

B

Type

3

Docs

Plans

BLD 99-0374

Building Permit Number (List all associated with these documents)

476

Street Number

COTTONWOOD DR

Street Name

ROS

Community Code

043-161-006

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: **JULIE** Date Applied: **7/26/99**

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: **476 Cottonwood Dr.** City: **Santa Rosa** Project No: **295401**
 Cross-Street: **CORB & AVE** APN: **013161-006** Project Phone #: () Unit # Lot #
 Directions: Describe Project: **tear off 2 layers T&G and install T&G CLASS A 20 Sq.** Living Area: Garage: Decks: Contract Price: **4100**

OWNER NAME AND ADDRESS

Name: **Hill Marilyn** Name: **JULIE RICKARD**
 Mailing Address: **476 Cottonwood Dr.** Mailing Address:
 City: **Santa Rosa** State: **CA** ZIP: **95401** City: State: ZIP:
 Day Ph: **707 544-3186** Fax: () Day Ph: () Fax: ()

CONTRACTOR INFORMATION

Company Name: **Affordable Roofing** Name:
 Address: **5625 State Farm Dr. Ste. 28** Address:
 City: **Rohnert Park** State: **CA** ZIP: **94928** City: State: ZIP:
 Day Ph: **707 585-8105** Fax: () Day Ph: () Fax: ()

OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)

Name: Address: City: State: ZIP: 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 provisions of Section 3700 of the Labor Code. I shall forthwith comply with those 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:

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 of 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:
 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:
 By: Date:
 Condition of Soil at Job Site: Original Engineered Fill Loose Fill
 Required Reports: Geology Soils Contamination
 Code Enforcement Violation: Yes No Filed Ctd
 Work Authorized: **ROOF OF T&G** **5213** **FA970258**
 New Addition Alteration Repair Moving Occ/Chg

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: **C-39** Lic. No: **67237Z**
 Exp. Date: **6/30/2000** Signature: **Julie Rickard**

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 applicable laws, rules, and regulations relating to building construction. I hereby authorize representatives of the County of Sonoma to inspect the above-mentioned property for inspection purposes. If, after my inspection, I determine that the contractor is not in compliance with the provisions of the Labor Code, I should become the subject of a citation and my license should be suspended or revoked.

THIS PERMIT EXPIRES IN THREE (3) YEARS FROM DATE FEES ARE PAID

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. REQUEST FOR TIME EXTENSION MUST BE SUBMITTED BY WRITING TO THE BUILDING CODE ADMINISTRATOR WITHIN THE FIRST 180 DAYS OF THE PERMIT.

Signature: **Julie Rickard**
 ADDRESS: CITY: ZIP:
 Contractor Owner Agent for Contractor Agent for Owner

PERMIT TRACKING

Machine Space for Permit Fr: **07/26/99** # **0990374** \$ **111.75**
 Date: **7/26/99** # **0990374** \$ **111.75**
 Date: **9/17/99** \$ **75.00**
 Date: **9/17/99** \$ **75.00**
 Final Date: Inspector: **AM**

Permit # **BLD99-0374** Area **3**
 Permit Coordinator

JOB ADDRESS: 476 COTTONWOOD MAP REFERENCE: PERMIT NUMBER: 295401

COUNTY OF SONOMA

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA

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

BUILDING PERMIT RECEIPT	BLD99-0374
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Site Location Information		Printed By: FWILLIAM 11:32 Jul 26, 1999	
Address: 476 COTTONWOOD DR ROS		APN: 043-161-006	
Cross Street: CORBY AVE		Initialized By: FWILLIAM A-BLD 9901	
Owner		Applicant	
HILL CHESTER A & MARILYN R 476 COTTONWOOD DR SANTA ROSA CA 954076010		AFFORDABLE ROOFING 5625 STATE FARM DR STE 28 ROHNERT PARK CA 707 585 8105 94928	
Contractor		Architect or Engineer	
AFFORDABLE ROOFING 5625 STATE FARM DR STE 28 ROHNERT PARK CA 707 585 8105 Lic. #: 672377		Lic. #:	

Building Permit Expires 3 YEARS from the Date Permit Fees Are Paid (See Register Validation Date)

Permit Description: INSTALL TAR & GRAVEL CLASS A 20SQ-SFD	Status: STARTED
Valuation/Contract Price: \$4,100.00	Issued:
Plancheck Multiplier:	Type: SALT
Occupancy Type	
Penalty Multiplier (Where Applicable):	
Factor Sq. Feet Valuation	
Subtotal:	.00
Multiplier 1.00:	.00
Addl Fixed Amount:	4,100.00
Total Valuation:	4,100.00

Table Date: 07/01/1999

Item #	Item Account Code	Description	Fee	Prev. 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
0050	327023-4040	S.M.I.P. RESIDENTIAL	\$.50	\$.00
0100	1341 3502	SITE REVIEW/ELEV. CERT.	\$.00	\$.00
0121	1341	FIRE SAFE STDS & REF PRMD	\$.00	\$.00
0122	1341 3504	ELECTRICAL FEE	\$.00	\$.00
0123	1341 3504	MECHANICAL FEE	\$.00	\$.00
0124	1341 3504	PLUMBING FEE	\$.00	\$.00
0132	1341 3504	BUILDING PERMIT FEE	\$111.25	\$.00
0220	1600	VIO. PENALTY FEE (BLDG)	\$.00	\$.00
0221	4114	VIO. INVEST. FEE (BLDG)	\$.00	\$.00
1165	3829 6146	ZONING PERMITS W/O D.R.	\$.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
5100	1341-WAIVED 3502	SITE REVIEW/ELEV. CERT.	\$.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
6165	3829-WAIVED 6146	ZONING PERMITS W/O D.R.	\$.00	\$.00

Permit qualified for fee waiver (Y/N): N	\$111.75	\$.00
Total Calculated Fees	\$111.75	CASH REGISTER
Previously Paid	\$.00	VALIDATION
Balance Due	\$111.75	REQUIRED
		BELOW

017521 07/26/99801
0990374
SIERRA \$111.75
***TTL \$111.75
CHECK \$111.75
CHNG \$0.00