld NA
Bld NA
Bld NA

Equals total percent of all building permit improvements

VII. Calculate the proposed total percentage of improvement.

Total percent of remodel improvement (V) ~~0.236%~~ 23.6%
Add total percent of all building permit improvements (VI)

Proposed total percent of improvement

Grading Permit Questionnaire

BPC-017

Purpose: This form is used to determine if your project requires a grading permit in addition to a building permit. Grading is defined in Appendix Chapter 33 of the 2001 California Building Code (CBC) as "any excavating or filling or combination thereof." Grading can take the form of excavating and/or filling for foundations of structures, driveway construction and modification of topography. No person shall commence any grading without first having obtained a grading permit unless exempt as determined by the Permit and Resource Management Department (PRMD).

To determine if your project requires a grading permit, please answer the following questions. If you are unable to answer any questions, you should contact your design professional for assistance and/or consult with a PRMD plans examiner. **Incorrect answers may cause delays processing and/or issuing the permit(s) for your project.**

- ☐ Yes ☒ No ☐ Unknown 1. Does the project include a fill of 6 inches or more within the Flood Prone Urban Area? See map on reverse side of this form for the location of the Flood Prone Urban Area.
- ☐ Yes ☒ No ☐ Unknown 2. Does the project include a fill 1 foot or more in depth **and** placed on natural terrain with a slope steeper than 1 unit vertical in 5 units horizontal?
- ☐ Yes ☒ No ☐ Unknown 3. Does the project include a fill 3 feet or more in depth?
- ☐ Yes ☒ No ☐ Unknown 4. Does the project include an excavation that (1) is 2 feet or more in depth **or** (2) creates a cut slope greater than 5 feet in height and steeper than 1 unit vertical in 1 ½ units horizontal that is not an excavation below finished grade for a basement, footing, retaining wall or other structure authorized by a valid building permit?
- ☐ Yes ☒ No ☐ Unknown 5. Does the project include a fill that is intended to support structures?
- ☐ Yes ☒ No ☐ Unknown 6. Does the project include a fill that exceeds 50 cubic yards on any one lot?
- ☐ Yes ☒ No ☐ Unknown 7. Does the project include the construction of a driveway that exceeds 122 feet in length?
- ☐ Yes ☒ No ☐ Unknown 8. Does the project include an excavation or fill that alters or obstructs a drainage course?

Acknowledgment:

I, as the applicant, understand that a "Yes" answer to **any** of the above questions means that a grading permit is required and shall be obtained before issuance of a building permit for the site. If any answers are "Unknown" to me, I should contact my design professional immediately to determine if a grading permit is required.

