

B

Type

Plans

BLD04-5627

Permit Number

5875

Street Number

Hwy 12

Street Name

RIN

Community Code

031-040-040

APN

Please Print Your Name: **ASWIN AJAY CHAUD.** Date Applied: **02/06/04**

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

**SITE LOCATION INFORMATION: PRINT CLEARLY**

Site Address: **5895 SONOMA HWY** City: **SANTA ROSA** ZIP: \_\_\_\_\_  
 Cross-Street: **OLD SONOMA HWY.** APN: **03-040-040** Project Phone #: ( ) Project Fax #: ( )  
 Directions: \_\_\_\_\_ Subd. Name: \_\_\_\_\_ Unit #: \_\_\_\_\_ Lot #: \_\_\_\_\_  
 Describe Project: **Renov BLDDI-063-2 for tenant improvements Building B** Living Area: \_\_\_\_\_ Garage: \_\_\_\_\_ Decks: \_\_\_\_\_

**OWNER NAME AND ADDRESS** Name: **ASHRAF AH** Mailing Address: **6840 GOODYEAR RD BLDG C** City: **BENICIA** State: **CA** ZIP: **94570**

**APPLICANT NAME AND ADDRESS** Name: **ASWIN A CHAUD.** Mailing Address: **2628 ESTATE DR.** City: **STOCKTON** State: **CA** ZIP: **95207**

**CONTRACTOR INFORMATION** Company Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Day Ph: ( ) Fax: ( )

**OTHER PERSONS (ARCHITECT/ENGINEER, ETC.)** Name: \_\_\_\_\_ Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_ Day Ph: ( ) Fax: ( ) License No: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

**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.C. for this reason \_\_\_\_\_

Date: **02/06/04** 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 \_\_\_\_\_ 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 void.

PERMITTEE SIGNATURE: \_\_\_\_\_  
 ADDRESS: **2628 ESTATE DRIVE STOCKTON CA 95207**  
 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: \_\_\_\_\_

**#4 FOR DEPARTMENT USE**

Zoning: **LC P SR** File No. \_\_\_\_\_ Acres: **3.38**  
 Existing Use/Structures: **2 COMMERCIAL BLDG - GAS PUMPS**  
 Proposed Use/Structures: **ADD INTERIOR WALLS TO EXISTING**  
 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.  Millgation Required  Address subject to change

Approval for Permit Issuance: \_\_\_\_\_ Approval for Occupancy: \_\_\_\_\_  
 By: \_\_\_\_\_ Date: **2-19-04**

**Sewer Connection:**  Available  Fees Paid  
 Approved by: **N/A** Date: \_\_\_\_\_

**Road Encroachment:**  Fees Paid  
 Approved by: **J. Corsey** Date: **2/19/04**

**Septic System**  
 Permit/Clearance # **SEP 04-0761**  
 Approved by: **James A. Johnson** Date: **12/9/04**

**Flood Zone:**  Yes  No 100 Year Flood Elevation: \_\_\_\_\_

**Code Enforcement Violation**  Yes  No Violation # **VBU99-0685**

This permit is limited to \_\_\_\_\_ days.  
**#6 OK TO ISSUE PERMIT LWW**  
**VBU00A-0340**

**Work Authorized:**  
**FINISH SHEETS ALL**  
**T.I.'S IN BUILDING B**  
 New  Addition  Alteration  Repair  Moving  Occ/Chg

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

Plans Approved  No Plans Subject to Field Inspection  
 Machine Space for Permit Fee \_\_\_\_\_

Plancheck Cleared By: \_\_\_\_\_ Date: **12/8/04**  
 Permit Cleared for Issuance By: \_\_\_\_\_ Date: **12-9-04**

Post FIRM  Aquist Priolo Report Available  
 Pre FIRM  Geotechnical report Available

DEPARTMENT NEED  
**1/6/3.57/04**

|                      |           |                |                 |
|----------------------|-----------|----------------|-----------------|
| Type of Construction | Occupancy | No. of Stories | No. of Bedrooms |
| <b>YN</b>            | <b>B</b>  |                |                 |

Auto. Fire Sprinklers Req'd: **Yes** No. of Units: \_\_\_\_\_ Certificate of Occupancy: \_\_\_\_\_

