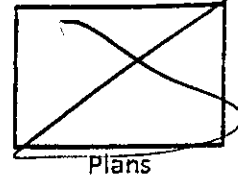


B
Type



B- 149461
Permit Number

1420
Street Number

Cunningham Rd
Street Name

TW1
Community Code

063-090-023
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: **Curt & Debbie Lytle**

Date

Applied: **1/11/98**

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: 1420 Cunningham Rd	City: Sebastopol	CA	ZIP: 95472
Cross-Street: Schaeffer Rd	APN: 010	Project Phone #: 707 823-5481	Project Fax #: 707 526-2563
Directions: 116 to Bloomfield, left on Cunningham Rd	Name: 116	Unit #	Lot #
Describe Project: 30x24 Garage	Living Area: 30x24	Contract Price:	

OWNER NAME AND ADDRESS

Name: Curt & Debbie Lytle
Mailing Address: 1420 Cunningham Rd
City: Sebastopol
State: CA
ZIP: 95472
Day Ph: 707 568-5438
Fax: 707 526-2563

APPLICANT NAME AND ADDRESS

Name: same as owner
Mailing Address: same as owner
City: Sebastopol
State: CA
ZIP: 95472
Day Ph: ()
Fax: ()

CONTRACTOR INFORMATION

Company Name:
Address:
City:
State:
ZIP:
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 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: _____ Applicant: _____
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 for this reason _____

Date: _____ Owner: **Curt Lytle**

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.

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: **Curt Lytle**

ADDRESS: _____ CITY: _____ ZIP: _____

☐ Contractor ☐ Owner ☐ Agent for Contractor ☐ Agent for Owner

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: **DA-20** 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: _____

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

Plancheck Cleared By: _____ Date: _____

Permit Cleared for Issuance By: _____ Date: _____

Type of Construction: _____ Occupancy: _____ No. of Stories: _____ No. of Bedrooms: _____

Auto. Fire Sprinklers Req'd: _____ No. of Units: _____ Certificate of Occupancy: _____

Final Date: **1/30/98** Inspector: **MC**

CIS-007.ctd Revised: 3/25/95

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

Permit # **13-171761** Area **7**

Permit Coordinator: _____

JOB ADDRESS:

1420 Cunningham Rd.

MAP REFERENCE:

PERMIT NUMBER:

13-171761

INSPECTOR:

MC

SPECIAL INSPECTION REQUIRED		<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	IF YES, SEE ADDITIONAL SHEET
INSPECTION RECORD	DATE	NAME	REMARKS	
FOUNDATION	10-14-98			
FORMS/SETBACK				
FOOTING				
WALLS	10-14-98			
UFER GROUND #				
CAISSONS/PIERS				
SLAB				
MASONRY				
RETAINING WALLS				
FIREPLACE				
FOOTING				
HEARTH/PROTECTION				
THROAT				
CHIMNEY				
UNDERFLOOR/UNDERSLAB				
U/F ELECTRICAL				
U/F MECHANICAL				
U/F PLUMBING				
U/F FRAMING				
U/F INSULATION				
SHEAR WALLS				
<input type="checkbox"/> INTERIOR	11-30-98			
<input checked="" type="checkbox"/> EXTERIOR				
DIAPHRAGMS				
<input checked="" type="checkbox"/> ROOF	11/16/98			
<input type="checkbox"/> FLOOR				
SIDING/SHEATHING				
HOLD DOWNS	11-30-98			
CLOSE-IN				
ROUGH ELECTRICAL				
ROUGH MECHANICAL				
ROUGH PLUMBING				
ROUGH FRAME				
SMOKE DETECTORS	11-30-98			
INSULATION				
WALLBOARD				
STUCCO/PLASTER				
<input type="checkbox"/> LATH				
<input type="checkbox"/> SCRATCH				
TUB/SHOWER PAN				
SUSPENDED CEILING				
ROUGH ELECTRICAL				
ROUGH MECHANICAL				
EXITING				
STAIRS/HANDRAILS				
RAMPS				
CORRIDORS/DOORS				
HANDICAP REQUIREMENTS				
ENERGY REQUIREMENTS				
TEMPORARY OCCUPANCY				
TEMPORARY ELECTRICAL				
TEMPORARY GAS				
ELECTRIC METER AUTHORIZATION				
PANEL BOARDS/SERVICE				
GAS METER AUTHORIZATION				
GAS PRESSURE TEST				
HOUSE				
YARD				
MANUF. HOME FOUNDATION				
MANUF. HOME INSTALLATION				
CONTINUITY	FIRE INSPECTION REQUIRED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
STAIRS/SKIRTS	Inspected by: PRMD			
RIDGE BOLTING	11-30-98			
SWIMMING POOLS				
PRE-GUNITE				
PRE-DECK				
PRE-PLASTER/FENCE				
GRADING FINAL				
ELECTRICAL FINAL				
MECHANICAL FINAL	N/A			
PLUMBING FINAL				
FINAL				
OCCUPANCY (OK TO OCCUPY)	11-30-98			

