

B

Type

Plans

B- 128812

Permit Number

1940

Street Number

Dalton Ave

Street Name

BEL

Community Code

125-501-002

APN

JOB ADDRESS: 1940 DUTTON AVE. NEAREST CROSS STREET: GR 200 Dr. MAP REFERENCE: 128812 PERMIT NUMBER: 128812 INSPECTION AREA: 3

OWNER
 NAME: J.L. PLICHCIK
 MAILING ADDRESS: P.O. Box 7399 (707) 545-2160
 CITY: SANTA ROSA, CA ZIP CODE: 95407

PROJECT
 ADDRESS: 1940 DUTTON AVE.
 CITY: SANTA ROSA, CALIF. 95407
 SUBDIVISION NAME: UNIT NO: LOT: BLOCK:
 ASSESSOR'S PARCEL NO: APN 125-501-02-3
 NEAREST CROSS STREET: LEO DRIVE

CONTRACTOR
 NAME: ALICE L. PLICHCIK
 ADDRESS: P.O. Box 7399 TEL NO: (707) 545-2160
 CITY: SANTA ROSA, CA. ZIP CODE: 95407
 STATE LIC NO: LIC CLASS: B

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

1 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.
 Contractors Signature: _____ Lic. # _____

2 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 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 an 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: _____
 Owners Signature: J.L. Plichcik

3 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 Permit and Resource Management Department (Sec. 3800, Lab. C.)
 Policy # _____ Insurance Co. _____
 Applicant's Signature: _____ Exp. Date: _____

4 CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE: I hereby certify that in the performance of the work for which this permit is issued, I will not employ any person in any manner so as to become subject to the Worker's Compensation Laws of California.
 Owner's or Contractor's Signature: J.L. Plichcik

5 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. 3097, Civ. C.)
 Lender's Name: _____
 Lender's Address: _____

PERMITTEE
 THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, AND IS SUBJECT TO EXPIRATION IF WORK THEREUNDER IS SUSPENDED FOR 180 DAYS.
 NAME: J.L. PLICHCIK
 ADDRESS: P.O. BOX 7399, SANTA ROSA, CA 95407
 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 that I do not comply with the Worker's Compensation law, this permit shall be deemed revoked.
 Signature: J.L. Plichcik Date: 3/9/95
 Contractor Owner Agent for Contractor Agent for Owner

PLANNING DIVISION
 ZONING: _____ FILE # _____ ACRES: _____
 EXISTING USE/STRUCTURES: _____
 PROPOSED USE/STRUCTURES: _____
 (Changes/Additions)
 MINIMUM YARD REQUIREMENTS: Front _____ Left _____ Right _____ Rear _____
 FIRE SETBACK OF 30' FROM ALL PROPERTY LINES REQUIRED YES NO
 APPROVAL FOR PERMIT ISSUANCE: Date _____
 APPROVAL FOR OCCUPANCY: Date _____
 HOLD FINAL FOR _____ OTHER REMARKS _____
 DEVELOPMENT FEES: REQUIRED EXEMPT SOUND MITIGATION: REQUIRED EXEMPT

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. _____
 NSCAPCD: YES NO PRE-FIRM _____ %

SEWER CONNECTION:
 AVAILABLE APPROVED BY: _____
 FEES PAID DATE: _____

ROAD ENCROACHMENT:
 FEES PAID APPROVED BY: _____
 DATE: _____

SEPTIC TANK INSTALLATION: (Health Dept.)
 Permit/Clearance # _____
 Date Rec'd _____ Date Issued _____

WORK AUTHORIZED: *Remain substantially structure per V 019526, nois in walls, kitchen floor, black, remove mildew.*

