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Type

Plans

BLD08-1158

Permit Number

1081

Street Number

ROSE MEADOW CT

Street Name

BEL

Community Code

125-371-020

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:

Date
Applied:

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

| | |
|---|---|
| SITE LOCATION INFORMATION (PRINT CLEARLY) | |
| Site Address: <u>1081 Rose Meadow Ct.</u> | City: <u>Santa Rosa</u> ZIP: <u>95407</u> |
| Cross-Street: <u>West Ave</u> | Project Phone #: () Project Fax #: () |
| Directions: | Subd. Name: _____ Unit #: _____ Lot #: _____ |
| Describe Project: <u>Replace existing gas furnace w/ 95% unit in SFD. (Duct testing not req.)</u> | Living Area: _____ Garage: _____ Decks: _____ |
| | Contract Price: <u>5816.00</u> |
| OWNER NAME AND ADDRESS | APPLICANT NAME AND ADDRESS |
| Name: <u>Michael Scott</u> | Name: _____ |
| Mailing Address: <u>1081 Rose Meadow Ct.</u> | Mailing Address: _____ |
| City: <u>Santa Rosa</u> State: <u>CA</u> ZIP: <u>95407</u> | City: _____ State: _____ ZIP: _____ |
| Day Ph: () <u>705-9781</u> Fax: () _____ | Day Ph: () _____ Fax: () _____ |
| CONTRACTOR INFORMATION | OTHER PERSONS (ARCHITECT, ENGINEER, ETC.) |
| Company Name: <u>Thomas in Mechanical Design</u> | Name: _____ |
| Address: <u>414 Pipestone Cir</u> | Address: _____ |
| City: <u>Petaluma</u> State: <u>CA</u> ZIP: <u>94954</u> | City: _____ State: _____ ZIP: _____ |
| Day Ph: () <u>705-6116</u> Fax: () _____ | Day Ph: () _____ Fax: () _____ |
| WORKER'S COMPENSATION DECLARATION | |
| I hereby affirm under penalty of perjury one of the following declarations: | |
| <input type="checkbox"/> 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. | |
| <input checked="" type="checkbox"/> 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: <u>State Fund</u> | |
| Policy No: <u>1788503</u> | |
| <small>(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)</small> | |
| <input type="checkbox"/> 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: <u>5/1/08</u> | Applicant: <u>Alvin Kerr</u> |
| 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).): | |
| <input type="checkbox"/> 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.) | |
| <input type="checkbox"/> 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.) | |
| <input type="checkbox"/> 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: <u>C20</u> | Lic. No.: <u>826568</u> |
| Exp. Date: <u>6/30/08</u> | Contractor: <u>Alvin Kerr</u> |
| 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 <input type="checkbox"/> does <input type="checkbox"/> does not contain asbestos, or that <input type="checkbox"/> 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 Worker's Compensation law, this permit shall be deemed revoked. | |
| PERMITTEE SIGNATURE: <u>Alvin Kerr</u> | |
| ADDRESS: _____ | CITY: _____ ZIP: _____ |
| <input checked="" type="checkbox"/> Contractor | <input type="checkbox"/> Owner <input type="checkbox"/> Other Licensed Professional |
| Final Date: _____ | Inspector: _____ |

JOB ADDRESS: 1081 ROSE MEADOW CT, BCL
PERMIT NUMBER: BDD08-1158
INSPECTION AREA: 703

| | |
|--|--|
| 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 all parcels greater than 1 Acre to have a min. 30' setback unless mitigated. <input type="checkbox"/> Mitigation Required <input type="checkbox"/> Address subject to change |
| Approval for Permit Issuance: _____ | Approval for Occupancy: _____ |
| By: _____ | By: _____ |
| Date: _____ | Date: _____ |
| Conditions: _____ | |
| Sewer Connection: <input type="checkbox"/> Available <input checked="" type="checkbox"/> Fees Paid | Approved by: _____ Date: _____ |
| Road Encroachment: <input type="checkbox"/> Fees Paid | Approved by: _____ Date: _____ |
| Septic System Permit Clearance # _____ | Approved by: _____ Date: _____ |
| Flood Zone: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 100 Year Flood Elevation: _____ | Site Review: _____ |
| Drainage Review: _____ | Approved by: _____ Date: _____ |
| Fire: _____ | Approved by: _____ Date: _____ |
| Code Enforcement Violation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Violation # _____ | This permit is limited to _____ days. <input checked="" type="checkbox"/> |
| Work Authorized: <u>SFD/Replace gas furnace</u> | |
| <input type="checkbox"/> Plans Approved | <input type="checkbox"/> Post FIRM <input type="checkbox"/> Aqueous Prio Report Available |
| <input checked="" type="checkbox"/> No Plans Subject to Field Inspection | <input type="checkbox"/> Pre FIRM <input type="checkbox"/> Geotechnical report Available |
| Plancheck Cleared by: _____ Date: _____ | Type of Construction: _____ Occupancy: <u>R3</u> No. of Stories: _____ No. of Bedrooms: _____ |
| Permit Cleared for Issuance by: <u>Alvin Kerr</u> Date: <u>4-2-08</u> | Auto. Fire Sprinklers Req'd: _____ No. of Units: _____ Certificate of Occupancy: _____ |
| PAYMENT RECEIVED | |
| \$ _____ | |
| APR 01 2008 | |
| PERMIT AND RESOURCE MANAGEMENT DEPARTMENT COUNTY OF SONOMA | |

