

B

Type

8

Docs

Plans

BLD 05-4635

Building Permit Number (List all associated with these documents)

168

Street Number

St. Dorothy's Ave.

Street Name

Cum

Community Code

075-130-027

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: **MIKE CHARLES** Date Applied: **8/19/05**

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

**168 ST. DOROTHY'S AVE.** SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: **P.O. Box Camp Meekler** City: **Occidental** ZIP: **95419**

Cross-Street: **TAN OAK & TOWER RD** Project Phone #: **(707) 874-3319** Project Fax #: **(707) 874-3349**

Directions: **Bohemian Hwy - Camp Meekler** Subd. Name: \_\_\_\_\_ Unit #: \_\_\_\_\_ Lot #: \_\_\_\_\_

Describe Project: **Remove existing roof system, AND Replace with 40yr class "A" composition shingles MAIN HOUSE (lodges)** Living Area: **490 sq ft** Contract Price: **\$28,374**

Garage: \_\_\_\_\_ Decks: **comm. elis/ps** **#19,695**

OWNER NAME AND ADDRESS: \_\_\_\_\_ APPLICANT NAME AND ADDRESS: \_\_\_\_\_

Name: **ST. DOROTHY'S REST** Name: \_\_\_\_\_

Mailing Address: **P.O. Box Camp Meekler** Mailing Address: \_\_\_\_\_

City: **Occidental** State: **CA** ZIP: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Day Ph: **(707) 874-3319** Fax: **(707) 874-3349** Day Ph: ( ) Fax: ( )

**CONTRACTOR INFORMATION** OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)

Company Name: **Anc Roofing** Name: \_\_\_\_\_

Address: **1400 Petaluma Hill Rd.** Address: \_\_\_\_\_

City: **Santa Rosa** State: **CA** ZIP: **95404** City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Day Ph: **(707) 576-1895** Fax: **( ) 576-1910** 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: **STATE FUND Inc.**  
 Policy No.: **641-0000876**

(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: **10/05** Applicant: **Mike Charles**

**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 3705 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 the work 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 the work 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.O. for this reason: **N/A**

Date: \_\_\_\_\_ Owner: **N/A**

**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: **C39** Lic. No.: **689097**

Exp. Date: **3/06** Contractor: **Anc Roofing Inc.**

**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.

Signature: **Mike Charles**

PERMITEE SIGNATURE: \_\_\_\_\_

ADDRESS: **1400 Petaluma Hill Rd. Santa Rosa 95404** CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contractor  Owner  Other Licensed Professional

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

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

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

Sewer Connection:  Available  Fees Paid

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

Road Encroachment:  Fees Paid

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

Septic System Permit/Clearance # \_\_\_\_\_

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

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

Site Review

Drainage Review: \_\_\_\_\_

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

Fire: \_\_\_\_\_

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

Code Enforcement Violation  Yes  No Violation # \_\_\_\_\_

This permit is limited to \_\_\_\_\_ days.

Work Authorized: **Community Lodge Renovation**  
**49 sq 40yr Camp Meekler**  
**Shed**

<input checked="" type="checkbox"/> Plans Approved	<input type="checkbox"/> Post FIRM	<input type="checkbox"/> Against Prior Report Available
<input type="checkbox"/> No Plans Subject to Field Inspection	<input type="checkbox"/> Pre FIRM	<input type="checkbox"/> Geological report Available
Plans Check Cleared By: _____ Date: _____	Type of Construction: _____	Occupancy: _____
Permit Cleared for Use By: _____ Date: <b>8/19/05</b>	Auto. Fire Sprinklers Req'd: _____	No of Units: _____
		Certificate of Occupancy: _____

MacLine Space for Permit Fee: **310.05**

**PERMIT AND RESOURCE MANAGEMENT DEPARTMENT**  
**COUNTY OF SONOMA**

Final Date: **9-13-05** Inspector: **Re/ Peterson**

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

JOB ADDRESS: **168 St Dorothy's Ave** PERMIT NUMBER: **Bldg05-4635** INSPECTION AREA: **17**

# 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: \_\_\_\_\_

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

## INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

### SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: _____		City: _____		ZIP: _____	
Cross-Street: _____	APN: _____	Project Phone #: ( ) _____	Project Fax #: ( ) _____		
Directions: _____	Subd Name: _____	Unit #: _____	Lot #: _____		
Describe Project: _____		Living Area: _____	Contract Price: _____		
Garage: _____					
Decks: _____					

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

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 No. \_\_\_\_\_

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 these provisions.

