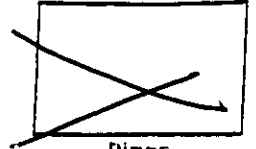


B

Type



~~Plans~~

B-153746

Permit Number

1415

Street Number

ROSE AVE

Street Name

BEL

Community Code

125-131-034

APN

# 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: Erik J. Jenkins Date Applied: 4-30-99

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: <u>1615 Rose Avenue</u>	City: <u>Santa Rosa, CA</u>	ZIP: <u>95407</u>
Cross-Street: <u>Stony Point</u>	APN: <u>011-011-011</u>	Project Phone #: <u>(707) 579-8521</u>
Directions: <u>South on Stony Point East on Rose</u>	Subd. Name: _____	Unit #: _____ Lot #: _____
Describe Project: <u>Master bedroom, bath addition</u>	Living Area: <u>117</u>	Contract Price: _____
	Garage: _____	
Decks: <u>16</u>		

OWNER NAME AND ADDRESS	APPLICANT NAME AND ADDRESS
Name: <u>Erik &amp; Benede Jenkins</u>	Name: _____
Mailing Address: <u>1615 Rose Avenue</u>	Mailing Address: _____
City: <u>Santa Rosa</u> State: <u>CA</u> ZIP: <u>95407</u>	City: _____ State: _____ ZIP: _____
Day Ph: <u>(707) 579-8521</u> Fax: _____	Day Ph: _____ Fax: _____

CONTRACTOR INFORMATION	OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)
Company Name: _____	Name: <u>Pete Castro</u>
Address: _____	Address: _____
City: _____ State: _____ ZIP: _____	City: <u>Santa Rosa</u> State: <u>CA</u> ZIP: _____
Day Ph: _____ Fax: _____	Day Ph: <u>(707)</u> Fax: _____
	License No: _____ Exp. Date: _____

### 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 3700 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 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.)

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

I am exempt under Sec. \_\_\_\_\_ B & P.C. for this reason \_\_\_\_\_

Date: \_\_\_\_\_ Owner: \_\_\_\_\_

### 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 Workman's Compensation law, this permit shall be deemed revoked.

**NOTICE!! THIS PERMIT WILL EXPIRE BY LIMITATION IF WORK IS NOT STARTED IN 180 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 180 DAYS. A REQUEST FOR TIME EXTENSION MUST BE SUBMITTED IN WRITING TO THE BUILDING CODE ADMINISTRATOR WITHIN THE FIRST 180 DAYS OF THE PERMIT.**

PERMITTEE SIGNATURE \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

Contractor  Owner  Agent for Contractor  Agent for Owner

Permit # 15153707 Area \_\_\_\_\_

Permit Coordinator \_\_\_\_\_

### 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: R3 File No: \_\_\_\_\_ Acres: 1.0

Existing Use/Structures: SFD

Proposed Use/Structures: all new SFD

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: \_\_\_\_\_ Date: \_\_\_\_\_

By: \_\_\_\_\_ Date: 4/30/99

Conditions: \_\_\_\_\_

Sewer Connection:  Available  Fees Paid

Approved by: \_\_\_\_\_ Date: 4/30/99

Road Encroachment:  Fees Paid

Approved by: \_\_\_\_\_ Date: 4/30/99

### SEWER COMPLETION CERTIFICATE

REQUIRED PRIOR TO OCCUPANCY.

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Flood Zone:  Yes  No 100 Year Flood Elevation: \_\_\_\_\_

Site Review \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

Condition of Soil at Job Site:  Original  Engineered Fill  Loose Fill

Required Reports:  Geology  Soils  Compaction

Code Enforcement Violation  Yes  No

Work Authorized: \_\_\_\_\_

New  Addition  Alteration  Repair  Moving  Occ/Chg

<input checked="" type="checkbox"/> Plans Approved	Machine Space for Permit Fee
<input type="checkbox"/> No Plans Subject to Field Inspection	PERM 1506.31
Plancheck Cleared By: _____ Date: <u>7/1/99</u>	FIELD 1506.31
Permit Cleared for Issuance By: _____ Date: <u>4/30/99</u>	CHG 1506.31
Type of Construction: _____	FD 10.00
Occupancy: _____	
No. of Stories: _____	
# No. of Bedrooms: _____	
Auto. Fire Sprinklers Req'd: _____	
No. of Units: _____	
Certificate of Occupancy: _____	
Final Date: <u>7/25/07</u>	Inspector: <u>UB</u>