COUNTY OF SONOMA

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA

(707) 527-1900 FAX (707) 527-1103

BUILDING PERMIT RECEIPT

B-149461

Site Location Information Address: 1420 CUNNINGHAM RD HES Cross Street: SCHAFER RD		Printed By: FWILLIAM 11:12 Sep 30, 1998 APN: 063-090-023 Initialized By: BKEARNS B-BLD 9801	
Owner RIEBLI CARL JOSEPH & CATHERINE A 1610 CUNNINGHAM RD SEBASTOPOL CA 954725564		Applicant RIEBLI CARL JOSEPH & CATHERINE A 1610 CUNNINGHAM RD SEBASTOPOL CA 954725564	
Contractor Lic. #:		Architect or Engineer Lic. #:	

Permit Description: DETACHED GARAGE Valuation/Contract Price: \$14,551.20 Plancheck Multiplier: 1.00 Occupancy Type Private Garage/Carport Wood Frame or Steel Table Date: 07/01/1998	Penalty Multiplier (Where Applicable): Factor Sq. Feet Valuation 20.21 720 14,551.20 Total Valuation: 14,551.20	Status: PC APRVD Issued: Type: SADD
--	--	---

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
0018	1341	1004	APPLICATION PROCES'G FEE	\$36.00	\$.00
0050	925404-4040		S.M.I.P. RESIDENTIAL	\$1.46	\$.00
0060	1341		BLDG PERM PLAN CHECK FEE	\$121.48	\$121.48
0062	1341		ADDITIONAL PLANCHECK FEE	\$.00	\$.00
0100	1341	3502	SITE REVIEW/ELEV. CERT.	\$73.00	\$73.00
0119	925644-3661		CO FIRE MARSHAL REVIEW	\$.00	\$.00
0120	1341	3504	FIRE STDS INSPECT - PRMD	\$65.00	\$.00
0121	1341		FIRE SAFE STDS & REF PRMD	\$65.00	\$65.00
0122	1341	3504	ELECTRICAL FEE	\$31.54	\$.00
0123	1341	3504	MECHANICAL FEE	\$.00	\$.00
0124	1341	3504	PLUMBING FEE	\$.00	\$.00
0132	1341	3504	BUILDING PERMIT FEE	\$186.90	\$.00
0220	1600		VIO. PENALTY FEE (BLDG)	\$.00	\$.00
0221	4114	2001	VIO. INVEST. FEE (BLDG)	\$.00	\$.00
0707	3140	6054	REF.-GRADING/DRAIN. PLAN	\$.00	\$.00
0708	3140	6055	REF.-GRD/DRAIN DAM/DRVWY	\$.00	\$.00
1165	3829	6146	ZONING PERMITS W/O D.R.	\$19.00	\$.00
2000	335208		CTY-WDE CE TRAFFIC MIT	\$.00	\$.00
2001	335307		CTY-WDE NO TRAFFIC MIT	\$.00	\$.00
2002	335406		CTY-WDE SO TRAFFIC MIT	\$.00	\$.00
2003	335505		CTY-WDE WE TRAFFIC MIT	\$.00	\$.00
2005	335042		EASTMN LN TRAFFIC MIT	\$.00	\$.00
2006	335075		MOORLAND AV DRAINAGE MIT	\$.00	\$.00
2007	335034		LARK/WIKIUP TRAFFIC MIT	\$.00	\$.00
2008	335059		SONOMA VLY TRAFFIC MIT	\$.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
5018	1341-WAIVED	1004	PROCESSING FEE	\$.00	\$.00
5060	1341-WAIVED		BLDG PERM PLAN CHECK FEE	\$.00	\$.00
