

B

Type



Plans

BLD 12-0378

Permit Number

1603

Street Number

Hampton Way

Street Name

BEL

Community Code

125-082-022

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: 1603 HAMPTON WAY City: SANTA ROSA ZIP: 95407
 Cross-Street: SEBASTOPOLE RD APN: 125-082-022 Project Phone #: 415 250 8888 Project Fax #: _____
 Directions: 12 TO DUTTON, L UNDER FRWY Email address: MSKSLR@COMST.NET Unit #: _____ Lot #: _____
 Describe Project: NEW DOOR S, ROOF, COM SKYLIGHTS 200AMP PANEL I.I. Living Area: COMMERCIAL Contract Price: 11,000
 Garage: _____ Decks: C2

OWNER NAME AND ADDRESS Name: JEANNETTE TURPIN - PHYLLIS HALL
 Mailing Address: C/O KAREN KESSLER 77 ESTELLE AV
 City: LARKSPUR State: CA ZIP: 94939
 Day Ph: 415 250-8888 Fax: 415 461-6666

APPLICANT NAME AND ADDRESS Name: KAREN KESSLER
 Mailing Address: 77 ESTELLE AV
 City: LARKSPUR State: CA ZIP: 94939
 Day Ph: 415 250-8888 Fax: 415 461-6666

CONTRACTOR INFORMATION
 Company Name: KESSLER CONSTRUCTION
 Address: 77 ESTELLE AV
 City: LARKSPUR State: CA ZIP: 94939
 Day Ph: 415 250-8888 Fax: 415 461-6666

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: _____

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: C2, VOH

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 3708 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

FOR DEPARTMENT USE
 Zoning: VPE11-0070 File No: _____ Acres: 0.48
 Existing Use/Structures: Commercial Bldg.
 Proposed Use/Structures: Tenant Improvement
 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: Blake Date: 3-15-12

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 _____

Sewer Connection: Available Fees Paid
 Approved by: _____ Date: 4/31/12

By my signature below I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following website: <http://www.leginfo.ca.gov/calaw.html>.
1/24/12 _____
 Date Signature of Property Owner or Authorized Agent

Road Encroachment: Fees Paid
 Approved by: _____ Date: _____

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: B Lic. No.: _____
 Exp. Date: _____ Contractor: _____

Septic System Permit/Clearance #
 Approved by: _____ Date: _____

ASBESTOS DECLARATION
 Written asbestos notification pursuant to Part 81 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.

Flood Zone: Yes No 100 Year Flood Elevation: _____
Site Review
 Drainage Review:
 Approved by: _____ Date: _____

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.

 PERMITTEE SIGNATURE

Fire: Paul Marquez Date: 3-13-12
Code Enforcement Violation Yes No Violation # _____
 This permit is limited to _____ days.

ADDRESS: 77 ESTELLE AVE ZIP: LARKSPUR CA 94939
 Contractor Owner Other Licensed Professional

Work Authorized: NEW ACCESSIBLE DOOR
POI & PAINTING - PERIODIC
NEW 200AMP SERVICE
SEARCH

<input checked="" type="checkbox"/> Plans Approved	<input type="checkbox"/> Post FIRM	<input type="checkbox"/> Alquist Priolo Report Available
<input type="checkbox"/> No Plans Subject to Field Inspection	<input type="checkbox"/> Pre FIRM	<input type="checkbox"/> Geotechnical report Available
Planned Cleared By: _____ Date: <u>3/13/12</u>	Type of Construction: <u>B</u>	Occupancy: _____ No. of Stories: _____ No. of Bedrooms: _____
Permit Cleared for by: _____ Date: <u>3-14-12</u>	Auto Fire Sprinkling Req'd: <u>NO</u>	No. of Units: _____ Certificate of Occupancy: _____

PAYMENT RECEIPT
 Machine Space for Permit Fee
 \$ 18
 MAR 14 2012
 PERMIT AND RESOURCE MANAGEMENT DEPARTMENT
 COUNTY OF SONOMA
 Distribution: White - File Canary - Applicant Blue - Assessor Cardstock - Inspector

