

B

Type

Docs

Plans

BLD09-2119

Building Permit Number

11062

Street Number

GRATON RD

Street Name

GRA

Community Code

104-090-036

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 Permit Invoice: BLD09-2119

Project Address: 11062 GRATON RD GRA
Cross Street: HWY 116

APN: 104-090-036
Description: ELEC UPGRADE TO SERVE WELL- 200 AMPS
Res/Com: R
Std/Quick: ??
Fire District: GRATON FIRE GENERAL

Printed: June 04, 2009
Initialized by: RDELACR1
Activity Type: A-BLD 801
Insp Area: 04
Site Review File #: ??
Site Review Fees Paid: \$0.00

Owner: MENGLE REVERE HOLMES III ET AL
C/O CATHERINE YOUNGER
122 WINTERSTEIN DR
FOLSOM CA 95630

Applicant: GEORGE DUTTON/AUTH AGENT
115 FOSS CREEK CIRCLE
HEALDSBURG CA 95448
707-431-2652

Valuation:

Occupancy	Type	Factor	Sq Feet	Valuation
	Totals...			\$0.00*

Fees:

Item#	Description	Account Code	Tot Fee	Prev. Pmts	Cur. Pmts
122	ELECTRICAL FEE	025015-1341	67.00	.00	.00
140	TECH ENHANCE FEE	025015-4040	.67	.00	.00
			\$67.67	\$0.00	

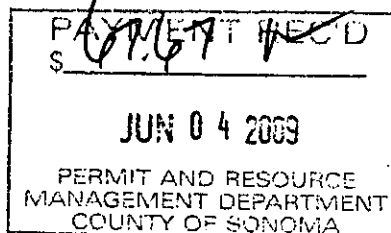
Total Fees: \$67.67

Total Paid: \$0.00

Balance Due: \$67.67

"Refunds of fees paid may be made pursuant to Section 108.6 of Appendix 1 of the California Building Code and adopted model codes, subject to the following: 1) 100% of a fee erroneously paid or collected. 2) 90% of the plan review fee when an application for a permit is withdrawn or canceled or expires or becomes void before any plan review effort has been expended. No portion of the plan review fee shall be refunded when any plan review effort has been expended. 3) 90% of the building, plumbing, electrical, and/or mechanical fee may be refunded when a permit is withdrawn, or cancelled or expires or becomes void before any work was done and before any inspections are performed. No portion of these fees shall be refunded when any work was done and/or any inspections have been performed. 4) Application for refund must be made within one year of the date the fee is paid."

When validated below, this is your receipt.
This Building Permit shall EXPIRE



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:

GEORGE R. VINTON

Date
Applied:

6/4/09

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

Site Address: 11062 GINTON RD		City: SEBASTO		ZIP: 95472	
Cross-Street: Hwy 116	APN:	Project Phone #:	Project Fax #:		
Directions: Hwy 116 → Ginton Rd	Email address:	Unit #	Lot #		
Describe Project: ELECTRICAL UPGRADE TO SERVE WELL 200 AMPS			Living Area		Contract Price:
			Garage		
			Decks		

OWNER NAME AND ADDRESS			APPLICANT NAME AND ADDRESS		
Name: R. MENDEZ			Name: GEORGE R. VINTON		
Mailing Address: 122 WINDENSTEIN DR			Mailing Address: 115 7088 WALKER		
City: SEBASTO	State: CA	ZIP: 95450	City: Sebastopol	State: CA	ZIP: 95472
Day Ph: ()	Fax: ()		Day Ph: () 431-2652	Fax: () 431-2659	

CONTRACTOR INFORMATION			OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)		
Company Name:			Name:		
Address:			Address:		
City:	State:	ZIP:	City:	State:	ZIP:
Day Ph: ()	Fax: ()		Day Ph: ()	Fax: ()	

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:
☐ I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.
☐ I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:

Carrier _____
 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: _____

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 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 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 or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044 Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he or she did not build or improve for the purpose of sale.).

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

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

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

Date: 6/4/09 Signature of Owner, Builder or Authorized Agent: _____

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.

Lic. Class _____ Lic. No. _____

Exp. Date _____ Contractor _____

ASBESTOS DECLARATION

Written asbestos notification pursuant to Part 61 of Title 40 of the Code of Federal Regulations is required when asbestos exists in buildings, or portions thereof, undergoing demolition. I hereby declare that demolition authorized by this permit is from construction that ☐ does ☒ does not contain asbestos, or that no demolition is authorized by this permit.

I certify that I have read this application and affirm under penalty of perjury that the above information is correct. I agree to comply with all local Ordinances and State laws relating to building construction. I hereby 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 Worker's Compensation law, this permit shall be deemed revoked.