5062	1341-WAIVED		ADDITIONAL PLANCHECK FEE	\$.00	\$.00
5100	1341-WAIVED	3502	SITE REVIEW/ELEV. CERT.	\$.00	\$.00
5119	925644-3661-WAIVED		COUNTY FIRE SERVICES FEE	\$.00	\$.00
5120	1341-WAIVED	3504	ADDITIONAL FEE FIRE REV.	\$.00	\$.00
5121	1341-WAIVED		FIRE S.S. REFERRAL FEE	\$.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
5707	3140-WAIVED	6054	REF.-GRADING/DRAIN. PLAN	\$.00	\$.00
5708	3140-WAIVED	6055	REF.-GRD/DRAIN DAM/DRVWY	\$.00	\$.00
6165	3829-WAIVED	6146	ZONING PERMITS W/O D.R.	\$.00	\$.00
7000	925032-4040-WAIVED		PRM-CO-WDE CE DEV FEE TR	\$.00	\$.00
7001	925040-4040-WAIVED		PRM-CO-WDE NO DEV FEE TR	\$.00	\$.00
7002	925057-4040-WAIVED		PRM-CO-WDE SO DEV FEE TR	\$.00	\$.00
7003	925065-4040-WAIVED		PRM-CO-WDE WE DEV FEE TR	\$.00	\$.00
7005	925073-4040-WAIVED		PRM-EASTMN LN DEV FEE TR	\$.00	\$.00
7006	925107-4040-WAIVED		PRM-MOORLAND DEV FEE TR	\$.00	\$.00
7007	925024-4040-WAIVED		PRM LARK/WIK SP PLN DEV	\$.00	\$.00
7008	925081-4040-WAIVED		PRM-SONOMA VLY DEV FEE T	\$.00	\$.00

Permit qualified for fee waiver (Y/N): N	\$599.38	\$259.48
Total Calculated Fees	\$599.38	
Previously Paid	\$259.48	
Balance Due	\$339.90	

CASH REGISTER
VALIDATION
REQUIRED
BELOW



COUNTY OF SONOMA
PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

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

Field Operations • Code Enforcement • Permits • Environmental & Comprehensive Planning

Plan Check Submittal/ Resubmittal Checklist

Redlined plans must be returned with resubmittals

Project Information:

1420 Cunningham Rd
Project address

☒ Submittal

☐ Resubmittal

Curt & Debbie Lytle
Owner's Name

Building Permit #

Plan Checker's Name

Please check which return procedure is preferred if corrections are needed:

☐ Pickup

☒ Phone# 707-568-5438
Debbie

☐ Mail to:

Address

Contact Name: Debbie Lytle

City, St Zip

Comments:

For Department Use Only

Project Coordinator's Name

Residential

- ☒ 3 complete sets of signed Plans
(2 sets for resubmittal)
☐ 1 reduced set, Site Plan and Floor Plan Only
(8½"x11" max.)(2 sets if property is served by a septic system)

Commercial

- ☐ 3 complete sets of signed, stamped Plans
(2 sets for resubmittal)
☐ 1 reduced set, Site Plan and Floor Plan Only
(11"x17" max.)(2 sets if property is served by a septic system)

Plans

Mandatory Items

Qty. Rcvd.