Vincent D. Saunders
Applicant Signature

VINCENT D. SAUNDERS
Applicant Printed Name

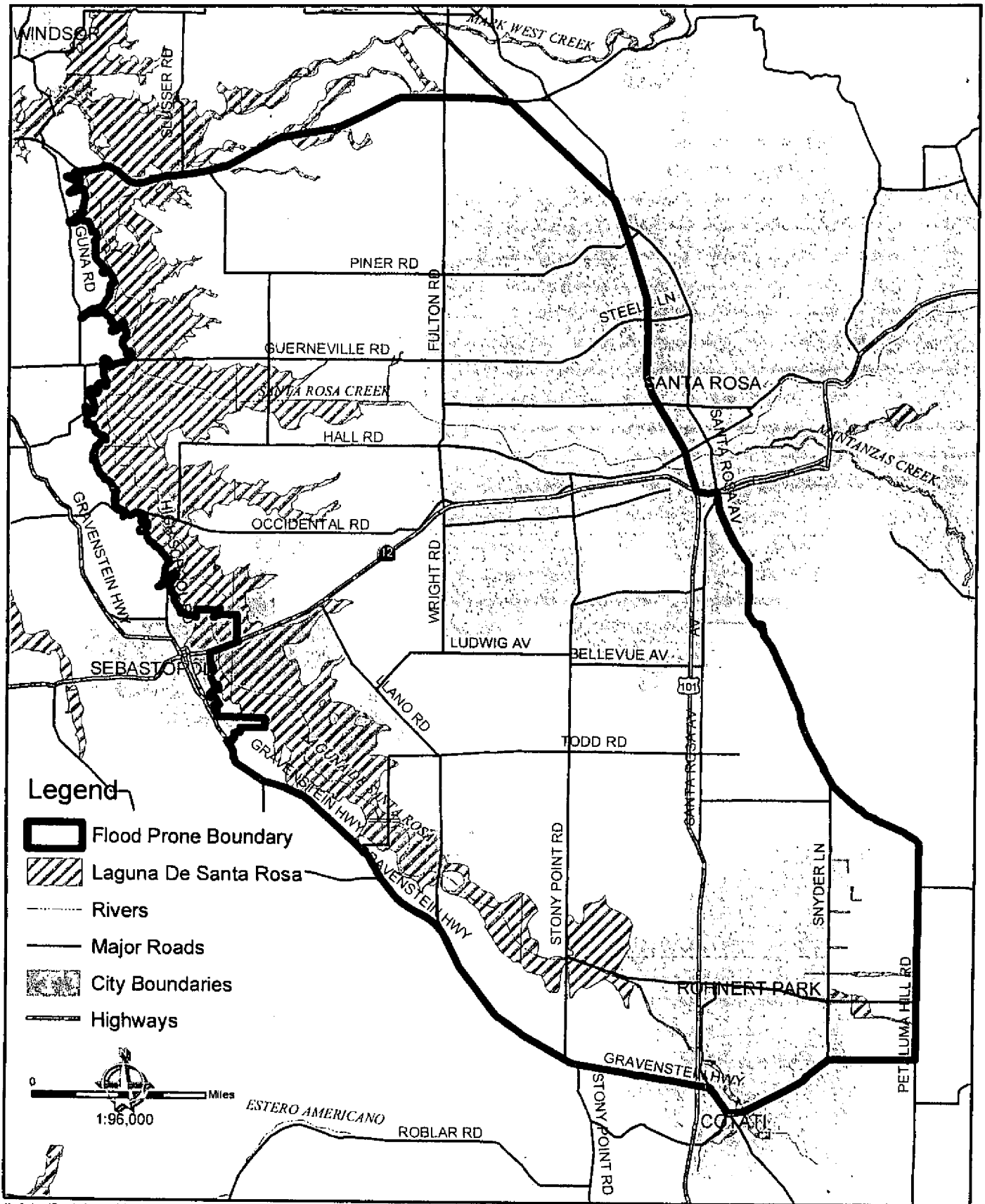
073-021-030
Assessor's Parcel Number(s)

27 March, 2007
Date

425 Bohemian Hwy, Freestone
Property Address

Bldg 07-1415
Building Permit (BLD) Number

Flood Prone Area



Sonoma County

Permit and Resource Management Department

Printed on Recycled Paper
G-10

2550 Ventura Avenue, Santa Rosa, California 95403
707-565-1900 FAX 707-565-1103



FOR INTERNAL USE ONLY

Address: 425 Bohemian

BUD 07-1415
P.C.# 06

Inspector: kn

Date: 4/9/07

The proposed construction appears to be located in:

Flood Hazard:

- | | |
|---|---|
| <input type="checkbox"/> FIRM Flood Zone (ASFH) BFE = _____ ft. NGVD. | <input type="checkbox"/> Portions of property in flood zone but project site not in flood zone. |
| Lowest finish floor at 12 above BFE = _____ ft. NGVD. | |
| <input type="checkbox"/> Design for moving water is recommended | <input type="checkbox"/> Building is in FIRM Floodway |
| Section _____ is _____ Ft/sec | <input type="checkbox"/> Main building on site is Post-FIRM |
| Section _____ is _____ Ft/sec | <input type="checkbox"/> Sensitive drainage area, review by drainage section recommended. |
| <input type="checkbox"/> Area subject to flooding (not on adopted FIRM). | <input type="checkbox"/> Appears to be a "substantial improvement" (40%), therefore flood regulations apply. |
| <input type="checkbox"/> Project is on flood zone major damage list. | <input type="checkbox"/> Located inside the <i>Laguna de Santa Rosa</i> below elevation of 75 ft (Ord.#4906). |
| <input type="checkbox"/> Flood Prone Urban Area defined by Ordinance #4906. | |

Geo-technical:

- | | |
|---|---|
| <input type="checkbox"/> Area of suspected slides, slumps, earth flow, or soil creep. (a.) | <input type="checkbox"/> Area without recommended setback from stream (Drainage Division recommendations). |
| <input type="checkbox"/> Area of previous fill placement. (g.) | <input type="checkbox"/> Area of high moisture content in soil. (f.) |
| <input type="checkbox"/> Area of suspected expansive soil. (c.) | <input type="checkbox"/> Area subject to high erosion (water or wind). |
| <input type="checkbox"/> Area without sufficient slope setback as set forth in UBC Section 1806. (b.) | <input type="checkbox"/> Area of soft soil due to past deep ripping or cultivation below minimum foundation depth. (h.) |
| <input type="checkbox"/> Area subject to possible liquefaction. (e.) | <input type="checkbox"/> Area within 1000 feet of a solid waste disposal site. |
| <input type="checkbox"/> Area of suspected soft, compressible, or organic soil with low bearing capacity. | |
- Soils Investigation: Required ☐ Included ☐ Available ☐