	SIZE IN SQUARE FEET	RATE PER SQUARE FOOT	VALUE
FLOOR AREA			
GARAGE CARPORT			
DECK AWNING			
TOTAL FEES - Per Chap 7, et seq Sonoma County Code			TOTAL > 5,000
<input checked="" type="checkbox"/> BUILDING			65.40
<input type="checkbox"/> PLAN CHECK			
<input checked="" type="checkbox"/> PLUMBING			26 -
<input type="checkbox"/> ELECTRICAL			
<input type="checkbox"/> MECHANICAL			
<input type="checkbox"/> GRADING			
<input type="checkbox"/> SITE/PROP			
<input type="checkbox"/> PLANNING			
<input type="checkbox"/> FIRE			
<input checked="" type="checkbox"/> SEISMIC			150
<input checked="" type="checkbox"/> PROCESSING FEE			8.40
<input checked="" type="checkbox"/> INVEST. FEES V 019526 (3m)			457.00
<input checked="" type="checkbox"/> ORD #4618 FEES V 019526 (3m)			
<input type="checkbox"/> 5X penalty			457.00
TOTAL \$			657.30

PLANS APPROVED NO PLANS SUBJECT TO FIELD INSPECTION
 APPROVED BY: *Chu* DATE: 3-9-95

DATE RECEIVED BY	PREVIOUS PERMIT NO	DATE CLEARED BY FOR ISSUANCE
3-9-95 Chu		3-9-95 Chu

TYPE OF CONSTRUCTION	OCCUPANCY	MACHINE SPACE FOR PERMIT FEE	#	VALUE
			0128812	
		BLDG.		\$65.40
		BLDG.		\$26.00
		EQ PGM		\$0.50
		BLDG.		\$17.00
		ABATE		\$91.40
		ABATE		\$457.00
		***TTL		\$657.30
		CHECK		\$657.30
		CHNG		\$0.00

OWNER - BUILDER VERIFICATION

Attention Property Owner:

An "owner-builder" building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

- 1) I personally plan to provide the major labor and materials for construction of the proposed property improvement (yes or no) yes.
- 2) I (have/have not) have signed an application for a building permit for the proposed work.
- 3) I have contracted with the following person (firm) to provide the proposed construction:
 Name: ALICE L. Plichcik
 Address: P.O. Box 7399 City: SANTA ROSA, CA.
 Phone: (707) 545-2160 Contractors Licence No: 523113

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise and provide major work:

Name: _____
Address: _____ City: _____
Phone: _____ Contractors Licence No: _____

5. I will provide some of the work but I have contracted (hired) the following persons to provide the work indicated:

Name	Address	Phone	Type of work

Signed: Property Owner: J. L. Plichcik Date: 3/9/95

=====
 Job Address: 1940 Dutton, SANTA ROSA A.P.N.# 125-561-02-3
 Description of work: Fix and repair structure on property.

OWNER - BUILDER INFORMATION

Attention Property Owner:

An application for a building permit has been submitted in your name listing yourself as the builder of the property improvements specified.

For your protection you should be aware that as "owner-builder" you are the responsible party of record on such a permit. Building permits are not required to be signed by property owners unless they are personally performing their own work. If your work is being performed by someone other than yourself, you may protect yourself from possible liability if that person applies for the proper permit in his or her name.

Contractors are required by law to be licensed and bonded by the State of California. They are also required by law to put their license number on all permits for which they apply.

If you plan to do your own work, with the exception of various trades that you plan to subcontract, you should be aware of the following information for your benefit and protection:

If you employ or otherwise engage any persons other than your immediate family, and the work (including materials and other costs) is \$300 or more for the entire project, and such persons are not licensed as contractors or subcontractors, then you may be an employer.

If you are an employer, you must register with the state and federal government as an employer and you are subject to several obligations including state and federal income tax withholding, federal social security taxes, worker's compensation insurance, disability insurance costs, and unemployment compensation contributions.

There may be financial risks for you if you do not carry out these obligations, and these risks are especially serious with respect to worker's compensation insurance.

For more specific information about your obligations under federal law, contact the Internal Revenue Service (and, if you wish, the U.S. Small Business Administration). For more specific information about your obligations under state law, contact the Department of Benefit Payments and the Division of Industrial Accidents.

If the structure is intended for sale, property owners who are not licensed contractors are allowed to perform their work personally or through their own employees, without a licensed contractor or subcontractor, only under limited conditions.

A frequent practice of unlicensed persons professing to be contractors is to secure an "owner-builder" building permit, erroneously implying that the property owner is providing his or her own labor and material personally. Building permits are not required to be signed by property owners unless they are performing their own work personally.