Exp. Date: \_\_\_\_\_ Applicant: \_\_\_\_\_

### 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: \_\_\_\_\_

**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 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.

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

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

Contractor  Owner  Other Licensed Professional

### 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 charge

Approval for Permit Issuance: \_\_\_\_\_ Approval for Occupancy: \_\_\_\_\_

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

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

Sewer Connection:  Available  Fees Paid

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

Road Encroachment:  Fees Paid

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

Septic System Permit/Clearance # \_\_\_\_\_

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

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

Site Review

Drainage Review:

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

Fire:

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

Code Enforcement Violation  Yes  No Violation # \_\_\_\_\_

This permit is limited to \_\_\_\_\_ days.

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

<input type="checkbox"/> Plans Approved	<input type="checkbox"/> Post FIRM	<input type="checkbox"/> Alquist Prior Report Available
<input 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: _____
Permit Cleared for Issuance By: _____	Date: _____	Occupancy: _____
		No. of Stories: _____
		No. of Bedrooms: _____
		Auto. Fire Sprinklers Req'd: _____
		No. of Units: _____
		Certificate of Occupancy: _____

Machine Space for Permit Fee

Final Date: 9-13-05 Inspectors: Peterson

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

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

JOB ADDRESS: \_\_\_\_\_

PERMIT NUMBER: \_\_\_\_\_

INSPECTION AREA: \_\_\_\_\_

SPECIAL INSPECTION REQUIRED		<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, SEE ADDITIONAL SHEET
INSPECTION RECORD	DATE	NAME	REMARKS	
101) ROUGH GRADING			Community Lodge Parcel T/O 498 40yr Comp Soff Cert	
103) FOUNDATION				
FORMS/SETBACK				
FOOTING				
WALLS				
106) UFER GROUND #				
104) CAISSONS/PIERS				
105) SLAB				
107) UNDERGROUND UTILITIES				
110) MASONRY				
109) RETAINING WALLS			INSTALL CLASS A ROOF ONLY.	
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	9-13-05 RP			
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	DATE
172) TEMPORARY GAS			<input type="checkbox"/> Yes <input type="checkbox"/> No	NAME
174) ELECTRIC METER AUTHORIZATION			759) KNOX BOX	
152) PANEL BOARDS/SERVICE			760) PROPANE TANK HOLD DOWNS	
189) SEPTIC ELECTRIC FINAL			770) SPRINKLER FINAL	
175) GAS METER AUTHORIZATION			771) ABOVEGROUND HYDROSTATIC	
153) GAS PRESSURE TEST			772) UNDERGROUND HYDROSTATIC	
HOUSE	YARD		773) UNDERGROUND FLUSH	
190) MANUF. HOME FOUNDATION			774) THRUST BLOCKS	
191) MANUF. HOME INSTALLATION			775) PIPE WELD	
CONTINUITY			776) HYDRANTS/APPLIANCES	
STAIRS/SKIRTS			777) PUMP ACCEPTANCE	
RIDGE BOLTING			778) WATER SUPPLY/TANK	
193) MANUF. HOME COND. FINAL			779) ALARM SYSTEM	
SWIMMING POOLS			780) HOOD & DUCT SYSTEM	
194) PRE-GUNITE			781) ABOVEGROUND TANK/DISPENSER	
195) PRE-DECK			198) FIRE FINAL	
196) PRE-PLASTER/FENCE			CLEARANCES:	
197) VINYL/FIBERGLASS POOL EXCAVATION			FIRE	<input type="checkbox"/> Local <input type="checkbox"/> County
102) GRADING FINAL			HEALTH DEPARTMENT	
176) ELECTRICAL FINAL			ZONING	
177) MECHANICAL FINAL			SANITATION	
178) PLUMBING FINAL				
199) FINAL	9-13-05 RP			
OCCUPANCY (OK TO OCCUPY)			PLAN RETENTION REQUIRED?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

PERMIT # B1005-4635

**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:

**MIKE CHARLES**

Date Applied:

**8/19/05**

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

168 ST. DOROTHY'S AVE Site Address: <b>P.O. Box Camp Meeker</b>		City: <b>Occidental</b>		ZIP: <b>95419</b>
Cross-Street: <b>Tan Oak &amp; Tower RD</b>		Project Phone #: <b>(707) 874-3319</b>		Project Fax #: <b>(707) 874-3349</b>
Directions: <b>Bohemian Hwy - Camp Meeker</b>		Subd. Name:	Unit #:	Lot #:
Describe Project: <b>Remove existing Roof system, AND Replace with 40yr class "A" composition Shingles MAIN House (Lodge)</b>		Living Area: <b>490</b>	Contract Price: <b>\$28,374</b> <b>\$19,695</b>	
OWNER NAME AND ADDRESS: Name: <b>ST. DOROTHY'S REST</b> Mailing Address: <b>P.O. Box Camp Meeker</b> City: <b>Occidental</b> State: <b>CA</b> ZIP:		APPLICANT NAME AND ADDRESS: Name:		
Day Ph: <b>(707) 874-3319</b> Fax: <b>(707) 874-3349</b>		Day Ph: ( ) Fax: ( )		
CONTRACTOR INFORMATION: Company Name: <b>Anc Roofing</b> Address: <b>1400 Petaluma Hill RD.</b> City: <b>Santa Rosa</b> State: <b>CA</b> ZIP: <b>95404</b> Day Ph: <b>(707) 576-1875</b> Fax: <b>(707) 576-1910</b>		OTHER PERSONS (ARCHITECT, ENGINEER, ETC.): Name: Address: City: State: ZIP: Day Ph: ( ) Fax: ( )		
License No.:		Exp. Date:		
I hereby affirm under penalty of perjury one of the following declarations: <input type="checkbox"/> 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.		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:		
<input checked="" type="checkbox"/> 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: <b>STATE FUND Inc.</b> Policy No.: <b>641-0000876</b>		FOR DEPARTMENT USE Zoning: File No. Acres: Existing Use/Structures: Proposed Use/Structures: Zoning Min. Yard Requirements: Front Left Right Back NOTE: Fire Safe Structures require all parcels greater than 1 Acre to have a min. 30' setback unless mitigated. <input type="checkbox"/> Mitigation Required <input type="checkbox"/> Address subject to change Approval for Permit Issuance: Approval for Occupancy: By: By: Date: Date: Conditions:		
Exp. Date: <b>10/05</b> Applicant: <b>Mike Charles</b>		Sower Connection: <input type="checkbox"/> Available <input type="checkbox"/> Fees Paid Approved by: Date:		
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.		Road Encroachment: <input type="checkbox"/> Fees Paid Approved by: Date:		
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).):		Septic System Permit/Clearance # Approved by: Date:		
<input type="checkbox"/> 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.)		Flood Zone: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 100 Year Flood Elevation:		
<input type="checkbox"/> 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.)		Site Review Drainage Review: Approved by: Date:		
<input type="checkbox"/> I am exempt under Sec. _____ B & C for this reason: <b>N/A</b>		Fire: Approved by: Date:		
Date: _____ Owner: <b>MIA</b>		Code Enforcement Violation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Violation # _____ This permit is limited to _____ days.		
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: <b>C39</b> Lic. No.: <b>689097</b> Exp. Date: <b>5/06</b> Contractor: <b>Anc Roofing Inc.</b>		Work Authorized: <b>Community Lodge Renovation</b> <b>49 sq 40yr Camp</b> <b>Strip out</b>		
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 ( <input type="checkbox"/> does ) ( <input checked="" type="checkbox"/> does not ) contain asbestos, or that <input type="checkbox"/> no demolition is authorized by this permit.		Plans Approved: <input type="checkbox"/> Post FIRM <input type="checkbox"/> Attest. Prio. Report Available <input type="checkbox"/> No Plans Subject to Field Inspection <input type="checkbox"/> Pre FIRM <input type="checkbox"/> Geotechnical report Available Plans/Check Cleared By: Date:		
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 Workmen's Compensation law, this permit shall be deemed revoked. Mike Charles		Auto. Fire Sprinklers Req'd: No. of Units: Certificate of Occupancy: Date: <b>8/19/05</b>		
PERMITEE SIGNATURE <b>1400 Petaluma Hill RD. Santa Rosa 95404</b> ADDRESS CITY ZIP <input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Owner <input type="checkbox"/> Other Licensed Professional		Machine Space for Permit Fees: <b>516</b> <b>516</b> <b>AUG 23 2005</b> PERMIT AND RESOURCE MANAGEMENT DEPARTMENT COUNTY OF SONOMA		
Final Date:		Inspector:		