Geologic:

- | | |
|--|---|
| <input type="checkbox"/> Located in the Alquist-Priolo Special Studies Zone. | <input type="checkbox"/> Geologic report required (see CGS Publication 42). |
|--|---|

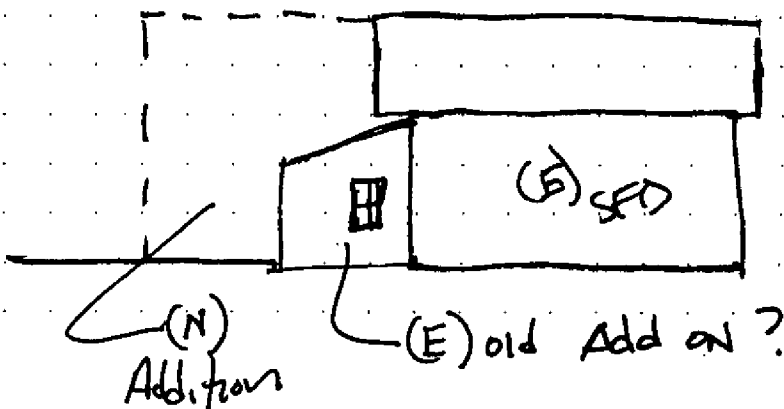
General:

- | | |
|--|--|
| <input type="checkbox"/> Building addition will affect the required light and ventilation in an existing room. | <input type="checkbox"/> Indications of existing substandard conditions that are not addressed by the proposed construction. |
| <input type="checkbox"/> Existing electric meter must be replaced. | <input type="checkbox"/> Indications of past work done without a permit. |
| <input type="checkbox"/> Existing gas meter must be replaced. | <input type="checkbox"/> Grading permit required for road, driveway, or site preparation. |
| Slope is <u>FLAT</u> | <input checked="" type="checkbox"/> Site is likely to be acceptable for conventional construction methods. |

Wind:

Exposure "B" Exposure "C" Exposure "D" N.S.C. Air Pollution Control District ☐ Yes ☐ No

- ① old shed roof area to be demo'd?
- ② (E) 1 car garage
- ③ (E) SPD in good shape



RETAIN

SCHOOL DISTRICT CERTIFICATION OF COMPLIANCE

Bcd07-1415

RETURN TO: Permit and Resource Management, County of Sonoma, 2550 Ventura Avenue, Santa Rosa, CA 95403

FROM: High School District _____ Elementary District Harmony

Proof of school development fee payment must be provided to Permit and Resource Management Department prior to permit issuance.

It is best to pay the school development fees after notification that the plan check is complete and the square footage is verified.

To be completed by applicant for building permit(s) and verified by Permit and Resource Management, County of Sonoma.

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

PROJECT ADDRESS 425 Bohemian Hwy

PROPERTY OWNER'S NAME _____

If applicable: Mobilehome Park Name _____ Lot/Space No. _____

ASSESSOR'S PARCEL NO. 073-120 030

PROJECT DESCRIPTION: Include number of dwelling units. If agriculture, 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.

SFD Addition

Building Type: ☒ Residential ☐ Commercial/Industrial ☐ Mobilehome/Manufactured Home

Square footage breakdown per residential unit: residential area* 2900

Total No. of residential units 1 Total Square Fee of Eligible Building Area*: 2900

I declare under penalty of perjury under the laws of the State of California on behalf of _____

Developer/Owner

and that the information furnished above is accurate and correct to the best of my knowledge.

Applicant's Signature

The County of Sonoma (Permit and Resource Management) on March 27, 2007 has verified the square footage and use information furnished by the above developer.

County of Sonoma Signature C. Cernutter

- * **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 service, such as health care.
- * **Commercial/Industrial Area 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** includes 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 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):

Ed. Code 17620FEES 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. _____ HIGH SCHOOL DISTRICT recpt. no. _____

Square footage: _____ at \$ _____ sq.ft. Square footage: 290 at \$ 0 sq.ft.

Total Fee Amount Collected: \$ _____ Total Fee Amount Collected: \$ 0

Authorized School District Official _____ Signature _____

Date: _____ Date: 6/1/07

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 Education Code Section 17620 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

se Print Name: _____ Date Applied: _____

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Address: 425 Bohemian Hwy. City: Freestone ZIP: 95472

S-Street: Bodega Hwy. APN 073-120-030 Project Phone #: 707 844-2897 Project Fax #: _____

Subd. Name: _____ Unit #: _____ Lot #: _____

Living Area: 290 sq. ft. Contract Price: \$187,000

Garage: 117 sq. ft.

