

**B**

Type

Plans

B- 114902

Permit Number

582

Street Number

Smokewood Dr

Street Name

Bel

Community Code

043-162-044

APN

**SONOMA COUNTY  
BUILDING INSPECTION**

575 ADMINISTRATION DRIVE  
SANTA ROSA, CA 95403-2884  
TELEPHONE (707) 527-2221

JOB ADDRESS

**OWNER**  
NAME: Ronald + Carla Riggs  
MAILING ADDRESS: 552 Smokewood DR  
CITY: Santa Rosa Ca ZIP CODE: 95407 TEL NO: 5231897

**PROJECT**  
ADDRESS: 552 Smokewood DR  
CITY: Santa Rosa ZIP CODE: 95407  
SUBDIVISION NAME: \_\_\_\_\_ UNIT NO: \_\_\_\_\_ LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_  
ASSESSOR'S PARCEL NO: 043-162-44-5  
NEAREST CROSS STREET: Whitewood DR

**CONTRACTOR**  
NAME: owner-builder  
ADDRESS: \_\_\_\_\_ TEL NO: \_\_\_\_\_  
CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
STATE LIC NO: \_\_\_\_\_ LIC CLASS: \_\_\_\_\_

**DESIGNER**  
NAME: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ TEL NO: \_\_\_\_\_  
CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CERTAIN AREAS WITHIN SONOMA COUNTY MAY BE GEOLOGICALLY HAZARDOUS. YOU ARE INVITED TO REVIEW ANY GEOLOGIC DATA THAT THIS DEPT HAS AVAILABLE TO AID YOU IN MAKING A DETERMINATION AS TO THE SUITABILITY OF A PROPOSED BUILDING SITE.

CONDITION OF SOIL AT JOB SITE  
 ORIGINAL  ENGINEERED FILL  LOOSE FILL

SITE REVIEW: 0-2% level lot

BY: MUS DATE: 8/10/92

REQUIRED REPORTS  
 GEOLOGY  SOILS  COMPACTION  
 FLOOD ZONE  100 YR FLOOD ELEV \_\_\_\_\_  
 YES  NO

SEWER CONNECTION: \_\_\_\_\_ SANITATION ENGINEER  
APPROVED BY: J.E. Lawton DATE: 8/6/92

ROAD ENCROACHMENT  
APPROVED BY: J.E. Lawton DATE: 8.6.92

SEPTIC TANK INSTALLATION: \_\_\_\_\_ HEALTH DEPARTMENT  
PERMIT NUMBER: \_\_\_\_\_ OR CLEARANCE: \_\_\_\_\_  
DATE REC'D: \_\_\_\_\_ DATE ISSUED: \_\_\_\_\_

1. **LICENSED CONTRACTORS DECLARATION:** I hereby affirm 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.  
Contractor's Signature: \_\_\_\_\_ Lic. # \_\_\_\_\_

2. **OWNER-BUILDER DECLARATION:** I hereby affirm 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 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 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 through his 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 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 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.  
Owner's Signature: Carla Riggs

3. **WORKER'S COMPENSATION DECLARATION:** I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof filed with the Building Inspection Department (Sec. 3800, Lab. C.).  
Policy No. \_\_\_\_\_ Insurance Co. \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Applicant's Signature: \_\_\_\_\_

4. **CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE:** 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 Workers' Compensation Laws of California.  
Owner's or Contractor's Signature: Carla Riggs

5. **CONSTRUCTION LENDING AGENCY:** I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).  
Lender's Name: \_\_\_\_\_  
Lender's Address: \_\_\_\_\_

WORK AUTHORIZED: SFD Addition = Master Bedroom & Bathroom.

