

**B**

Type

Plans

B- 13 1467

Permit Number

1706

Street Number

Dutton AVE

Street Name

BEL

Community Code

125-451-027

APN

COUNTY OF SONOMA - PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403 (707) 527-1900 FAX (707) 527-1103

Please Print  
 Your Name: SOLANO MECHANICAL INC. Date Applied: 8-22-95

IF YOU ARE HERE FOR A PERMIT, PLEASE COMPLETE TO EXPEDITE ASSISTANCE

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: 1706 DUTTON AVE City: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 Cross-Street: HEARN APN: 125-451-027  
 Directions: \_\_\_\_\_

Describe Project: REPLACE WALL HEATER & FLOOR Living Area: \_\_\_\_\_ Garage: \_\_\_\_\_ Decks: \_\_\_\_\_ Contract Price: 350.00

OWNER NAME AND ADDRESS: Name: Elizabeth Landrus Mailing Address: 1684 DUTTON AVE City: SANTA ROSA State: CA ZIP: \_\_\_\_\_ Day Ph: ( ) \_\_\_\_\_

APPLICANT NAME AND ADDRESS: Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Day Ph: ( ) \_\_\_\_\_

CONTRACTOR INFORMATION: Company Name: SOLANO MECHANICAL INC Address: 1800A WALTERS CT City: FAIRFIELD State: CA ZIP: 94533 Day Ph: (707) 428 6244

OTHER PERSONS (ARCHITECT, ENGINEER, ETC.): Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Day Ph: ( ) \_\_\_\_\_

**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: MID CENTURY  
 Policy NO: NO 509 027 04  
 (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.  
 Date: 8-22-95 Applicant: [Signature]  
**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**

**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: \_\_\_\_\_  
 Minimum Yard Requirements:  
 NOTE: All parcels greater than 1 Acre are required to have a minimum 30' setback  
 Front \_\_\_\_\_ Left \_\_\_\_\_ Right \_\_\_\_\_ Back \_\_\_\_\_  
 Approval for Permit Issuance: \_\_\_\_\_ Approval for Occupancy: \_\_\_\_\_  
 By: \_\_\_\_\_ Date: \_\_\_\_\_  
 Conditions: \_\_\_\_\_

**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: \_\_\_\_\_ Owner: \_\_\_\_\_

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  Compaction  
 Code Enforcement Violation:  Yes  No  
 Work Authorized: \_\_\_\_\_  
 New  Addition  Alteration  Repair  Moving  OccChg

**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-20 Lic No: 614337  
 Date: 8-22-95 Contractor: [Signature]

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: [Signature]  
2625 ASPINWALL CT FAIRFIELD CITY: FAIRFIELD ZIP: 94533  
 Contractor  Owner  Agent for Contractor  Agent for Owner

<input type="checkbox"/> Plans Approved		Machine Space for Permit Fee	
<input type="checkbox"/> No Plans Subject to Field Inspection			
Permit Cleared By	Date	<u>013624</u>	<u>08/28/95A01</u>
		#	<u>0131667</u>
Permit Cleared for Issuance By	Date	<u>STERRA</u>	<u>\$45.30</u>
		<u>**TTL</u>	<u>\$45.30</u>
Type of Construction	Occupancy	No of Stories	No of Bedrooms
			<u>CHECK</u>
			<u>CHNG</u>
			<u>\$45.30</u>
			<u>\$0.00</u>
Auto Fire Sprinklers Req'd	No of Units	Certificate of Occupancy	
Final Date	Inspector		

Permit # B-131667 Area 3

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

JOB ADDRESS: 1706 Dutton Ave Santa Rosa CA 95403  
 PERMIT NUMBER: B-131667