JOB ADDRESS: 1603 HAMPTON WAY
 PERMIT NUMBER: BL012-0378
 INSPECTION AREA: 8

131) SPECIAL INSPECTION REQUIRED		<input type="checkbox"/> YES	<input checked="" 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				
144) WATER TANKS				
<input type="checkbox"/> SLAB	<input type="checkbox"/> WALLS			
170) TEMPORARY OCCUPANCY	4-20-12	ALLEN MARTIN		
171) TEMPORARY ELECTRICAL				
172) TEMPORARY GAS				
174) ELECTRIC METER AUTHORIZATION				
152) PANEL BOARDS/SERVICE				
189) SEPTIC ELECTRIC FINAL				
175) GAS METER AUTHORIZATION				
153) GAS PRESSURE TEST				
HOUSE	YARD			
190) MANUF. HOME FOUNDATION				
191) MANUF. HOME INSTALLATION				
CONTINUITY				
STAIRS/SKIRTS				
RIDGE BOLTING				
193) MANUF. HOME COND. FINAL				
SWIMMING POOLS				
194) PRE-GUNITE				
195) PRE-DECK				
196) PRE-PLASTER/FENCE				
197) VINYL/FIBERGLASS POOL EXCAVATION				
102) GRADING FINAL				
176) ELECTRICAL FINAL				
177) MECHANICAL FINAL				
178) PLUMBING FINAL				
199) FINAL				
OCCUPANCY (OK TO OCCUPY)				

APPROVED:
 VERIFIED IN FIELD W/
 S/ROSA FIRE INSPECTOR
 4-18-12 SB

650) SUSMP INSPECTION		
651) NPDES EROSION COMPLIANCE		
652) NPDES SEDIMENT COMPLIANCE		
653) NPDES DOCS/SWPPP		
FIRE INSPECTION REQUIRED	DATE	NAME
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
759) KNOX BOX		
760) PROPANE TANK HOLD DOWNS		
770) SPRINKLER FINAL		
771) ABOVEGROUND HYDROSTATIC		
772) UNDERGROUND HYDROSTATIC		
773) UNDERGROUND FLUSH		
774) THRUST BLOCKS		
775) PIPEWELD		
776) HYDRANTS/APPLIANCES		
777) PUMP ACCEPTANCE		
778) WATER SUPPLY/TANK		
779) ALARM SYSTEM		
780) HOOD & DUCT SYSTEM		
781) ABOVEGROUND TANK/DISPENSER		
198) FIRE FINAL		
CLEARANCES:		
FIRE	<input type="checkbox"/> Local	<input type="checkbox"/> County
HEALTH DEPARTMENT		
ZONING		
SANITATION		

EXPIRED
 Date: 3/14/15

PERMIT # 2012-0378

PLAN RETENTION REQUIRED?
 Yes No

Building/Grading Permit Application Submittal Checklist

CSS-003

Site Address: 1603 HAMPTON WY.
 Applicant Name: KAREN KESSLER
 Mailing Address: 77 ESTELLE AV.
 City/Town: ARKSPUR CA 94939
 Phone: 707/2508888 State: CA Zip: 94939
 Fax: 707/461-6666

BLD/GRD Permit Number: 125082022
 Assessor Parcel Number: TENANT IMPROVEMENT
 Project Description: _____

Plan Check Comments/ Corrections: _____
 Contact Person: KAREN KESSLER Email: MSKSLR@COMCAST.NET
 Email Mail to above address Call to pick up (phone number 707/250-8888)

This form lists the items required for plancheck submittal. The fees received on this date 1/31/12 cover the cost of reviewing plans prior to permit issuance. **Before** a building permit can be issued, the required approvals listed below must be obtained and building permit fees, development fees, and any other applicable fees must be paid.

