

B

Type



Plans

B- 133154

Permit Number

1201

Street Number

Hearn Ave

Street Name

BEL

Community Code

043-031-022

APN

Print Your Name: Greg Date Applied: 10/24/95

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

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: 1201 Hearn Ave City: Santa Rosa ZIP: _____
 Cross-Street: _____ APN: 043-031-022
 Directions: _____
 Describe Project: Replacement of a wall heater Living Area _____ Contract Price: _____
 Garage _____
 Decks _____

OWNER NAME AND ADDRESS
 Name: Betty Carstensen
 Mailing Address: 1201 Hearn Ave
 City: Santa Rosa State: Calif
 ZIP: 95407 Day Ph: (707) 545 6884

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

CONTRACTOR INFORMATION
 Company Name: Advanced Heating
 Address: 1755 - B Woolner Ave
 City: Sanfield State: Calif
 ZIP: 94533 Day Ph: (707) 428-3242

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:
American Eagle Ins
CNCF-1000259171
 (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 these provisions.
 Date: Oct 24 95 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. 3087, Civ. C.)
 Lenders Name: _____
 Lenders Address: _____

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: C-20 Lic. No.: 696587
 Date: Oct 24 95 Contractor: Advanced Heating

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: _____
 ADDRESS: _____ CITY: _____ ZIP: _____
 Contractor Owner Agent for Contractor Agent for Owner

Permit # B-133154 Area 3
 Permit Coordinator: D. Dilucio

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: _____

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 Occ/Chg

Plans Approved
 No Plans Subject to Field Inspection

Planchet Cleared By: SIERRA Date: 102595 Machine Space for Permit Fee: \$45.30
***T/L CHECK \$45.30
CHNG \$0.00
 Permit Cleared for Issuance By: 102595

Type of Construction	Occupancy	No. of Stories	No. of Bedrooms
Auto. Fire Sprinklers Req'd	No. of Units	Certificate of Occupancy	

Final Date: Expired 11/15/99 Inspector: _____

JOB ADDRESS: 1201 Hearn Ave, Santa Rosa, CA
 MAP REFERENCE: _____
 PERMIT NUMBER: B-133154
 INSPECTION AREA: 3

DEPARTMENT USE ONLY - BUILDING PERMIT QUESTIONNAIRE

Prior to issuance of a building permit, this department is required to verify that your project is consistent with regulation of other agencies. This questionnaire will assist us in informing you of those agencies you must contact and those approvals you must secure prior to issuance of a building permit.

Sewage disposal for the subject building will be provided by:

- Connection to public sewer
 Septic Disposal System
 The proposed building contains no plumbing

Water for the subject building will be provided by:

- A private well
 From the following water district
 The building contains no plumbing or water system

The subject building is located in the following school district: _____

The subject building (is) (is not) (may be) located within the Santa Rosa sphere of influence. These are the areas of anticipated future City annexations. Projects within these areas are subject to City review and approval prior to building permit issuance.

Access to the property:

- Exists and will not be altered
 Will be developed or altered
 Access is from a public or private street

Fire protection on this property is provided by the following Fire District: _____

This property (is) (is not) in a State Wildfire Responsibility Area.

Is project in Northern Sonoma County Air Pollution Control District (Check Map) YES NO

Will the building occupants need to comply with the applicable requirements of Sections 25505, 25533 and 25534 of the Health and Safety Code and the requirements for a permit for construction or modification from the Air Quality Control District?

- YES NO

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.

You have submitted plans to this department for review.

ALL CLEARANCES DESIGNATED BELOW WILL BE REQUIRED PRIOR TO ISSUANCE OF YOUR BUILDING PERMIT.