JOB ADDRESS: 168 ST DOROTHY'S AVE CAM PERMIT NUMBER: Bldg 05-4625 INSPECTION AREA: 4

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

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

California Home

Friday, Aug



**License Detail**

CALIFORNIA CONTRACTORS STATE LICEN

**Contractor License # 689097**

**DISCLAIMER**

A license status check provides information taken from the CSLB license data base. Before on this information, you should be aware of the following limitations:

- CSLB complaint disclosure is restricted by law (B&P 7124.6). If this entity is subject to complaint disclosure, a link for complaint disclosure will appear below. Click on the link button to obtain complaint and/or legal action information.
- Per B&P 7071.17, only construction related civil judgments reported to the CSLB are disclosed.
- Arbitrations are not listed unless the contractor fails to comply with the terms of the arbitration.
- Due to workload, there may be relevant information that has not yet been entered on Board's license data base.

Extract Date: 08/19/2005

**\*\*\* Business Information \*\*\***

ANC ROOFING INC  
 1400 PETALUMA HILL ROAD  
 SANTA ROSA, CA 95404  
 Business Phone Number: (707) 576-1875

*Sl# 05-4635*

Entity: Corporation

Issue Date: 05/17/1994 Expire Date: 05/31/2006

**\*\*\* License Status \*\*\***

This license is current and active. All information below should be reviewed.

**\*\*\* Classifications \*\*\***

Class	Description
C39	ROOFING

**\*\*\* Bonding Information \*\*\***

**CONTRACTOR'S BOND:** This license filed Contractor's Bond number **WCL1200124** in the of \$10,000 with the bonding company

**INTERNATIONAL BUSINESS AND MERCANTILE REASSURANCE COMPANY.**

Effective Date: 01/01/2004

**Contractor's Bonding History**

**BOND OF QUALIFYING INDIVIDUAL(1):** The Responsible Managing Officer (RMO) KEITH HUGH ALTON certified that he/she owns 10 percent or more of the voting stock/equity of a corporation. A bond of qualifying individual is **not** required.

Effective Date: 05/17/1994

**\*\*\* Workers Compensation Information \*\*\***

This license has workers compensation insurance with the  
**STATE COMPENSATION INSURANCE FUND**  
Policy Number: 641-0000876 Effective Date: 10/01/2000 Expire Date: 10/01/2005

**Workers Compensation History**

**Personnel listed on this license (current or disassociated) are listed on other licenses.**

Personnel List    Other Licenses

License Number Request    Contractor Name Request    Personnel Name Request

Salesperson Request    Salesperson Name Request

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# Reroofing Verification/Completion Form

CNI-023

**Purpose:** This form is to be completed by a licensed roofing contractor participating in the Sonoma County Self Certification Reroofing Program. The completed form must be attached to the field inspection record card. The building inspector will take this form back to PRMD to be filed with the permanent record at time of final inspection.

Bldg - 4635  
Permit Number

168 St Dorothy's Ave  
Tan Oak (Camp Meeker)  
Job Address

Mike Charles  
Contact Name

(707) 975-4963 or (707) 576-1875 ex 14  
Phone Number

**JOB COPY** **RETAIN**  
WITH JOB CARD

- Reroofing Inspection (#137):** I certify that the existing sheathing/decking is structurally sound, and complies with all the conditions of 1515.1 of the 2001 California Building Code (CBC). Minimum clearances to combustibles for all VAC, vents/chimneys have been verified and maintained.
- Roof Nailing Inspection (#127):** I certify that roof sheathing was installed and fastened in accordance with the manufacturer's installation instructions, and/or with the Sonoma County Reroofing Manual.
- Final Inspection (#199):** I certify that the roofing materials have been installed and fastened in accordance with the manufacturer's installation instructions, the Sonoma County Reroofing Manual, and all the requirements of the California Building Code.

ANC Roofing Inc.  
Licensed Contractor's Name

689097  
License Number

Mike Charles  
Signature

8/19/05  
Date

**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: BLD05-4635**

**Project Address:** 168 ST DOROTHYS AVE CAM  
**Cross Street:** TAN OAK  
**APN:** 075-130-027

**Status:** **PREISSUE**  
**Printed:** Friday, August 19, 2005  
**Initialized by:** CCAMILLE  
**Activity Type:** A-BLD 501