PERMITTEE SIGNATURE: _____
 ADDRESS: 115 7088 WALKER SEBASTO CA 95472
☐ Contractor ☐ Owner ☒ Other Licensed Professional

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 _____

FOR DEPARTMENT USE

Zoning _____ File No. _____ Acres _____

Existing Use/Structures _____

Proposed Use/Structures _____

Zoning Min. Yard Requirements: Front _____ Left _____ Right _____ Back _____

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: _____ Approval for Occupancy: _____

By: _____ By: _____

Date: _____ Date: _____

Conditions: _____

JOB ADDRESS:

11062 GINTON RD SEBASTO

PERMIT NUMBER:

B1009-2119

INSPECTION AREA:

4

<input type="checkbox"/> Plans Approved		<input type="checkbox"/> Post FIRM		<input type="checkbox"/> Alquist Priolo Report Available	
<input checked="" type="checkbox"/> No Plans Subject to Field Inspection		<input type="checkbox"/> Pre FIRM		<input type="checkbox"/> Geotechnical report Available	
Plancheck Cleared By	Date:	Type of Construction	Occupancy	No. of Stories	No. of Bedrooms
Permit Cleared for Insurance By	Date:	Auto. Fire Sprinklers Req'd	No. of Units	Certificate of Occupancy	
PAYMENT MADE \$ _____ JUN 04 2009 PERMIT AND RESOURCE MANAGEMENT DEPARTMENT COUNTY OF SONOMA					

Distribution: White - File Canary - Applicant Blue - Assessor Cardstock - Inspector

131)	SPECIAL INSPECTION REQUIRED		<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, SEE ADDITIONAL SHEET		
	INSPECTION RECORD	DATE	NAME	REMARKS			
101)	ROUGH GRADING						
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						
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						
	<input type="checkbox"/> INTERIOR	<input type="checkbox"/> EXTERIOR					
127)	DIAPHRAGMS						
	<input type="checkbox"/> ROOF	<input type="checkbox"/> FLOOR					
134)	SIDING/SHEATHING						
125)	HOLD DOWNS						
132)	CLOSE-IN						
122)	ROUGH ELECTRICAL						
123)	ROUGH MECHANICAL						
124)	ROUGH PLUMBING						
128)	ROUGH FRAME						
160)	SMOKE DETECTORS						
139)	INSULATION						
142)	WALLBOARD						
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						
144)	WATER TANKS						
	<input type="checkbox"/> SLAB	<input type="checkbox"/> WALLS					
170)	TEMPORARY OCCUPANCY						
171)	TEMPORARY ELECTRICAL						
172)	TEMPORARY GAS						
174)	ELECTRIC METER AUTHORIZATION	11/3/09	DDP				
152)	PANEL BOARDS/SERVICE						
189)	SEPTIC ELECTRIC FINAL						
175)	GAS METER AUTHORIZATION						
153)	GAS PRESSURE TEST						
	HOUSE	YARD					
190)	MANUF. HOME FOUNDATION						
191)	MANUF. HOME INSTALLATION						
	CONTINUITY						
	STAIRS/SKIRTS						
	RIDGE BOLTING						
193)	MANUF. HOME COND. FINAL						
	SWIMMING POOLS						
194)	PRE-GUNITE						
195)	PRE-DECK						
196)	PRE-PLASTER/FENCE						
197)	VINYL/FIBERGLASS POOL EXCAVATION						
102)	GRADING FINAL						
176)	ELECTRICAL FINAL						
177)	MECHANICAL FINAL						
178)	PLUMBING FINAL						
199)	FINAL						
	OCCUPANCY (OK TO OCCUPY)						
				FIRE INSPECTION REQUIRED		DATE	NAME
				<input type="checkbox"/> Yes <input type="checkbox"/> No			
				759) KNOX BOX			
				760) PROPANE TANK HOLD DOWNS			
				770) SPRINKLER FINAL			
				771) ABOVEGROUND HYDROSTATIC			
				772) UNDERGROUND HYDROSTATIC			
				773) UNDERGROUND FLUSH			
				774) THRUST BLOCKS			
				775) PIPE WELD			
				776) HYDRANTS/APPLIANCES			
				777) PUMP ACCEPTANCE			
				778) WATER SUPPLY/TANK			
				779) ALARM SYSTEM			
				780) HOOD & DUCT SYSTEM			
				781) ABOVEGROUND TANK/DISPENSER			
				198) FIRE FINAL			
				CLEARANCES:			
				FIRE <input type="checkbox"/> Local <input type="checkbox"/> County			
				HEALTH DEPARTMENT			
				ZONING			
				SANITATION			
				PLAN RETENTION REQUIRED?			
				<input type="checkbox"/> Yes <input type="checkbox"/> No			

Control 11/3/09
same 11/4/09 OK clearance

PERMIT # BLD09-219