Distribution: White - File - Canary - Applicant - Pink - Audit Copy - Blue - Assessor - Cardstock - Inspector

JOB ADDRESS: 1615 STONY POINT, SANTA ROSA, CA 95407  
MAP REFERENCE: 14-A-2  
PERMIT NUMBER: 15153707  
INSPECTION AREA: 15153707

INSPECTION RECORD	DATE	NAME	REMARKS
<b>FOUNDATION</b>			
FORMS/SETBACK	6/16/00	CLA	
FOOTING	6/22/00	JL	
WALLS			
UFER GROUND #			
CAISSONS/PIERS	6/22/00	JL	
SLAB			
MASONRY			
RETAINING WALLS			
FIREPLACE			
FOOTING			
HEARTH/PROTECTION			
THROAT			
CHIMNEY			
UNDERFLOOR/UNDERSLAB			
U/F ELECTRICAL			
U/F MECHANICAL			
U/F PLUMBING	6/16/00	SL	
U/F FRAMING			
U/F INSULATION			
SHEAR WALLS			
<input type="checkbox"/> INTERIOR			
<input type="checkbox"/> EXTERIOR			
DIAPHRAGMS			
<input checked="" type="checkbox"/> ROOF	10/12/00	SL	
<input type="checkbox"/> FLOOR	2/27/00	SL	
SIDING/SHEATHING	9/22/00	DP	
HOLD DOWNS			
CLOSE-IN			
ROUGH ELECTRICAL	3/08/01	Syl	
ROUGH MECHANICAL	N/A		
ROUGH PLUMBING	3/08/01	Syl	
ROUGH FRAME	2/27/01	CLM	
SMOKE DETECTORS	7/25/01	CLM	
INSULATION	3/12/01	CLM	
WALLBOARD	3/23/01	CLM	
STUCCO/PLASTER			
<input type="checkbox"/> LATH			
<input type="checkbox"/> SCRATCH			
TUB/SHOWER PAN	N/A		
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	7/25/01	CLM	
GAS METER AUTHORIZATION			
GAS PRESSURE TEST			
HOUSE			
YARD			
MANUF. HOME FOUNDATION			
MANUF. HOME INSTALLATION			FIRE INSPECTION REQUIRED <input type="checkbox"/> Yes <input type="checkbox"/> No
CONTINUITY			Inspected by:
STAIRS/SKIRTS			
RIDGE BOLTING			
SWIMMING POOLS			
PRE-GUNITE			
PRE-DECK			CLEARANCES:
PRE-PLASTER/FENCE			FIRE <input type="checkbox"/> Local <input type="checkbox"/> County
GRADING FINAL			HEALTH DEPARTMENT
ELECTRICAL FINAL	7/25/01	CLM	ZONING
MECHANICAL FINAL			SANITATION
PLUMBING FINAL			N.C.A.P.C.D.
FINAL			
OCCUPANCY (OK TO OCCUPY)			PLAN RETENTION REQUIRED? <input type="checkbox"/> Yes <input type="checkbox"/> No

PERMIT #

**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: Erik J. Jenkins Date Applied: 4-30-99

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

**SITE LOCATION INFORMATION - PRINT CLEARLY**

Site Address: 1615 Rose Avenue City: Santa Rosa, CA ZIP: 95407  
 Cross-Street: Stony Point APN: 125-131-0288 Project Fax #: ( )  
 Directions: South on Stony Point East on Rose Subd. Name: ( ) Unit #: ( ) Lot #: ( )  
 Describe Project: Master bedroom, bath addition / porch Living Area: 498 sq ft Contract Price: ( )  
 Garage: ( ) Decks: porch 168 sq ft