	NEW	ADDITION	ALTERATION	REPAIR	MOVING	OCC CHG
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	SIZE IN SQUARE FEET	RATE PER SQUARE FOOT	VALUE
FLOOR AREA	<u>320</u>	<u>72.90</u>	<u>23328</u>
GARAGE CARPORT			
DECK AWNING			

FEES - Per Chapter 7, et seq. Sonoma County Code

	TOTAL
<input checked="" type="checkbox"/> BUILDING	<u>214.00</u>
<input type="checkbox"/> PLAN CHECK	<u>26724</u>
<input checked="" type="checkbox"/> PLUMBING	<u>25.00</u>
<input checked="" type="checkbox"/> ELECTRICAL	<u>25.00</u>
<input checked="" type="checkbox"/> MECHANICAL	<u>25.00</u>
<input type="checkbox"/> GRADING	
<input type="checkbox"/> SITE/PROP	<u>26724</u>
<input checked="" type="checkbox"/> PLANNING	<u>14.00</u>
<input type="checkbox"/> FIRE	<u>Belleuve #601 8/17/92 2.40</u>
<input checked="" type="checkbox"/> SEISMIC	<u>2.40</u>
<input type="checkbox"/> INVEST. FEES	
<input type="checkbox"/> PROCESSING FEE	<u>1600</u>
<b>TOTAL \$</b>	<b><u>371.40</u></b>

PLANS APPROVED  NO PLANS. SUBJECT TO FIELD INSPECTION  
APPROVED BY: Ben Neman DATE: 8/25/92

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, AND IS SUBJECT TO EXPIRATION IF WORK THEREUNDER IS SUSPENDED FOR 180 DAYS.

**PERMITTEE**  
NAME: Carla Riggs  
ADDRESS: 552 Smokewood DR CITY: Santa Rosa ZIP: 95407  
I certify that I have read this application and state that the above information is correct, and that I am the owner or the duly authorized agent of the owner. I agree to comply with all County 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 from the Worker's Compensation provisions of the Labor Code I should become subject to such provisions, I will forthwith comply. In the event I do not comply with the Workmen's Compensation law, this permit shall be deemed revoked.  
SIGNATURE: Carla Riggs DATE: 8-27-92  
 CONTRACTOR  OWNER  AGENT FOR CONTRACTOR  AGENT FOR OWNER

DATE RECEIVED: 8/6/92 REC'D BY: PC  
PREVIOUS PERMIT NO: \_\_\_\_\_ DATE CLEARED FOR ISSUANCE: 8/27/92 BY: \_\_\_\_\_

**PLANNING DEPARTMENT**  
ZONING: R1 FILE NO: None ACRES: 6000 sf  
EXISTING USE: SFD / Mar  
PROPOSED USE: Master Bedroom + Bathroom Additions  
YARDS FRONT: 20' LEFT SIDE: 5' RIGHT SIDE: 5' REAR: 25'  
20'-45' clrd. (5'min) (5'min) (20'min)  
FOR PERMIT ISSUANCE: BY: Michelle Davis DATE: 8/6/92  
FOR OCCUPANCY: \_\_\_\_\_ DATE: \_\_\_\_\_  
REMARKS: \_\_\_\_\_  
SOUND MITIGATION:  REQUIRED  EXEMPT  
DEVELOPMENT FEES:  REQUIRED  EXEMPT

TYPE OF CONSTRUCTION: IN OCCUPANCY: R3  
NO OF STORIES: \_\_\_\_\_ NO OF BEDROOMS: \_\_\_\_\_  
CERTIFICATE OF OCC: 2/10/93  
FINAL DATE: \_\_\_\_\_  
INSPECTOR: \_\_\_\_\_

	PERMIT NUMBER	INSPECTION AREA
012007 08/27/92A01	114902	3
PERMIT		
BLDG.	\$214.00	
BLDG.	\$25.00	
BLDG.	\$25.00	
BLDG.	\$25.00	
PLANING	\$14.00	
STESUY	\$2.40	
BLDG.	\$16.00	
***TTL	\$321.40	
CHECK	\$321.40	
CHNG	\$0.00	

552 Smokewood DR  
NEAREST CROSS STREET: Whitewood DR  
INCORPORATED CITY:  YES  NO  
MAP REFERENCE: 141  
0-3  
PERMIT NUMBER: 114902  
INSPECTION AREA: 3