**Description:** COMMUNITY LODGE REROOF T/O 49SQ 40YR COMP

**Res/Com:** R  
**Std/Quick:** ??  
**Fire District:** CSA #40 FIRE SERVICES

**Insp Area:** 04  
**Site Review File #:** ??  
**Site Review Fees Paid:** \$0.00

**Owner:** PROTESTANT EPISCOPAL BISHOP OF CA  
 1055 TAYLOR ST  
 SAN FRANCISCO CA 94108-2209

**Applicant:** A N C ROOFING  
 1400 PETALUMA HILL RD  
 SANTA ROSA CA  
 95404-6012  
 707 576 1875

**Valuation:**

Occupancy	Type	Factor	Sq Feet	Valuation
	Additional Amount...			19,695.00
	Totals...			\$19,695.00*

**Fees:**

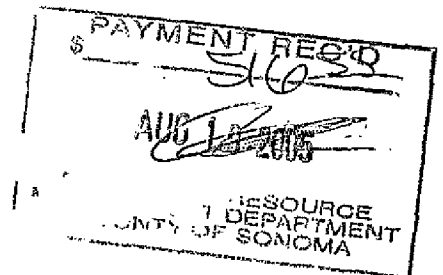
Item#	Description	Account Code	Tot Fee	Prev. Pmts	Cur. Pmts
50	S.M.I.P. RESIDENTIAL	327023-4040	1.97	.00	.00
132	BUILDING PERMIT FEE	025015-1341	454.90	.00	.00
140	TECH ENHANCEMENT FEE	025015-4040	5.09	.00	.00
735	NPDES - BUILDING	025015-1341	54.59	.00	.00
			<b>\$516.55</b>	<b>\$0.00</b>	

**Total Fees:** \$516.55  
**Total Paid:** \$0.00

**Balance Due:** \$516.55

**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.  
This Building Permit shall EXPIRE



**COUNTY OF SONOMA**  
**PERMIT AND RESOURCE MANAGEMENT DEPARTMENT**

2550 VENTURA AVENUE, SANTA ROSA, CA 95403-2829  
(707) 565-1900 FAX (707) 565-1103

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Friday, August 19, 2005

The Permit History provided below may not include all records for this property. Due to parcel mergers, splits, retirements, etc., further investigation may be required to obtain a more complete history.

INSPECTOR COPY

This information has been provided to allow easy access and a visual display of permit history information. All reasonable effort has been made to ensure the accuracy of the data provided. Nevertheless, the data may be out of date or may not be accurate. The County of Sonoma assumes no responsibility arising from the use of this information. This information and associated data are provided without warranty of any kind, either expressed or implied, including but not limited to, the implied warranties of merchantability and fitness for a particular purpose. Do not make any business decisions based on this data before validating the data with the Sonoma County Permit and Resource Management Department.

The date(s) listed in this report reflect the earliest known date(s) associated with each file. The date(s) listed are not associated with the current status.

Assessor's Parcel #        075-130-027

Current Owner:    PROTESTANT EPISCOPAL BISHOP OF CA

Permit History:

Number: B-098979	Date: 03/05/1990	Status: EXPIRED	Type: OLD-BLDG
Desc: ELEC SERVICE			
Number: BLD01-2877	Date: 06/14/2001	Status: FINALED	Type: A-BLD
Desc: REPLACE FURNACE & WATER HEATER IN MIRIAM HOUSE			
Number: VBU01-0245	Date: 04/09/2001	Status: FILECLSD	Type: VIO-BLDG
Desc: SUBSTANDARD CABINS AND HAZARDOUS ELECTRICAL			

# Declaration of Licensed Roofing Contractor

CNI-021

**Purpose:** This form is to be completed by a licensed roofing contractor participating in the Sonoma County Self Certification Reroofing Program as outlined in the Sonoma County Reroofing Manual.

Bldos - 4635  
Permit Number

ANC Roofing  
Contractor

689097  
License No.

1. 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 C-39).
2. I certify that I have reviewed and understand the Sonoma County Reroofing Manual and agree to follow all the requirements therein as they pertain to the installation of roofing and roofing substrate materials on structures located within the unincorporated areas of Sonoma County.
3. I agree to furnish the Permit and Resource Management Department proof of liability insurance from an acknowledged underwriting firm for all roofing operations within Sonoma County. Said coverage shall be no less than \$500,000 each occurrence and \$1,000,000 aggregate. I also agree to furnish proof of Workers Compensation Insurance.

~~ORIGINAL~~ COPY

Mike Charles  
Signature

8/19/05  
Date

## INSPECTOR'S COPY

Sonoma County Permit and Resource Management Department  
2550 Ventura Avenue ❖ Santa Rosa, CA ❖ 95403-2829 ❖ (707) 565-1900 ❖ Fax (707) 565-2210