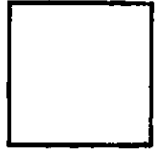


B

Type



Plans

B-116783

Permit Number

543

Street Number

SOUTHWOOD DR

Street Name

BEL

Community Code

125-562-025

APN

**SONOMA COUNTY
BUILDING INSPECTION**

575 ADMINISTRATION DRIVE
SANTA ROSA, CA 95403-2884
TELEPHONE (707) 527-2221

JOB ADDRESS

543 Southwood Ave. W.D.S.E. INCORPORATED CITY YES AND

MAP REFERENCE

PERMIT NUMBER

INSPECTION AREA

OWNER
NAME: Kelly Mclean
MAILING ADDRESS: 543 Southwood Ave. 547 -
CITY: SANTA ROSA, CA. 95407 ZIP CODE: 9022

PROJECT
ADDRESS: 543 Southwood Ave
CITY: SANTA ROSA, CA
SUBDIVISION NAME: UNIT NO: LOT: BLOCK:
ASSESSOR'S PARCEL NO: 125-562-256
NEAREST CROSS STREET: Witter

CONTRACTOR
NAME: Just Wright Electric
ADDRESS: P.O. Box 11115
CITY: SANTA ROSA, CA ZIP CODE: 579-0631
STATE LIC NO: 556229 LIC CLASS: C-10

DESIGNER
NAME:
ADDRESS:
CITY: ZIP CODE: TEL NO:

CERTAIN AREAS WITHIN SONOMA COUNTY MAY BE GEOLOGICALLY HAZARDOUS. YOU ARE INVITED TO REVIEW ANY GEOLOGIC DATA THAT THIS DEPT HAS AVAILABLE TO AID YOU IN MAKING A DETERMINATION AS TO THE SUITABILITY OF A PROPOSED BUILDING SITE.

CONDITION OF SOIL AT JOB SITE
 ORIGINAL ENGINEERED FILL LOOSE FILL

SITE REVIEW _____

BY: _____ DATE: _____

REQUIRED REPORTS:
 GEOLOGY SOILS COMPACTION
 FLOOD ZONE YES NO 100 YR FLOOD ELEV. _____

SEWER CONNECTION: _____ SANITATION ENGINEER _____
APPROVED BY: *WA* DATE: _____

ROAD ENCROACHMENT:
APPROVED BY: _____ DATE: _____

SEPTIC TANK INSTALLATION: _____ HEALTH DEPARTMENT _____
PERMIT NUMBER _____ OR CLEARANCE _____
DATE REC'D _____ DATE ISSUED _____

LICENSED CONTRACTORS DECLARATION: I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.
Contractor's Signature: *Just Wright* Lic. # 556229

OWNER-BUILDER DECLARATION: I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code): Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).
 I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code). The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale; if, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale.
 I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code). The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and 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.
Owner's Signature: _____

WORK AUTHORIZED: INSTALLING 100 AMP METER MAIN BREAKER AND INSTALL NEW CIRCUITS AND OUTLETS IN KITCHEN PER CODE.

NEW ADDITION ALTERATION REPAIR MOVING OCC/CHG

SIZE IN SQUARE FEET: _____ VALUE: _____

FLOOR AREA: Kitchen

GARAGE CARPORT: _____

DECK AWNING: _____

FEES - Per Chapter 7, et seq. Sonoma County Code
TOTAL: 136.7

WORKER'S COMPENSATION DECLARATION: I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof filed with the Building Inspection Department (Sec. 3800, Lab. C.).
Policy No: 1177060 Insurance Co: State Comp
Applicant's Signature: *Just Wright* Expiration Date: 93

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE: I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.
Owner's or Contractor's Signature: _____

CONSTRUCTION LENDING AGENCY: I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3087, Civ. C.).
Lender's Name: _____
Lender's Address: _____