- 3 William Lytle
Plot/Site Plan
Floor Plan (Electrical, Plumbing, Mechanical)
Foundation Plan (Footing Details)
Elevations
Framing Plan
Cross Sections
Structural Details
Signed Drawings (Stamped if Engineered)

Optional Items

Peer Review Letter

Other Items Which May be Required

Qty. Rcvd.

- 24 Title 24 Energy Calcs (2 signed, stamped sets)
Engineering Calcs (2 signed, stamped sets)
Geotechnical Report (2 signed, stamped sets)
Truss Calcs & Layout (2 signed, stamped sets)
Elevation Certificate
Flood Plain Management (Disposal of excess materials)
Creek Setback (Distance Delineated)
Utility Certificate (City of Santa Rosa)
Architectural Committee Approval
Special Inspections

Clearances

Permit & Resource Management Dept.

Rqd. Rcvd.

- ☒ ☒ Park Fee
☒ ☒ Zoning Clearance
☐ ☐ Grading Permit
☐ ☐ Residential Traffic Mitigation
☐ ☐ Commercial Traffic Mitigation
☒ ☒ Well & Septic
☒ ☒ Sewer
☒ ☒ Road Encroachment
☐ ☐ Parcel Map Improvement Conditions
☐ ☐ Code Enforcement
☐ ☐ Drainage Review
☐ ☐ Investigation Fees
(Equal to total of bldg.,plmb.,elec.,mech. fees)
☐ ☐ Penalties
(Equal to total of bldg.,plmb.,elec.,mech. fees x)

Dept. Of Health Services

- ☐ ☐ Food Handling
☐ ☐ Hazardous Materials
☐ ☐ Public Pools & Spas

Special District

☐ ☐ Water

☐ ☐ Sewer

Fire Marshall

☐ ☐

Air Quality Control

☐ ☐

School Mitigation Fee

☒ ☒

Applicant Signature

Staff Signature

Date

Curtis 3/15

COUNTY OF SONOMA

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

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

PLANCHECK RECEIPT ONLY - NOT A PERMIT	B-149461
---------------------------------------	----------

Address: 1420 CUNNINGHAM RD HES		Printed By: BKEARNS 12:34 Aug 14, 1998	
Cross Street: SCHAFFER RD		APN: 063-090-023	
Res/Com: R		In Planchek: 00/00/0000	
Std/Quick: S Fire District: GOLD RIDGE FIRE		Activity Type: B-BLD 9801	
Owner		Insp Area: 07	
RIEBLI CARL JOSEPH & CATHERINE A		Tax Rate Area: 090003	
1610 CUNNINGHAM RD		Applicant	
SEBASTOPOL CA		RIEBLI CARL JOSEPH & CATHERINE A	
954725564		1610 CUNNINGHAM RD	
		SEBASTOPOL CA	
		954725564	

Planchek Expires 1 Year from Date Planchek Fees Are Paid (See Register Validation Date)

Description: DETACHED GARAGE

Initialized By: BKEARNS		Approved By:		Status: STARTED	
Occupancy		Type		Planchek Multiplier: 1.00	
Private Garage/Carport		Wood Frame or Steel		Factor 20.21 Sq. Feet 720	
Table Date: 07/01/1998		Total Valuation:		14,551.20	

Item #	Item Account Code	Description	Fee	Previously Paid
0060	1341	BLDG PERM PLAN CHECK FEE	\$121.48	\$0.00
0100	1341	SITE REVIEW/ELEV. CERT.	\$73.00	\$0.00
0119	925644-3661	CO FIRE MARSHAL REVIEW	\$0.00	\$0.00
0121	1341	FIRE SAFE STDS &REF PRMD	\$65.00	\$0.00
0707	3140	REF.-GRADING/DRAIN. PLAN	\$0.00	\$0.00
0708	3140	REF.-GRD/DRAIN DAM/DRVWY	\$0.00	\$0.00
5060	1341-WAIVED	BLDG PERM PLAN CHECK FEE	\$0.00	\$0.00
5100	1341-WAIVED	SITE REVIEW/ELEV. CERT.	\$0.00	\$0.00
5119	925644-3661-WAIVED	COUNTY FIRE SERVICES FEE	\$0.00	\$0.00
5121	1341-WAIVED	FIRE S.S. REFERRAL FEE	\$0.00	\$0.00
5707	3140-WAIVED	REF.-GRADING/DRAIN. PLAN	\$0.00	\$0.00
5708	3140-WAIVED	REF.-GRD/DRAIN DAM/DRVWY	\$0.00	\$0.00