THIS PERMIT SHALL EXPIRE IN THREE(3) YEARS FROM DATE FEES ARE PAID UNLESS OTHERWISE NOTED BY CODE ENFORCEMENT

| 131) SPECIAL INSPECTION REQUIRED | | <input type="checkbox"/> YES | <input type="checkbox"/> NO | IF YES, SEE ADDITIONAL SHEET | |
|---------------------------------------|--------------------------------------|------------------------------|--|--------------------------------|---------------------------------|
| INSPECTION RECORD | DATE | NAME | REMARKS | | |
| 101) ROUGH GRADING | | | | | |
| 103) FOUNDATION | | | | | |
| FORMS/SETBACK | | | | | |
| FOOTING | | | | | |
| WALLS | | | | | |
| 106) UFER GROUND # | | | | | |
| 104) CAISSONS/PIERS | | | | | |
| 105) SLAB | | | | | |
| 107) UNDERGROUND UTILITIES | | | | | |
| 110) MASONRY | | | | | |
| 109) RETAINING WALLS | | | | | |
| 113) FIREPLACE | | | | | |
| FOOTING | | | | | |
| HEARTH/PROTECTION | | | | | |
| THROAT | | | | | |
| 114) CHIMNEY | | | | | |
| 120) UNDERFLOOR/UNDERSLAB | | | | | |
| 115) HYDRONICS | | | | | |
| 116) U/F ELECTRICAL | | | | | |
| 117) U/F MECHANICAL | | | | | |
| 118) U/F PLUMBING | | | | | |
| 119) U/F FRAMING | | | | | |
| 139) U/F INSULATION | | | | | |
| 126) SHEAR WALLS | | | | | |
| <input type="checkbox"/> INTERIOR | <input type="checkbox"/> EXTERIOR | | | | |
| 127) DIAPHRAGMS | | | | | |
| <input type="checkbox"/> ROOF | <input type="checkbox"/> FLOOR | | | | |
| 134) SIDING/SHEATHING | | | | | |
| 125) HOLD DOWNS | | | | | |
| 132) CLOSE-IN | | | | | |
| 122) ROUGH ELECTRICAL | | | | | |
| 123) ROUGH MECHANICAL | | | | | |
| 124) ROUGH PLUMBING | | | | | |
| 128) ROUGH FRAME | | | | | |
| 160) SMOKE DETECTORS | | | | | |
| 139) INSULATION | | | | | |
| 142) WALLBOARD | | | | | |
| 143) FIREWALLS | | | | | |
| 135) STUCCO/PLASTER | | | | | |
| <input type="checkbox"/> LATH | <input type="checkbox"/> SCRATCH | | | | |
| 137) ROOFING | | | | | |
| 130) TUB/SHOWER PAN | | | | | |
| 162) FIRE DAMPERS/DOORS | | | | | |
| 164) SUSPENDED CEILING | | | | | |
| <input type="checkbox"/> ROUGH ELEC. | <input type="checkbox"/> ROUGH MECH. | | | | |
| 165) EXITING - RAMPS/STAIRS | | | | | |
| 163) HANDRAILS/GUARDRAILS | | | | | |
| CORRIDORS/DOORS | | | | | |
| 166) ACCESSIBILITY COMPLIANCE | | | 650) SUSMP INSPECTION | | |
| 144) WATER TANKS | | | 651) NPDES EROSION COMPLIANCE | | |
| <input type="checkbox"/> SLAB | <input type="checkbox"/> WALLS | | 652) NPDES SEDIMENT COMPLIANCE | | |
| 170) TEMPORARY OCCUPANCY | | | 653) NPDES DOCS/SWPPP | | |
| 171) TEMPORARY ELECTRICAL | | | FIRE INSPECTION REQUIRED | DATE | NAME |
| 172) TEMPORARY GAS | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| 174) ELECTRIC METER AUTHORIZATION | | | 759) KNOX BOX | | |
| 152) PANEL BOARDS/SERVICE | | | 760) PROPANE TANK HOLD DOWNS | | |
| 189) SEPTIC ELECTRIC FINAL | | | 770) SPRINKLER FINAL | | |
| 175) GAS METER AUTHORIZATION | | | 771) ABOVEGROUND HYDROSTATIC | | |
| 153) GAS PRESSURE TEST | | | 772) UNDERGROUND HYDROSTATIC | | |
| HOUSE | YARD | | 773) UNDERGROUND FLUSH | | |
| 190) MANUF. HOME FOUNDATION | | | 774) THRUST BLOCKS | | |
| 191) MANUF. HOME INSTALLATION | | | 775) PIPE WELD | | |
| CONTINUITY | | | 776) HYDRANTS/APPLIANCES | | |
| STAIRS/SKIRTS | | | 777) PUMP ACCEPTANCE | | |
| RIDGE BOLTING | | | 778) WATER SUPPLY/TANK | | |
| 193) MANUF. HOME COND. FINAL | | | 779) ALARM SYSTEM | | |
| SWIMMING POOLS | | | 780) HOOD & DUCT SYSTEM | | |
| 194) PRE-GUNITE | | | 781) ABOVEGROUND TANK/DISPENSER | | |
| 195) PRE-DECK | | | 198) FIRE FINAL | | |
| 196) PRE-PLASTER/FENCE | | | CLEARANCES: | | |
| 197) VINYL/FIBERGLASS POOL EXCAVATION | | | FIRE | <input type="checkbox"/> Local | <input type="checkbox"/> County |
| 102) GRADING FINAL | | | HEALTH DEPARTMENT | | |
| 176) ELECTRICAL FINAL | | | ZONING | | |
| 177) MECHANICAL FINAL | | | SANITATION | | |
| 178) PLUMBING FINAL | Date: 4/2/11 | | | | |
| 199) FINAL | | | | | |
| OCCUPANCY (OK TO OCCUPY) | | | | PLAN RETENTION REQUIRED? | |
| | | | | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

EXPIRED

PERMIT # BLD008-1158