**OWNER NAME AND ADDRESS** Name: Erik & Renée Jenkins  
 Mailing Address: 1615 Rose Avenue City: Santa Rosa State: CA ZIP: 95407  
 Day Ph: (707) 579-8521 Fax: ( )

**APPLICANT NAME AND ADDRESS** Name: Same  
 Mailing Address: ( ) City: ( ) State: ( ) ZIP: ( )  
 Day Ph: ( ) Fax: ( )

**CONTRACTOR INFORMATION** Company Name: ( ) Address: ( ) City: ( ) State: ( ) ZIP: ( ) Day Ph: ( ) Fax: ( )

**OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)** Name: Pete Castro  
 Address: ( ) City: Santa Rosa State: CA ZIP: ( )  
 Day Ph: (707) 523-9797 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.: \_\_\_\_\_

**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: none  
 Lenders Address: \_\_\_\_\_

(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: \_\_\_\_\_

**FOR DEPARTMENT USE**  
 Zoning: R3-B6-15 Use/Structure: none Acres: 1/3  
 Existing Use/Structures: SFD, detached garage, shed  
 Proposed Use/Structures: Bedroom/bathroom addition to SFD  
 Zoning Min. Yard Requirements: Front 15' 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: \_\_\_\_\_ Approval for Occupancy: \_\_\_\_\_  
 By: \_\_\_\_\_ Date: 4/30/99

**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: \_\_\_\_\_  
 Date: 6/8/99 Owner: Erik Jenkins

**SEWER COMPLETION CERTIFICATE**  
 Sewer Connection:  Available  Fees Paid 4/30/99  
 Road Encroachment:  Available  Fees Paid 4/30/99  
 Septic System Permit/Clearance: \_\_\_\_\_  
 Flood Zone:  Yes  No 100 Year Flood Elevation: \_\_\_\_\_  
 Site Review: \_\_\_\_\_  
 By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Condition of Soil at Job Site:  Original  Engineered Fill  Loose Fill  
 Required Reports:  Geology  Soils  Compaction

**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 the asbestos notification and understand the above information is correct. I agree to comply with all local, state and federal laws relating to building construction. I hereby authorize representatives of the County of Sonoma to inspect the above-mentioned property for inspection purposes. If I am making the above-mentioned exemption to the Worker's Compensation provision of the Labor Code I should be aware that such exemption will forthwith comply. In the event I do not comply with the Workman's Compensation laws, the exemption shall be deemed revoked.

Code Enforcement Violation:  Yes  No  
 Work Authorized: (498 sq ft) (168 sq ft)  
 New  Addition  Alteration  Repair  Moving  Occ/Chg  
 Machine Space (for Permit) Fee # 014417 04-20-00B01  

SIERRA	\$506.34
**TTL	\$506.34
CHECK	\$506.34
CHNG	\$0.00

**NOTICE!! THIS PERMIT WILL EXPIRE 180 DAYS AFTER THE PERMIT IS NOT STARTED IN 180 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 180 DAYS. A REQUEST FOR TIME EXTENSION MUST BE SUBMITTED IN WRITING TO THE BUILDING CODE ADMINISTRATOR WITHIN THE FIRST 180 DAYS OF THE PERMIT.**  
 PERMITTEE SIGNATURE: \_\_\_\_\_  
 ADDRESS: 1615 Rose Ave Santa Rosa, CA 95407  
 Contractor  Owner  Agent for Contractor  Agent for Owner

Plans Approved  No Plans Subject to Field Inspection  
 Plancheck Cleared By: [Signature] Date: 7/19/99  
 Permit Cleared for Construction By: [Signature] Date: 4/20/00  

Auto. Fire Sprinklers Req'd	No. of Units	Certificate of Occupancy
Final Date	Inspector	

Permit # B153746 Area 3  
 Permit Coordinator: \_\_\_\_\_

Distribution: White - File Canary - Applicant Pink - Audit Copy Blue - Assessor Cardstock - Inspector