Qualifies for Fee Waivers (Y/N): N	\$259.48	\$0.00
Total Calculated Fees	\$259.48	
Previously Paid	\$0.00	
Balance Due	\$259.48	

CASH REGISTER
VALIDATION
REQUIRED

014527 08/23/98B01
0149461
SIERRA \$259.48
***TTL \$259.48
CHECK \$259.48
CHNG \$0.00



COUNTY OF SONOMA

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403

(707) 527-1900 FAX (707) 527-2210

Field Operations • Code Enforcement • Permits • Environmental & Comprehensive Planning

PLAN CHECK COMPLETION NOTICE FOR:

B-

149461

Site Address

Date

X Curt or Debbie Lytle
1420 Cunningham Rd.
Sebastopol CA 95472
707-823-5468

Dear Customer:

The building code plan check portion of your building permit application has been completed. Please note the box(es) checked below and the clearance(s) required in order to obtain your building permit. Your permit may be issued when all clearances have been acquired and fees paid. Please allow at least 30 minutes for the time required to obtain your permit.

OUR RECORDS INDICATE YOUR APPLICATION STILL NEEDS THE FOLLOWING CLEARANCES:

OUTSIDE PRMD:

- ☐ Architect Review/Homeowners Assn.
- ☐ Coastal Commission
- ☐ Local Fire Marshal

- ☐ School Mitigation fee (payable at School District)
- ☐ State Department of Fish & Game
- ☐ Other _____

AT PRMD - fee may be required (can be paid when you pay for Building Permit):

- ☐ Code Enforcement
- ☐ County Fire Marshal
- ☐ Drainage Review
- ☐ Park Fee
- ☐ Road Encroachment

- ☐ Septic
- ☐ Sewer
- ☐ Traffic Mitigation Fee
- ☐ Well

AT PRMD - No fee or fee is part of normal Building Permit cost:

- ☐ Owner Builder Form
- ☐ Workers Compensation (Certificate of Insurance)

- ☐ Zoning
- ☐ 8 1/2" x 11" Reduced Floor Plan

☐ **NO FURTHER CLEARANCES ARE REQUIRED. Your permit is ready to be issued.**

If you have any questions regarding permit fees, call (707) 527-1900. If you have any questions regarding the approval process, call (707) 527-2095 (On-duty Plan Check Specialist).

Thank you.

Plan Checker

α Curt or Debbie Lytle
1420 Cunningham Rd.
Sebastopol CA 95472

★ APPROVED ★

SEP 29 1998

PERMIT AND RESOURCE
MANAGEMENT DEPARTMENT

N
→

(23) 840 New

SEPTIC SYSTEM

EXIST. MOBILE HOME
1952 CUMMINS NO.

EXIST. BUILDING
40x30'

EXISTING
DRAIN

WELL

PROPOSED GARAGE
30'x24'

SEPTIC
SYSTEM

MAIN HOUSE
1420 CUMMINS NO.