----- U DO NOT WRITE BELOW THIS LINE - To Be Completed by PRMD Staff U -----

Required Plans for Building/Grading Plancheck:

- 4 complete sets of signed and / or stamped plans for building permits (additional sets may be required by other PRMD Divisions)
- 4 complete sets of signed and / or stamped plans for grading permits (additional sets may be required by other PRMD Divisions)

Mandatory Items for Building Permits

- Received
- Plot / Site Plan (form CSS-019)
 - Floor Plan (electrical, plumbing & mechanical)
 - Foundation Plan (footing details)
 - Elevations
 - Framing Plan
 - Cross Sections
 - Structural Details
 - Signed Drawings (stamped if engineered)
- Site Evaluation
- Required
 - Waived (Per PRMD Policy 4-0-2)
 - Completed

Other Items Which May be Required for Building Permits

- Required # Received
- Title 24 Energy Calcs (2 signed, sets)
 - Engineering Calculations (2 signed, stamped sets)
 - Hydrology & Hydraulic Calcs (2 signed, stamped sets)
 - Geotechnical Report (2 signed, stamped sets)
 - Geotechnical Foundation Approval Letter
 - Truss Calcs and Layout (2 signed, stamped sets)
 - Flood Elevation Certificate
 - Letter of Authorization
 - Installation Manuals (2)
 - Special Inspection Form
 - Septic Remodel Worksheet (form WLS-029)
 - Build IT Green (BIG) or LEED Checklists (per form BPC-028)

Cubicle #	Required Approvals	Required for Permit Issuance	Plan Check Only Staff signature and date	Approved for Issuance Staff signature and date
	Fire Services			
14	Planning and Zoning File #:	<input type="checkbox"/> Affordable Housing/Work Force Housing Fees (see PRMD website)	SH 1/31/12	
	Building	<input type="checkbox"/> Environmental Health: Food/Pool/Wine Tasting (707) 565-6565		
9	Public Sewer / Water			AK 1/31/12
	Road Encroachment			
	Well and Septic			
	Code Enforcement			
	Grading/Storm Water			

Required Development Fees:

- School Mitigation Fee for _____ square feet
Payable at: _____
- Fire Mitigation Fee (Windsor, Airport, etc.)
Payable at: _____
- Address Assignment/Correction Fee
- Residential Traffic Mitigation Fee
- Commercial/Industrial Traffic Mitigation Fee
- Park Mitigation Fee
- Affordable Housing/Work Force Housing Fees (see PRMD website)

Applicant Signature: [Signature] Staff Signature: [Signature] Date: 1/31/12

Sonoma County Permit and Resource Management Department
 2550 Ventura Avenue ♦ Santa Rosa, CA ♦ 95403-2829 ♦ (707) 565-1900 ♦ Fax (707) 565-1103



COUNTY OF SONOMA 3/13/12 JB
PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403
(707) 565-1900 FAX (707) 565-2210

Plan Check Revision & Clearance Notification

This form & redlined plans must be returned with resubmittals

Project Information:

Project address: 1603 Huntington Way
Building Permit Application # (Plancheck #): Bld 12-0378

Owner's Name: Karen Kissler
Plan Checker's Name: Paul Marquez

Form with checkboxes for Pickup, Phone#, Mail to, and Applicant's Name: Karen Kissler. Includes phone number Ph # 415 250 8888.

Comments:

Continuation sheet attached

PLEASE NOTE!

ALL CHECKED ITEMS MUST BE ADDRESSED OR YOUR RESUBMITTAL WILL NOT BE ACCEPTED.

Residential

4 complete sets of signed Plans

Commercial

4 complete sets of signed, stamped Plans.

Plans

Redlined plans must be returned with resubmittals

- List of items with 'Rqd.' and 'Rcvd.' checkboxes: Plans require correction, Plot/Site Plan, Title 24 Energy Calculations, Engineering Calculations, Geotechnical Report, etc.

PLEASE NOTE! Items marked below are required prior to building permit issuance.

Permit & Resource Management Dept.

- List of required items for Permit & Resource Management Dept: Owner-Builder Form, Worker's Compensation verification, Zoning Clearance, etc.

Dept. Of Health Services

- List of required items for Dept. Of Health Services: Food Handling, Hazardous Materials, Public Pools & Spas, etc.

Plans Examiner

Phone Number (after 1:30)

Date

Handwritten signature and date 3-13-12

1 1
BLD12 - 0378

January 31, 2012

Sonoma County Permit and
Resource Management Department,
Attn: REGINA DE LA CRUZ
2550 Ventura Avenue
Santa Rosa, CA 95403

Re: 1603 Hampton Way, Santa Rosa, CA – Karen Kissler to pull permit.