JOB ADDRESS: 1615 Rose Ave  
 MAP REFERENCE: 141-A2  
 PERMIT NUMBER: B153746  
 INSPECTION AREA: 3

# COUNTY OF SONOMA

## PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA

(707) 565-1900 FAX (707) 565-1103

### BUILDING PERMIT RECEIPT

**B-153746**

Site Location Information		Printed By: FWILLIAM 09:12 Apr 20, 2000	
Address: 1615 ROSE AVE ROS		APN: 125-131-034	
Cross Street: STONY POINT RD		Initialized By: CNIEDERM B-BLD 9801	
Owner		Applicant	
JENKINS ERIK JAY & MICHELE RENEE 1615 ROSE AVE SANTA ROSA CA  954077176		JENKINS ERIK JAY & MICHELE RENEE 1615 ROSE AVE SANTA ROSA CA  954077176	
Contractor		Architect or Engineer	
Lic. #:		Lic. #:	

**Permit Description:**

**ADDITION TO (E) SFD-MASTER BEDROOM PLUS PORCH**

Status: PC APRVD  
Issued:

Valuation/Contract \$: \$48,240.18 PC-Calc (Old/New): O PERM-Calc (Old/New): N Type: SADD  
Plancheck Multiplier: 1.00 Penalty Multiplier (Where Applicable):

Occupancy	Type	Factor	Sq. Feet	Valuation
Dwellings	DWEL-Type V - Wd Prme	91.17	498	45,402.66
Dwellings	Covered Porch/Patio	16.89	168	2,837.52
			Subtotal:	666
			Total Valuation:	48,240.18