APN 063-009-013

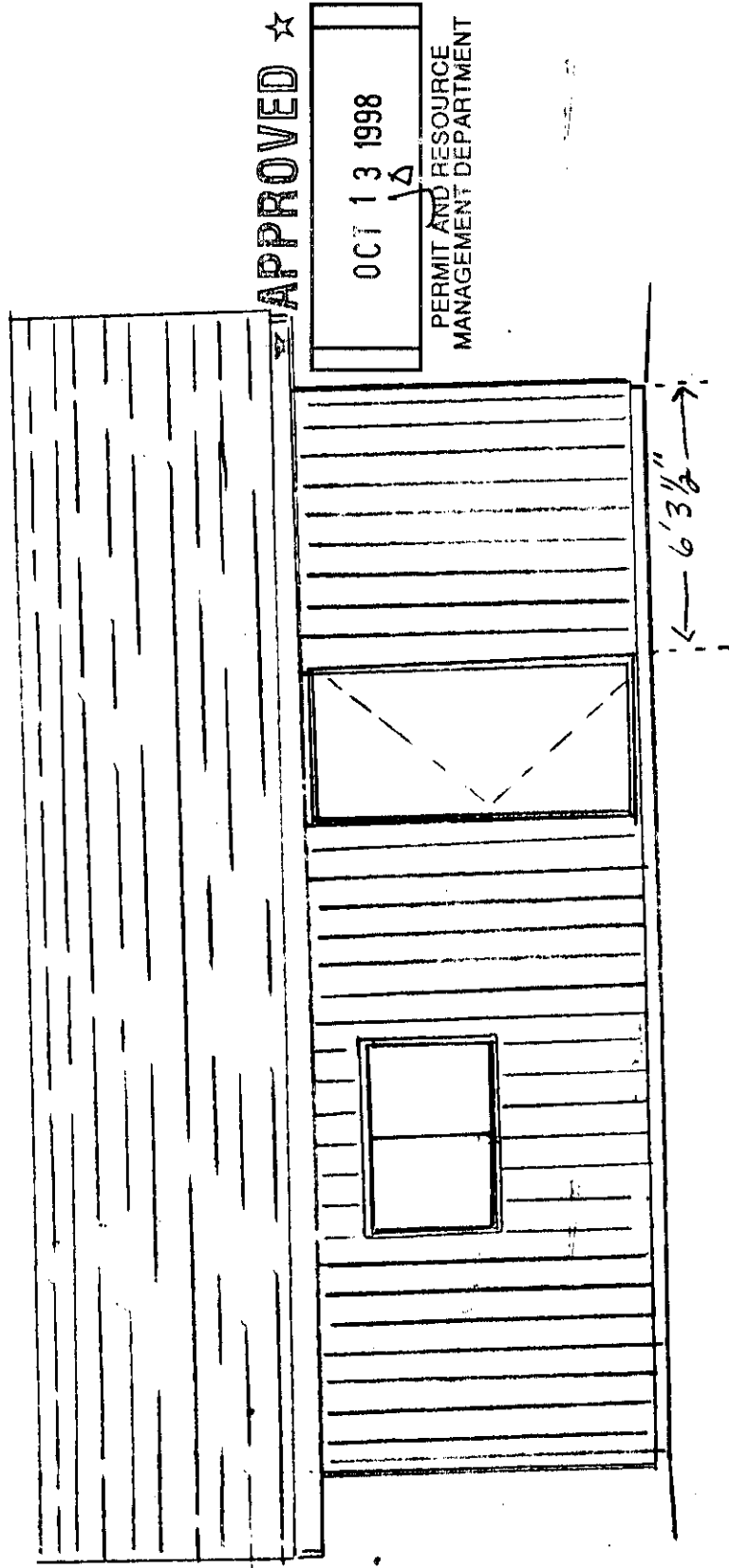
APN-063-009-013
090

CLINT'S LABORATORY RES.
1420 CUMMINS NO.
SEPT. 29, 1998
SCALE: 1" = 40' 0"
DATE: 6-23-78

DESIGNED BY C.F.

REVIEWED

CHECKED BY



APPROVED ☆

OCT 13 1998

14

PERMIT AND RESOURCE
MANAGEMENT DEPARTMENT

(B)

LEFT ELEVATION

WALL "B" DOOR RELOCATION

WALL "B" ADDED WINDOW - WINDOW SIZE SAME AS WALL "C"
LOCATED AT CENTER LINE BETWEEN REAR CORNER & SIDE DOOR