Decks: _____

Structure: Single storey addition to 2-storey structure

Owner Name and Address: _____

Applicant Name and Address: _____

Name: Saunders & Associate

Mailing Address: 130 S. Main St., Suite 212

City: Sebastopol State: CA ZIP: 95472

Day Phone: 707 824-8149 Fax: 707 824-9735

Other Persons (Architect, Engineer, etc.): _____

CONTRACTOR INFORMATION

Company Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Day Phone: _____ Fax: _____

License No.: C12602 Exp. Date: 10/07

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

I am not the owner of the property and I am not the contractor for the work for which this permit is issued, and I am not the employer of the worker for which this permit is issued, and I am not the person who is performing 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:

This section need not be completed if the permit is for one hundred dollars (\$100) or less.

I, the owner of the property, am not the contractor for the work for which this permit is issued, and I am not the employer of the worker for which this permit is issued, and I am not the person who is performing the work for which this permit is issued.

Date: _____ Applicant: _____

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND I 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.

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury 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 or she is licensed pursuant to 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 or she is exempt therefrom and the basis for the 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).

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 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.

As owner of the property, I 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 project.

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.

Class: _____ Lic. No.: _____

Date: _____ Contractor: _____

ASBESTOS DECLARATION

I hereby affirm under penalty of perjury that I am not the owner of the property and I am not the contractor for the work for which this permit is issued, and I am not the person who is performing the work for which this permit is issued.

I hereby affirm under penalty of perjury that I have read this application and affirm under penalty of perjury that the above information is true and correct. I agree to comply with all local Ordinances and State laws relating to building construction. I authorize representatives of the County of Sonoma to enter upon the above-mentioned property for inspection purposes. If, after making the Certificate of Exemption for the Worker's compensation provision of the Labor Code I should become subject to such provisions, I will forthwith comply. In the event I do not comply with the Workman's Compensation law, this permit shall be void and revoked.

MITTEE SIGNATURE

425 BOHEMIAN HIGHWAY FREESTONE

CITY: Freestone ZIP: 95472

Contractor: X Owner ☐ Other Licensed Professional ☐

Date: 5-5-08 Inspector: Peter

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

CONSTRUCTION LENDING DECLARATION

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: _____

RC HD FOR DEPARTMENT USE

Zoning: RC HD 3R File No.: _____ Acres: _____

Existing Use/Structures: SEB

Proposed Use/Structures: SEB

Zoning Min. Yard Requirements: Front 20' Left 5' Right 5' Back 20'

NOTE: Fire Safe Standards require all parcels greater than 1 Acre to have a min. 30' setback unless mitigated. ☐ Mitigation Required ☐ Address subject to change

Approval for Permit Issuance: _____

By: _____ Date: 3/27/07

Conditions: _____

HD Landmark approved 1/10/07

Sewer Connection: ☐ Available ☐ Fees Paid

Approved by: _____ Date: _____

Road Encroachment: ☐ Fees Paid N/R - Paved entry.

Approved by: C. Ozanich Date: 05/27/2007

Septic System Permit/Clearance # _____

Approved by: C. Bannard Date: 3/27/07

Flood Zone: ☐ Yes ☒ No 100 Year Flood Elevation: _____

Site Review _____

Drainage Review: None Date: 3/28/07

Fire: _____

Approved by: _____ Date: _____

Code Enforcement Violation ☐ Yes ☒ No Violation # _____

This permit is limited to _____ days.

Work Authorized: ADDITION REMODEL

Plans Approved

☒ No Plans Subject to Field Inspection ☐ Post FIRM ☐ Alquist Priolo Report Available

☐ Pre FIRM ☐ Geotechnical report Available

Plans Check: P. Mullin Date: 5-31-07 Type of Construction: V-T R-3 No. of Stories: 2

Permit Checked for Issuance By: Regina Date: 6/1/07 Auto. Fire Sprinklers Req'd: NO No. of Units: 1 Certificate of Occupancy: _____

Machine Space for Permit Fee: MB

Distribution: white - File - Canary - Applicant - Pink - Audit Copy - Blue - Assessor - Cards/ack - Inspector