INSPECTION RECORD

DATE

NAME

REMARKS

SURVEY  
FOUNDATION-FORMS - SET BACK

9/19/92 GMS

SLAB  
UPPER GROUND  
CONC BLOCK

RETAINING WALLS  
MASONRY  
FIREPLACE - FOOTING   
HEARTH  THROAT  CHIMNEY

UNDERFLOOR/SLAB ELEC  
UNDERFLOOR/SLAB MECH  
UNDERFLOOR/SLAB PLUMB  
UNDERFLOOR/SLAB FRAME

9-10-92  
(9-10-92)

Picture of Pier at 2x8 Double  
Rdy

ELEC ROUGH  
MECH ROUGH  
PLUMB ROUGH  
GAS TEST ( ) N/A  
FRAME ROUGH

9-24-92

DIAPHRAGMS  
ROOF NAILING & STRAPS  
SHEAR WALLS

9-17-92 SB

HOLD DOWNS  
SIDING  
STUCCO  
MESH  
SCRATCH  
BROWN

ROOFING  
INFILTRATION CONTROL 10-6-92  
INSULATION ROOF  WALLS  FLOORS

10-20-92

~~CEILING ROOF~~

WALL BOARD  
FIREWALLS  
GAS SERVICE EQUIP  
ELEC SERVICE EQUIP  
PANEL BOARDS

SHOWER PAN 10-27-92

SMOKE DETECTOR @ Close in 9-29-92

STAIRWAYS - HANDRAILS  
SUSPENDED CEILINGS  
FIRE DAMPERS  
RAMPS - RAILS  
HANDICAP REQ  
ENERGY REQ

TEMP OCCUPANCY  
TEMP ELEC  
TEMP GAS

FINAL 2-10-93 F.M.  
FIRE DEPT  
HEALTH DEPT / PUBLIC WORKS  
PLANNING  
ELEC METER AUTH  
GAS METER AUTH  
PLUMBING FINAL  
ELEC FINAL  
MECH FINAL

AIR QUALITY CONTROL  
GRADING FINAL

SWIMMING POOL PRE - GUNITE  
PRE - DECK  
PRE - PLASTER

PERMIT #

PLAN RETENTION REQUIRED  
YES  NO

OWNER - BUILDER VERIFICATION

Attention Property Owner:

An "owner-builder" building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed property improvement (yes or no) Yes.

2. I (have/have not) have signed an application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Phone: \_\_\_\_\_ Contractors Licence No: \_\_\_\_\_

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise and provide major work:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Phone: \_\_\_\_\_ Contractors Licence No: \_\_\_\_\_

5. I will provide some of the work but I have contracted (hired) the following persons to provide the work indicated:

Name	Address	Phone	Type of work
_____	_____	_____	_____
_____	_____	_____	_____

Signed: Property Owner Ca. Ja. Reyes Date: 8-27-92

=====

Job Address: 582 Smokewood Dr. P.N. # 043-162-44

Description of work: master bedroom + bath addition

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Project: Riggs Addition | COMPLY 24 v 3.10  
 Designer: Kris Skoog Residential Design | Building Permit No  
 Location: Santa Rosa Date: 7/22/1992 | Checked By  
 Documentation: Griffin Energy Compliance | Date (User # 2503)

PROJECT ADDRESS Job #: 0722926  
 582 Smokewood  
 Santa Rosa, CA

GENERAL INFORMATION

Compliance Method: Point System  
 Climate Zone: 2  
 Total Conditioned Floor Area: 1184 sqft  
 Building Occupancy: Single Fam Det  
 Front Entry Orientation: North  
 Number of Dwelling Units: 1  
 Floor Construction Type: Raised  
 Infiltration Control: Standard

BUILDING SHELL INSULATION

Component	Area	U-Value	Location/Comments
R-0 Frame Wall	836	0.2957	Existing Residence
R-11 Frame Wall	385	0.0914	Addition
R-0 Roof/Gyp Ceiling	864	0.3213	Existing Residence
R-30 Roof/Attic	336	0.0353	Addition
Uninsulated Floor	864	0.1099	Existing Residence/R-6 Crawlspace
R-19 Raised Floor	320	0.0381	Addition/R-6 Crawlspace