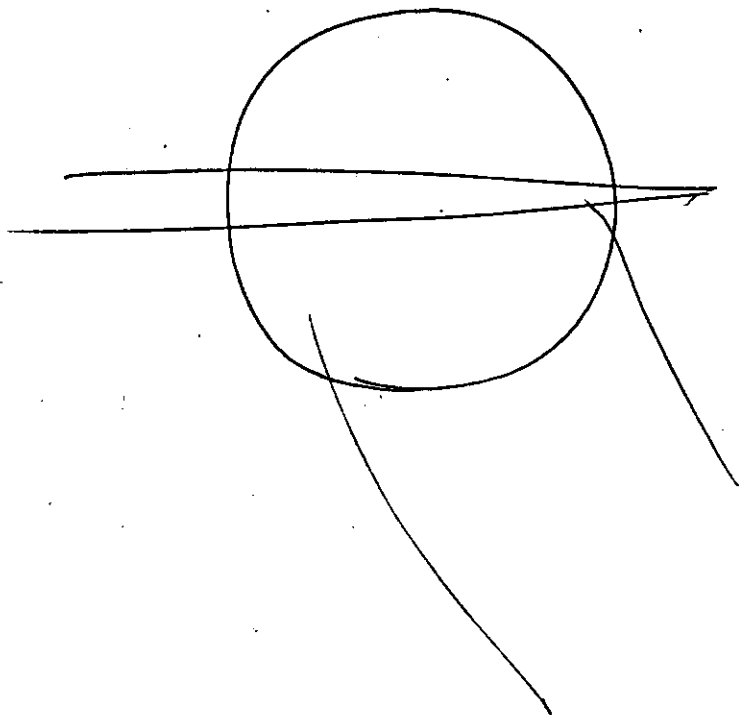
Table Date: 07/01/1998

Item #	Item Account Code	Description	Fee	Previously Paid
0011	1341 3505	INSPECTIONS - OTHER	\$ .00	\$ .00
0012	1341 3505	INSP. OUTSIDE NORMAL HRS	\$ .00	\$ .00
0013	1341 3505	REINSPECTION(S) FEE	\$ .00	\$ .00
0018	3141 1004	APPLICATION PROCES'G FEE	\$ .00	\$ .00
0050	327023-4040	S.M.I.P. RESIDENTIAL	\$4.82	\$ .00
0060	1341	BLDG PERM PLAN CHECK FEE	\$309.13	\$309.13
0062	1341	ADDITIONAL PLANCHECK FEE	\$ .00	\$ .00
0100	1341 3502	SITE REVIEW/ELEV. CERT.	\$73.00	\$73.00
0119	649103-3661	CO FIRE MARSHAL REVIEW	\$ .00	\$ .00
0120	1341 3504	FIRE STDS INSPECT - PRMD	\$ .00	\$ .00
0121	1341	FIRE SAFE STDS & REF PRMD	\$ .00	\$65.00
0122	1341 3504	ELECTRICAL FEE	\$33.46	\$ .00
0123	1341 3504	MECHANICAL FEE	\$ .00	\$ .00
0124	1341 3504	PLUMBING FEE	\$33.46	\$ .00
0132	1341 3504	BUILDING PERMIT FEE	\$475.60	\$ .00
0220	1600	VIO. PENALTY FEE (BLDG)	\$ .00	\$ .00
0221	4114 2001	VIO. INVEST. FEE (BLDG)	\$ .00	\$ .00
0707	3140 6054	REF.-GRADING/DRAIN. PLAN	\$ .00	\$ .00
0708	3140 6055	REF.-GRD/DRAIN DAM/DRVWY	\$ .00	\$ .00
1165	3829 6146	ZONING PERMITS W/O D.R.	\$24.00	\$ .00
2000	335208	CTY-WDE CE TRAFFIC MIT	\$ .00	\$ .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
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
5018	3141-WAIVED 1004	PROCESSING 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

Qualifies for fee waivers (Y/N): N

Total Calculated Fees	\$953.47	\$447.13
Previously Paid	\$447.13	
Balance Due	\$506.34	

C 7148 04/20/00B01  
0153746  
\$506.34  
\$506.34  
\$0.00



# COUNTY OF SONOMA

## PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA

(707) 565-1900 FAX (707) 565-1103

**PLANCHECK RECEIPT ONLY - NOT A PERMIT**

**B-153746**

Address: 1615 ROSE AVE ROS

Printed By: CNIEDERM 14:48 Apr 30, 1999

Cross Street: STONY POINT RD

APN: 125-131-034

Res/Com: R

In Planchek: 00/00/0000

Std/Quick: Q Fire District: ROSELAND FIRE GENERAL (S.Tax Rate Area: 150009

Activity Type: B-BLD 9801

Insp Area: 03

Owner

Applicant

JENKINS ERIK JAY & MICHELE RENEE  
1615 ROSE AVE  
SANTA ROSA CA

JENKINS ERIK JAY & MICHELE RENEE  
1615 ROSE AVE  
SANTA ROSA CA

954077176

954077176

Planchek Expires 1 Year from Date Planchek Fees Are Paid (See Register Validation Date)

Site Review Fees Paid this Application:

\$73.00

Description: ADDITION TO (E) SFD-MASTER BEDROOM PLUS PORCH

Initialized By: CNIEDERM

Approved By:

Status: **STARTED**

Planchek Multiplier: 1.00

Occupancy	Type	Factor	Sq. Feet	Valuation
Dwellings	DWEL-Type V - Wd Frme	91.17	498	45,402.66
Dwellings	Covered Porch/Patio	16.89	168	2,837.52
			Subtotal:	48,240.18
			Total Valuation:	48,240.18

Table Date: 07/01/1998

Item #	Item Account Code	Description	Fee	Previously Paid
0060	1341	BLDG PERM PLAN CHECK FEE	\$309.13	\$ .00
0100	1341 3502	SITE REVIEW/ELEV. CERT.	\$73.00	\$ .00
0119	649103-3661	CO FIRE MARSHAL REVIEW	\$ .00	\$ .00
0121	1341	FIRE SAFE STDS & REF PRMD	\$65.00	\$ .00
0707	3140 6054	REF.-GRADING/DRAIN. PLAN	\$ .00	\$ .00
0708	3140 6055	REF.-GRD/DRAIN DAM/DRVWY	\$ .00	\$ .00
5060	1341-WAIVED	BLDG PERM PLAN CHECK FEE	\$ .00	\$ .00
5100	1341-WAIVED 3502	SITE REVIEW/ELEV. CERT.	\$ .00	\$ .00
5119	649103-3661-WAIVED	CO FIRE MARSHAL REVIEW	\$ .00	\$ .00
5121	1341-WAIVED	FIRE SAFE STDS & REF PRMD	\$ .00	\$ .00
5707	3140-WAIVED 6054	REF.-GRADING/DRAIN. PLAN	\$ .00	\$ .00
5708	3140-WAIVED 6055	REF.-GRD/DRAIN DAM/DRVWY	\$ .00	\$ .00