JOB ADDRESS: 425 Bohemian Hwy

PERMIT NUMBER: BD07-1415

INSPECTION AREA: 7

SPECIAL INSPECTION REQUIRED		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, SEE ADDITIONAL SHEET
INSPECTION RECORD	DATE	NAME	REMARKS	
101) ROUGH GRADING	6/4/07	CM	SFD Add + Remodel	
103) FOUNDATION				
FORMS/SETBACK				
FOOTING				
WALLS				
106) UFER GROUND #				
104) CAISSONS/PIERS				
105) SLAB				
107) UNDERGROUND UTILITIES				
110) MASONRY				
109) RETAINING WALLS				
113) FIREPLACE				
FOOTING				
HEARTH/PROTECTION				
THROAT				
114) CHIMNEY				
120) UNDERFLOOR/UNDERSLAB	6-17-07	RP		
115) HYDRONICS				
116) U/F ELECTRICAL				
117) U/F MECHANICAL				
118) U/F PLUMBING				
119) U/F FRAMING				
139) U/F INSULATION				
126) SHEAR WALLS	7-26-07	RP	SFD JOB CADD	
<input type="checkbox"/> INTERIOR <input type="checkbox"/> EXTERIOR				
127) DIAPHRAGMS	7-26-07	RP	" " "	
<input type="checkbox"/> ROOF <input type="checkbox"/> FLOOR				
134) SIDING/SHEATHING				
125) HOLD DOWNS	7-26-07	RP	SFD JOB CADD	
132) CLOSE-IN	7-27-07	RP		
122) ROUGH ELECTRICAL				
123) ROUGH MECHANICAL				
124) ROUGH PLUMBING	7-27-07	RP		
128) ROUGH FRAME				
160) SMOKE DETECTORS				
139) INSULATION				
142) WALLBOARD	8-3-07	RP		
143) FIREWALLS				
135) STUCCO/PLASTER				
<input type="checkbox"/> LATH <input type="checkbox"/> SCRATCH				
137) ROOFING				
130) TUB/SHOWER PAN				
162) FIRE DAMPERS/DOORS				
164) SUSPENDED CEILING				
<input type="checkbox"/> ROUGH ELEC. <input type="checkbox"/> ROUGH MECH.				
165) EXITING - RAMPS/STAIRS				
163) HANDRAILS/GUARDRAILS				
CORRIDORS/DOORS				
166) ACCESSIBILITY COMPLIANCE			650) SUSMP INSPECTION	
144) WATER TANKS			651) NPDES EROSION COMPLIANCE	
<input type="checkbox"/> SLAB <input type="checkbox"/> WALLS			652) NPDES SEDIMENT COMPLIANCE	
170) TEMPORARY OCCUPANCY			653) NPDES DOCS/SWPPP	
171) TEMPORARY ELECTRICAL			FIRE INSPECTION REQUIRED	
172) TEMPORARY GAS			DATE	
174) ELECTRIC METER AUTHORIZATION			NAME	
152) PANEL BOARDS/SERVICE			<input type="checkbox"/> Yes <input type="checkbox"/> No	
189) SEPTIC ELECTRIC FINAL			759) KNOX BOX	
175) GAS METER AUTHORIZATION			760) PROPANE TANK HOLD DOWNS	
153) GAS PRESSURE TEST			770) SPRINKLER FINAL	
HOUSE YARD			771) ABOVEGROUND HYDROSTATIC	
190) MANUF. HOME FOUNDATION			772) UNDERGROUND HYDROSTATIC	
191) MANUF. HOME INSTALLATION			773) UNDERGROUND FLUSH	
CONTINUITY			774) THRUST BLOCKS	
STAIRS/SKIRTS			775) PIPE WELD	
RIDGE BOLTING			776) HYDRANTS/APPLIANCES	
193) MANUF. HOME COND. FINAL			777) PUMP ACCEPTANCE	
SWIMMING POOLS			778) WATER SUPPLY/TANK	
194) PRE-GUNITE			779) ALARM SYSTEM	
195) PRE-DECK			780) HOOD & DUCT SYSTEM	
196) PRE-PLASTER/FENCE			781) ABOVEGROUND TANK/DISPENSER	
197) VINYL/FIBERGLASS POOL EXCAVATION			198) FIRE FINAL	
102) GRADING FINAL			CLEARANCES:	
176) ELECTRICAL FINAL	7-5-08	RP	FIRE <input type="checkbox"/> Local <input type="checkbox"/> County	
177) MECHANICAL FINAL			HEALTH DEPARTMENT	
178) PLUMBING FINAL			ZONING	
199) FINAL	5-5-08	RP	SANITATION	
OCCUPANCY (OK TO OCCUPY)			PLAN RETENTION REQUIRED?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

PERMIT # 25007-145