THERMAL MASS

Mass Material	Area	Thick (in)	Type	Location/Description
NONE				

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GLAZING							
Location	Orient	Area	Type	U-Val	Glass SC	w/Int Shade	Description
Existing Residence							
	North	49.0	Single	1.10	1.00	0.91	Single/NonWhite Drapes
	East	18.0	Single	1.10	1.00	0.91	Single/NonWhite Drapes
	East	8.0	Double	0.65	0.88	0.75	Double/Nonwhite Drapes
	South	76.0	Single	1.10	1.00	0.91	Single/NonWhite Drapes
Addition							
	East	12.0	Double	0.65	0.88	0.75	Double/Nonwhite Drapes
	South	18.0	Double	0.65	0.88	0.75	Double/Nonwhite Drapes
	West	49.0	Double	0.65	0.88	0.75	Double/Nonwhite Drapes

SHADING (for Glazing above)					
Location	Exterior Device	SC	Overhang	Framing Type	
Existing Residence					
	None	1.00	0.0	Metal w/o Mullions	
	None	1.00	0.0	Metal w/o Mullions	
	None	1.00	0.0	Metal w/o Mullions	
	None	1.00	0.0	Metal w/o Mullions	
Addition					
	None	1.00	0.0	Metal w/o Mullions	
	None	1.00	0.0	Metal w/o Mullions	
	None	1.00	0.0	Metal w/o Mullions	

Project: Riggs Addition | COMPLY 24 v 3.10  
 Designer: Kris Skoog Residential Design | Building Permit No  
 Location: Santa Rosa Date: 7/22/1992 | Checked By  
 Documentation: Griffin Energy Compliance | Date (User # 2503)

HVAC SYSTEMS Minimum Output Duct Duct Manufacturer/Model No.  
 System Type Efficiency (Btuh) Location RVal (or approved equal)

Gas Fired 0.720 SE 80000 Vent. Attic Space 2.1 Existing Furnace  
 No Cooling 8.900 SEER assum. Vent. Attic Space No Cooling Equipment

Zone Furnace Max: 1.3 x [ 53574 Btuh + (10 x 1184 sqft) ] = 85038 Btuh  
 Cooling Exception: \_\_\_\_\_ CFM Cooling (see Load Calcs) requires \_\_\_\_\_ Btuh

HOT WATER SYSTEMS Tank Manufacturer/Model No. # of Energy R-12  
 System Type Volume (or approved equal) Sys Credits Blanket

Gas Fired 50.0 Existing 1 0 N

SPECIAL FEATURES/REMARKS (Add extra sheets if necessary)

COMPLIANCE STATEMENT

This Certificate of Compliance lists the building features and performance specifications needed to comply with Title 24, Chapter 2-53 and Title 20, Chapter 2, Subchapter 4, Article 1 of the California Administrative Code. This certificate has been signed by the individual with overall design responsibility and the building owner, who shall retain a copy of it and transmit the certificate to any subsequent purchaser of the building. When this Certificate of Compliance is submitted for a single building plan to be built in multiple orientations, all building conservation features which vary are indicated in the Special Features/Remarks section.

DESIGNER  
 Kris Skoog Residential Design  
 110 Cherry Street #2  
 Petaluma, CA 94952  
 (707)763-6509

BUILDING OWNER  
 Carla & Ron Riggs

License No: \_\_\_\_\_

Signed: [Signature] 7-30-92  
 (Date)

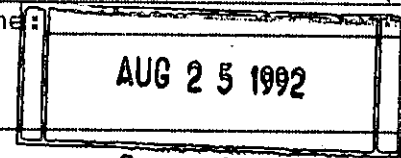
Signed: [Signature] 7-30-92  
 (Date)

DOCUMENTATION AUTHOR  
 Griffin Energy Compliance  
 P.O. Box 2099  
 Petaluma, CA 94953  
 (707)778-7818

ENFORCEMENT AGENCY  
 Name: \_\_\_\_\_  
 Agency: **★ APPROVED ★**  
 Telephone: \_\_\_\_\_

Signed: [Signature] 7/22/92  
 (Date)

Signed: \_\_\_\_\_ (Date)



Sonoma County  
 Building Inspection Dept.