Dear Ms. Cruz,

I, Jeannette L. Turpin, a Successor Trustee to the C.W. Hall Trust, on behalf of the C.W. Hall Trust and for Phyllis Hall, who is deceased, hereby allow Karen Kissler to pull permits on my behalf for work at 1603 Hampton Way, Santa Rosa, CA.

Jeannette L. Turpin TTE
Jeannette L. Turpin, Trustee

dated: January 31, 2012

Please fax this permission letter to Regina De La Cruz (Fax: 707-565-1745).

Phone number for Ms. Cruz is 707-565-3721

RETAIN

Correction Notice

CNI-005

Permit # BLD12-0378 Owner _____

Inspection Code 174

Job Address 11603 Haapton Way

Other Foundation Underfloor Shear/Roof Nailing Close-In Final

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

① Address planning issues and obtain planning approval prior to approval of meter release

PER DISCUSSION WITH BLACKH & PLANNING PLANNING APPROVAL CENTER. AUTHORIZED METER RELEASE. R - R.G.R.

Make corrections before proceeding with other work. When corrections have been made, call 565-3551 or 565-1679 for reinspection.

- This Correction Notice must be brought into PRMD with requested revisions.
- This Correction Notice along with requested revisions shall be faxed to (707) 565-1972.

Inspector [Signature]

Date 12/6/12

White - Job Canary - Permit Pink - Office

Final Signed CNI

4-19-12 HAS BEEN REVOKED

Correction Notice

CNI-005

P. 1 OF 3

Permit # RLD 12-0378 Owner HALL

Inspection Code 199-166

Job Address 1603 HAMPTON WAY

Other Foundation Underfloor Shear/Roof Nailing Close-In Final

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

Page 1
4/12/12
1) UNAUTHORIZED VEHICLE TOWING SIGN TO BE MIN 60" OFF PARKING PAVEMENT MISSING TOW PHONE NUMBER & ADDRESS

6/12/12
2) PER DISCUSSION WITH BLAKE H & PLANNING MAIN ENTRANCE DOOR MISSING TACTILE EXIT SIGN & APPROX 1 SA SIGNAGE

3) THRESHOLDS AT EXT DOORS HAVE ELEVATION CHANGE ABOVE 1/4" AND NOT SECURE

4) SPACE B DOOR FROM EXTERIOR 'SOUTH SIDE' HAS MANUAL FLUSH BOLTS & LESS THAN 32" CLEAR WIDTH

5) PATH OF TRAVEL FROM MAIN ENTRANCE TO DOUBLE DOORS HAS ABRUPT LEVEL CHANGES & SLOPE OVER 5%

6) EAST ENTRY DOOR "HORIZONTAL WAY SIDE" HAS DRAIN IN PATH OF TRAVEL WITH CLEARANCE GREATER THAN 1/2". DOOR THRESHOLD NON-COMPLIANT, NO SIGNAGE

Make corrections before proceeding with other work. When corrections have been made, call 565-3551 or 565-1679 for reinspection.

NO LATCH SIDE CLEARANCE

- This Correction Notice must be brought into PRMD with requested revisions.
- This Correction Notice along with requested revisions shall be faxed to (707) 565-1972.

Inspector WALTER MARTIN Date 4-21-12

White - Job Canary - Permit Pink - Office

7) GAS METER REQUIRES BOLLARD PROTECTION

Final Signed on 4-19-12 HAS BEEN REVOKED

Correction Notice

CNI-005

Permit # BLD 12-0378 Owner HALL

Inspection Code 199-166

Job Address 1603 HAMPTON WAY

Other Foundation Underfloor Shear/Roof Nailing Close-In Final

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

INTERIOR

1) MANUAL DEAD BOLTS NOT AUTHORIZED ONLY DOUBLE ACTING HARDWARE

OFFICE

2) ELEC OUTLETS LESS THAN 15" TO BTM OF BOX

3) REQUIRED CLEAR FLOOR AREA AT ENTRANCE TO COMPLY WITH (5) 1A2.10

MAIN ROOM

4) BATHROOM APPROX 10' APPROX CURTAIN ROD AUTHORIZED TO RE-SMOOTH & UNINTERRUPTED. SEE #4 DOOR REQ P. A2.1

5) WEST EXIT DOOR NON-COMPLIANT. A. DEAD-BOLT LANDING, SIGNAGE

6) BATHROOM BEING RENOVATED. NOT COMPLIANT DOOR WIDTH, CLEAR AREA, SINK, TOILET, SIGNAGE.