	Clearances Required	Clearances Received		Clearances Required	Clearances Received
Permit & Resource Management Department			Parks & Recreation Department		
Zoning Clearance	<input type="checkbox"/>	<input type="checkbox"/>	Park Fee	<input type="checkbox"/>	<input type="checkbox"/>
Grading Permit	<input type="checkbox"/>	<input type="checkbox"/>	Health Department		
Geotechnical Report	<input type="checkbox"/>	<input type="checkbox"/>	Food Handling	<input type="checkbox"/>	<input type="checkbox"/>
Elevation Certificate (Flood)	<input type="checkbox"/>	<input type="checkbox"/>	Special Districts (List District)		
Additional Fees (Plancheck)	<input type="checkbox"/>	<input type="checkbox"/>	Water _____	<input type="checkbox"/>	<input type="checkbox"/>
Owner Builder Verification	<input type="checkbox"/>	<input type="checkbox"/>	Sewer _____	<input type="checkbox"/>	<input type="checkbox"/>
Worker's Compensation	<input type="checkbox"/>	<input type="checkbox"/>	Utility Certificate		
Wastewater Discharge Permit	<input type="checkbox"/>	<input type="checkbox"/>	Santa Rosa	<input type="checkbox"/>	<input type="checkbox"/>
(Commercial Only)			Fire Marshall _____	<input type="checkbox"/>	<input type="checkbox"/>
(excluding South Park)			Air Quality Control	<input type="checkbox"/>	<input type="checkbox"/>
Development Fees	<input type="checkbox"/>	<input type="checkbox"/>	(Asbestos Declaration AB2791)		
Floor Plan For Assessor	<input type="checkbox"/>	<input type="checkbox"/>	School Mitigation Fee	<input type="checkbox"/>	<input type="checkbox"/>
(11"x17" Maximum)					
Well & Septic	<input type="checkbox"/>	<input type="checkbox"/>			
Sewer	<input type="checkbox"/>	<input type="checkbox"/>			
Road Encroachment	<input type="checkbox"/>	<input type="checkbox"/>			
Parcel Map Improvement Conditions	<input type="checkbox"/>	<input type="checkbox"/>			
Drainage	<input type="checkbox"/>	<input type="checkbox"/>			
Creek Setback	<input type="checkbox"/>	<input type="checkbox"/>			
Code Enforcement	<input type="checkbox"/>	<input type="checkbox"/>			
Investigation Fees	<input type="checkbox"/>	<input type="checkbox"/>			
(Equal to total of bldg., plmb., elec., mech. fees)					
Penalties	<input type="checkbox"/>	<input type="checkbox"/>			
(Equal to total of bldg., plmb., elec., mech. fees x _____)					

SPECIAL INSPECTION REQUIRED?		<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, SEE ADDITIONAL SHEET
INSPECTION RECORD	DATE	NAME	REMARKS	
FOUNDATION				
FORMS/SETBACK				
FOOTING				
WALLS				
UFER GROUND #				
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				
<input type="checkbox"/> INTERIOR				
<input type="checkbox"/> 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				
ELEC. METER AUTH.				
PANEL BOARDS/SERVICE				
GAS METER AUTH.				
GAS PRESSURE TEST				
HOUSE				
YARD				
MANUF. HOME FOUNDATION				
MANUF. HOME INSTALLATION				
CONTINUITY				FIRE INSP. REQ'D <input type="checkbox"/> Yes <input type="checkbox"/> No
STAIRS/SKIRTS				Inspected by:
RIDGE BOLTING				
SWIMMING POOL				
PRE-GUNITE				
PRE-DECK				
PRE-PLASTER/FENCE				
GRADING FINAL				
ELECTRICAL FINAL				
MECHANICAL FINAL				
PLUMBING FINAL				
FINAL				
OCCUPANCY (OK TO OCCUPY)				
				PLAN RETENTION REQUIRED
				Yes <input type="checkbox"/> No <input type="checkbox"/>

7/17/94 (11)

Verify Clearances from floor

PERMIT # 133154

County of Sonoma
Permit And Resource Management Department
2550 Ventura Avenue, Santa Rosa, CA 95403
Construction Inspection Section

CORRECTION NOTICE

Permit # 133154 Owner Custensen

Job Address 1201 Heain Ave

I have inspected work under the above permit and have observed the following code violations:

① Relocate pipe valve to same side of
access as heater controls

② Provide minimum clearances to base of unit
w/505D cozy. 2"

Make corrections before proceeding with other work. When corrections have been made, call 527-3551 or 527-1679 for reinspection.

Date 7/3/96 Inspector W. Wetherington