BUILDING
 PLAN CHECK
 PLUMBING
 ELECTRICAL 25.00
 MECHANICAL
 GRADING
 SITE/PROP
 PLANNING
 FIRE
 SEISMIC
 INVEST. FEES
 PROCESSING FEE 16.00

TOTAL \$ _____

PERMITTEE
NAME: Just Wright Electric
ADDRESS: P.O. Box 11115 SANTA ROSA, CA 95406
I certify that I have read this application and state that the above information is correct, and that I am the owner or the duly authorized agent of the owner. I agree to comply with all County 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 from the Worker's Compensation provisions of the Labor Code I should become subject to such provisions, I will forthwith comply, in the event I do not comply with the Workmen's Compensation law, this permit shall be deemed revoked.
SIGNATURE: *Just Wright* DATE: 10/Dec 92

CONTRACTOR OWNER AGENT FOR CONTRACTOR AGENT FOR OWNER

DATE RECEIVED REC'D BY: 12-10-92
PREVIOUS PERMIT NO: _____
DATE CLEARED FOR ISSUANCE BY: 12/10/92

PLANS APPROVED BY: *Just Wright* DATE: _____
PLANS SUBJECT TO FIELD INSPECTION APPROVED BY: _____ DATE: _____

PLANNING DEPARTMENT

ZONING: _____ FILE NO: _____ ACRES: _____

EXISTING USE: _____

PROPOSED USE: *W*

YARDS FRONT: _____ LEFT SIDE: _____ RIGHT SIDE: _____ REAR: _____

PLANNING APPROVALS
FOR PERMIT ISSUANCE _____ FOR OCCUPANCY _____

BY: _____ DATE: _____ BY: _____ DATE: _____

MACHINE SPACE FOR PERMIT FEE

015535	12/11/92A01
PERMIT	0116783
BLDG.	\$25.00
BLDG.	\$16.00
***TTL	\$41.00
CHECK	\$41.00
CHNG	\$0.00

REMARKS: _____

SOUND MITIGATION: REQUIRED EXEMPT
DEVELOPMENT FEES: REQUIRED EXEMPT

116783

5

INSPECTION RECORD

DATE

NAME

REMARKS

SURVEY
FOUNDATION FORMS - SET BACK

SLAB
UFER GROUND
CONC BLOCK

RETAINING WALLS
MASONRY
FIREPLACE - FOOTING
HEARTH THROAT CHIMNEY
UNDERFLOOR/SLAB ELEC
UNDERFLOOR/SLAB MECH
UNDERFLOOR/SLAB PLUMB
UNDERFLOOR/SLAB FRAME

ELEC ROUGH
MECH ROUGH
PLUMB ROUGH
GAS TEST
FRAME ROUGH

12-15-92

DIAPHRAGMS
ROOF NAILING
SHEAR WALLS
HOLD DOWNS
SIDING
STUCCO
MESH
SCRATCH
BROWN
ROOFING
INFILTRATION CONTROL
INSULATION ROOF WALLS FLOORS
WALL BOARD
FIREWALLS
GAS SERVICE EQUIP
ELEC SERVICE EQUIP
PANEL BOARDS

SMOKE DETECTOR
STAIRWAYS - HANDRAILS
SUSPENDED CEILINGS
FIRE DAMPERS
RAMPS - RAILS
HANDICAP REQ
ENERGY REQ

12-15-92

TEMP OCCUPANCY
TEMP ELEC
TEMP GAS

FINAL
FIRE DEPT
HEALTH DEPT / PUBLIC WORKS
PLANNING
ELEC METER AUTH
GAS METER AUTH
PLUMBING FINAL
ELEC FINAL
MECH FINAL

12-15-92

12-14-92

12-15-92

AIR QUALITY CONTROL

GRADING FINAL

SWIMMING POOL PRE - GUNITE
PRE - DECK
PRE - PLASTER

PERMIT #

PLAN RETENTION REQUIRED
YES NO