7) OUTLETS BELOW 15" TO 2FT OF BOX

NORTH OFFICE

8) OUTLETS BELOW 15" TO BTM OF BOX.

Make corrections before proceeding with other work. When corrections have been made, call 565-3551 or 565-1679 for reinspection.

- This Correction Notice must be brought into PRMD with requested revisions.
- This Correction Notice along with requested revisions shall be faxed to (707) 565-1972.

Inspector ELLEN MARTINI

Date 4-20-12

White - Job Canary - Permit Pink - Office

FINAL SIGNED
4-19-12 Has been
REVOKED

Correction Notice

CNI-005

P. 3 OF 3

Permit # BLD 12-0378 Owner HALL
Inspection Code 199-164
Job Address 1603 HAMPTON WAY

Other Foundation Underfloor Shear/Roof Nailing Close-In Final

TENANT
SPACE
B

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

- 1) OPEN ELECTRICAL BOX'S SWITCHES
- 2) DOUBLED KEY DEAD-BOITS NOT ALLOWED
WATER HTK ROOM
- 3) NUMEROUS EIEC VIOLATIONS IN SPACE B
HAVE "ELECTRICIAN" ADDRESS.
- 4) SPACE R STORAGE DOORS NON-COMPLIANT.
WIDTH, HARDWARE, KICK PLATES
- 5) EXIT DOOR TO HAMPTON WAY NON-COMPLIANT
DEAD-BOIT, THRESHOLD, SIGNAGE
- 6) SWITCHES ABOVE 48" TO BTM OF BOX,
OUTLETS
- 7) BATHROOM IN STORQ STORAGE AREA APPEARS
TO BE IN REMODEL.

Make corrections before proceeding with other work. When corrections have been made, call 565-3551 or 565-1679 for reinspection.

- This Correction Notice must be brought into PRMD with requested revisions.
- This Correction Notice along with requested revisions shall be faxed to (707) 565-1972.

Inspector ALLEN MARTIN Date 4-20-12

White - Job Canary - Permit Pink - Office



City of
Santa Rosa

THESE ATTACHMENTS ARE PART
OF APPROVED PLANS.
* DO NOT REMOVE THEM *

FIRE DEPARTMENT MEMORANDUM

MAR 13 2012

PERMIT AND RESOURCE
MANAGEMENT DEPARTMENT
BUILDING PLAN CHECK

Date: March 12, 2012
To: PRMD
From: Mark Pedroia, Senior Fire Inspector
Subject: BLD12-0378 F12-0047 - 1603 Hampton Way ~~PERMIT #~~

The Fire Department has completed our review of the project and has no outstanding issues that prevent the issuance of permits. Our review is complete based upon responses from the Applicant.

1. The occupancy classification of the interior space to be occupied by a tenant(s) needs to be identified in order to ensure the correct requirements are applied. Mercantile, storage, professional office? Previous use was non-compliant auto repair, prior to that a plumbing business. The site has code enforcement history.
 - i. **Applicants Response: "the SE office in the rear building (the wood one) will be the reception area. The NE office will be my office. The large area remaining to the west is the dispensary area with counters, shelves, seating for patients, and medicine. The metal building and the shed on the property will be for storage of desks, soil, and nutrients (plant food). Nothing will be flammable. On the west side of the metal building are two small offices. The north one will be mostly empty (an education center) and the south one will be a storage area for a safe."**
2. The storage shed on the South property line is unrated construction with opening on the property line. This condition could never comply with any adopted Building Code edition. It is my presumption that the storage shed is an illegal structure. The structure can be legitimized or removed.
 - i. **County records indicate that property lines may not coincide with fencing and this is an existing pre-code condition**
3. Interior stairs are indicated on the plan but no information exists on the 2nd floor layout. It is unclear if the 2nd floor exists under a permit or if it was illegal construction. From the exterior, it does not appear that sufficient ceiling space could exist for two stories without one being too short. The current project under consideration is an "accessibility upgrade" but does not include the 2nd floor, if it exists.
 - i. **A demo permit has been issued to address the mezzanine**