Qualifies for Fee Waivers (Y/N): N

\$447.13

\$ .00

Total Calculated Fees

\$447.13

Previously Paid

\$ .00

**Balance Due**

**\$447.13**

CASH REGISTER  
VALIDATION  
REQUIRED

013666 06/08/99E01

# 0153746

SIERRA \$447.13

\*\*\*TTL \$447.13

CHECK \$447.13

CHNG \$0.00

# SITE EVALUATION CHECKLIST

JOB ADDRESS: 1615 Ross

File # B- 153746

Inspector: SJ

Date: 6.14.99

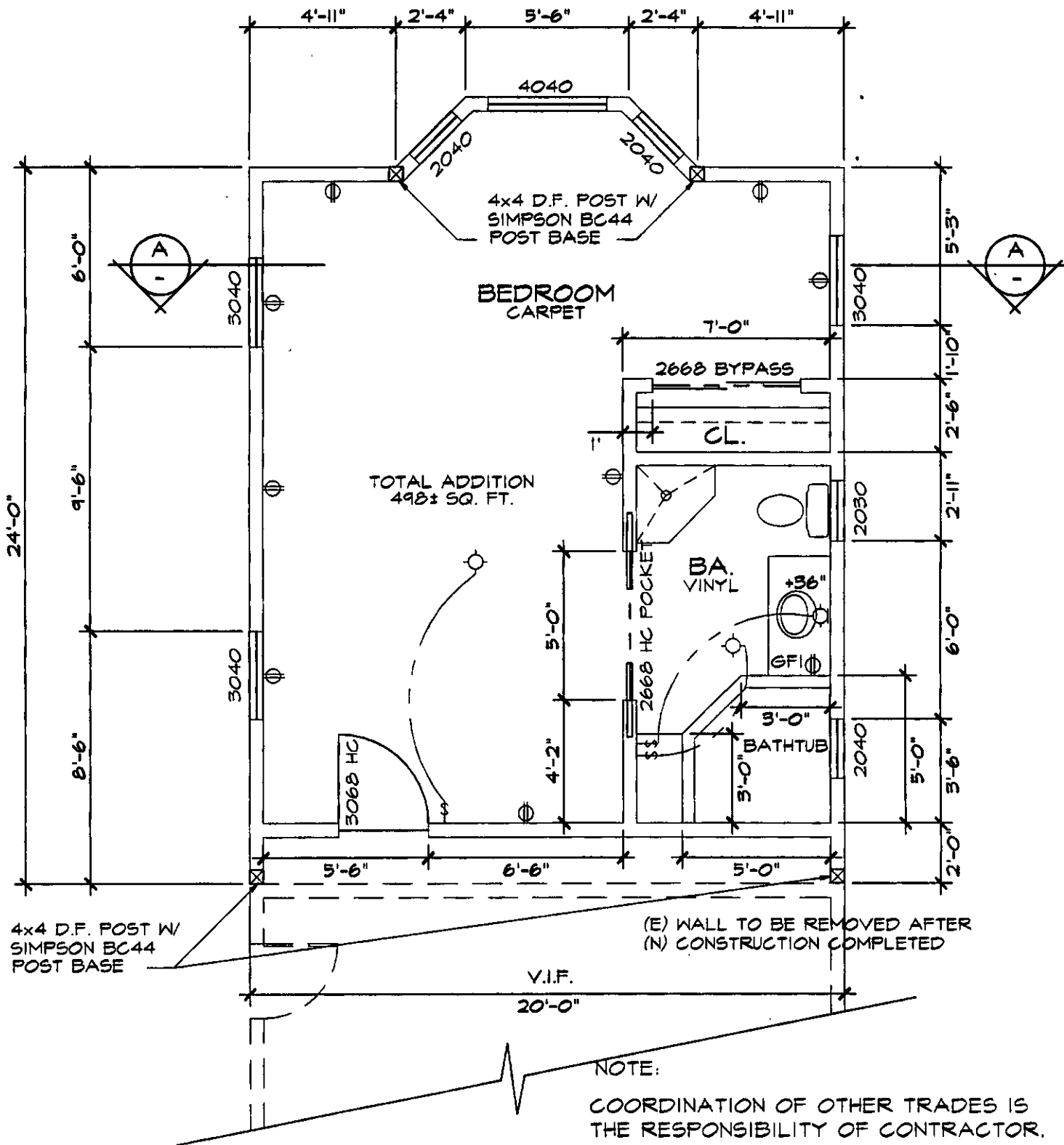
The proposed construction appears to be located in:

Flood Hazard:	<input type="checkbox"/> FIRM Flood Zone (A.S.F.H.) BFE = _____ ft. NGVD. Lowest finish floor at 12" above BFE at _____ ft. <input type="checkbox"/> Design for moving water is recommended Section _____ is _____ Ft/sec Section _____ is _____ Ft/sec <input type="checkbox"/> Area subject to flooding (not on adopted FIRM). <input type="checkbox"/> Project is on flood zone major damage list. <input checked="" type="checkbox"/> Flood prone urban area defined by Ordinance #4467.	<input type="checkbox"/> FIRM Floodway <input type="checkbox"/> Portions of property in flood zone but project site not in flood zone. <input type="checkbox"/> Appears to be a "substantial improvement" therefore flood regulations apply. <input type="checkbox"/> Located inside the <i>Laguna de Santa Rosa</i> below elevation of 75 ft (Ord. #4467). <input type="checkbox"/> Sensitive drainage area, review by drainage section recommended.
Geo-technical:	<input type="checkbox"/> Area of suspected slides, slumps, earth flow, or soil creep. <input type="checkbox"/> Area of previous fill placement. <input type="checkbox"/> Area of highly expansive soil. <input type="checkbox"/> Area without sufficient slope setback as set forth in UBC Section 1806. <input type="checkbox"/> Area subject to possible liquefaction. <input type="checkbox"/> Area of suspected soft, compressible, or organic soil with low bearing capacity.	<input type="checkbox"/> Area without recommended setback from stream (SCWA recommendations). <input type="checkbox"/> Area of high moisture content in soil. <input type="checkbox"/> Area subject to high erosion (water or wind). <input type="checkbox"/> Area of soft soil due to past deep ripping or cultivation below minimum foundation depth. <input type="checkbox"/> Area within 1000 feet of a solid waste disposal site.
	<b>Soils Report:</b> <b>Required</b> <input type="checkbox"/> <b>Available</b> <input type="checkbox"/>	
Geologic:	<input type="checkbox"/> Located in the Alquist-Priolo Special Studies Zone.	<input type="checkbox"/> Geologic report required (see DMG Publication 42).
General:	<input type="checkbox"/> Building addition will affect the required light and ventilation in an existing room. <input type="checkbox"/> Existing electric meter must be replaced. <input type="checkbox"/> Existing gas meter must be replaced. Slope is <u>0-2</u>	<input type="checkbox"/> Indications of existing substandard conditions that are not addressed by the proposed construction. <input type="checkbox"/> Indications of past work done without a permit. <input type="checkbox"/> Grading permit required for road, driveway, or site preparation. <input checked="" type="checkbox"/> Site is likely to be acceptable for conventional construction methods.
Wind:	Exposure " <u>B</u> " <u>URBAN</u> Northern Sonoma County Air Pollution Control District	Exposure " <u>D</u> " <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Site Sketch:







# FLOOR PLAN

SCALE: 1/4" = 1'-0"