Information about licensed contractors may be obtained by contacting the Contractors' State License Board in your community or at P. O. Box 26000, Sacramento, California 95826.

Please complete and return the enclosed owner-builder verification form so that we can confirm that you are aware of these matters. The building permit will not be issued until the verification is returned.

Very truly yours,

Sonoma County Building Inspection Department

SPECIAL INSPECTION REQUIRED?

YES

NO

IF YES, SEE ADDITIONAL SHEET

INSPECTION RECORD

DATE

NAME

REMARKS

FOUNDATION

FORMS/SETBACK

FOOTING

WALLS

UFER 3ROUND #

CAISSONS/PIERS

SLAB

MASONRY

RETAINING WALLS

FIREPLACE

FOOTING

HEARTH/PROTECTION

THROAT

CHIMNEY

UNDERFLOOR/SLAB

U/F ELECTRICAL

U/F MECHANICAL

U/F PLUMBING

U/F FRAMING

U/F INSULATION

DIAPHRAGMS

SHEAR WALLS

INTERIOR

EXTERIOR

ROOF DIAPHRAGM

FLOOR DIAPHRAGM

SIDING/SHEATHING

HOLD DOWNS

STUCCO/PLASTER/LATH

CLOSE-IN

ROUGH ELECTRICAL

ROUGH MECHANICAL

ROUGH PLUMBING

ROUGH FRAME

SMOKE DETECTORS

INSULATION

WALLBOARD

STUCCO/PLASTER/SCRATCH

TUB/SHOWER PAN

SUSPENDED CEILING

ROUGH ELECTRICAL

ROUGH MECHANICAL

EXISTING

STAIRS/HANDRAILS

RAMPS

CORRIDORS/DOORS

HANDICAP REQS.

ENERGY REQS.

TEMP OCCUPANCY

TEMP. ELECTRIC

TEMP. GAS

METER AUTH.

TEST CARDS/SERVICE

METER AUTH.

GAS PRESSURE TEST

HOUSE

YARD

MANUF. HOME FOUNDATION

MANUF. HOME INSTALLATION

CONTINUITY

STAIRS/SKIRTS

RIDGE BOLTING

SWIMMING POOL

PRE-GUNITE

PRE-DECK

PRE-PLASTER/FENCE

GRADING FINAL

ELECTRICAL FINAL

MECHANICAL FINAL

PLUMBING FINAL

FINAL

OCCUPANCY (OK TO OCCUPY)

When finalized permit should
clear with # 019526 (D.N. 3-9-95)

6-19-95 NO Insp. only job info
to owner on Rd-BoB of
unit

7-11-95
6-30-95

Existing

10-31-96

8-22-95

Progress by phone
1-5-96
Progress 5/28/96

FIRE INSP. REQ'D Yes No
Inspected by:

CLEARANCES:
FIRE
HEALTH DEPT.
PLANNING
SANITATION
N.C.A.P.C.D.

10-08-96
10-08-96
10-31-96

PLAN RETENTION REQUIRED
Yes No

PERMIT # 185812

REPORT OF INVESTIGATION

File # V _____
Address 1940 Dutton Av.

DATE OF INSPECTION: 1-26-95 STAFF Harry

[] CONSTRUCTION WITHOUT PERMIT(S) _____

[] Addition [] New Detached Structure Approximate Size _____

[] Conversion/Change of Occupancy from _____ to _____

Work Observed:

- ___ Framing ___ New Windows ___ New Foundation ___ Roofing
- ___ Mechanical ___ Plumbing ___ Electrical ___ Other

[] Grading/Fill without Permit(s) _____

Quantity Observed _____

[X] Hazardous/Substandard Conditions (specify) SEE Below

- ___ Electrical [X] Structural ___ Plumbing/Mechanical ___ Other
- ___ Septic Discharge ___ Greywater Discharge

Source: _____ Source: _____

ADDITIONAL FINDINGS: ① Mold through out -

② wall @ bedroom is failing mildew & mold up to 7' high

③ Holes in walls @ bathroom & floor is failing - bath tub filling through - floor appears to be failing -

④ Center wall @ living room is sinking

⑤ kitchen floor rotten -

⑥ doors @ entry not functional

⑦ Bedroom doors non-operable -

⑧ Exterior window