Final Date: \_\_\_\_\_ Inspector: \_\_\_\_\_

DEC 15 2004

MANAGEMENT DEPARTMENT COUNTY OF SONOMA

Permit # **Bldg 04 5627** rea **1168**  
 Permit Coordinator: **Pue** **11/30/04** **(92)**

JOB ADDRESS: **5895 Hwy 12 Santa Rosa 10/15/2003 4960 PERMIT NUMBER: Bldg 04 5627 (385-64)**  
 INSPECTION AREA: **11 (6)**

| 131) SPECIAL INSPECTION REQUIRED  |      | <input type="checkbox"/> YES | <input type="checkbox"/> NO   | IF YES, SEE ADDITIONAL SHEET                             |
|-----------------------------------|------|------------------------------|---|--|
| INSPECTION RECORD                 | DATE | NAME                         | REMARKS   |  |
| 103) FOUNDATION                   |      |                              |   | <i>see attached fire final</i>                           |
| FORMS/SETBACK                     |      |                              |   |  |
| FOOTING                           |      |                              |   |  |
| WALLS                             |      |                              |   |  |
| 106) UFER GROUND #                |      |                              |   |  |
| 104) CAISSONS/PIERS               |      |                              |   |  |
| 105) SLAB                         |      |                              |   |  |
| 110) MASONRY                      |      |                              |   |  |
| 109) RETAINING WALLS              |      |                              |   |  |
| 113) FIREPLACE                    |      |                              |   |  |
| FOOTING                           |      |                              |   |  |
| HEARTH/PROTECTION                 |      |                              |   |  |
| THROAT                            |      |                              |   |  |
| 114) CHIMNEY                      |      |                              |   |  |
| 120) UNDERFLOOR/UNDERSLAB         |      |                              |   |  |
| 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                    |      |                              |   |  |
| 135) STUCCO/PLASTER               |      |                              |   |  |
| <input type="checkbox"/> LATH     |      |                              |   |  |
| <input type="checkbox"/> SCRATCH  |      |                              |   |  |
| 137) ROOFING                      |      |                              |   |  |
| 130) TUB/SHOWER PAN               |      |                              |   |  |
| 164) SUSPENDED CEILING            |      |                              |   |  |
| ROUGH ELECTRICAL                  |      |                              |   |  |
| ROUGH MECHANICAL                  |      |                              |   |  |
| 165) EXITING                      |      |                              |   |  |
| STAIRS/HANDRAILS                  |      |                              |   |  |
| RAMP                              |      |                              |   |  |
| CORRIDORS/DOORS                   |      |                              |   |  |
| 166) ACCESSIBILITY COMPLIANCE     |      |                              |   |  |
| ENERGY REQUIREMENTS               |      |                              | FIRE INSPECTION REQUIRED  | DATE   |
| 170) TEMPORARY OCCUPANCY          |      |                              | <input type="checkbox"/> Yes <input type="checkbox"/> No            |  |
| 171) TEMPORARY ELECTRICAL         |      |                              | 770) SPRINKLER FINAL  |  |
| 172) TEMPORARY GAS                |      |                              | 771) ABOVEGROUND HYDROSTATIC  |  |
| 174) ELECTRIC METER AUTHORIZATION |      |                              | 772) UNDERGROUND HYDROSTATIC  |  |
| 152) PANEL BOARDS/SERVICE         |      |                              | 773) UNDERGROUND FLUSH  |  |
| 175) GAS METER AUTHORIZATION      |      |                              | 774) THRUST BLOCKS  |  |
| 153) GAS PRESSURE TEST            |      |                              | 775) PIPE WELD  |  |
| HOUSE                             |      |                              | 776) HYDRANTS/APPLIANCES  |  |
| YARD                              |      |                              | 777) PUMP ACCEPTANCE  |  |
| 190) MANUF. HOME FOUNDATION       |      |                              | 778) WATER SUPPLY/TANK  |  |
| 191) MANUF. HOME INSTALLATION     |      |                              | 779) ALARM SYSTEM   |  |
| CONTINUITY                        |      |                              | 780) HOOD & DUCT SYSTEM   |  |
| STAIRS/SKIRTS                     |      |                              | 781) ABOVEGROUND TANK/DISPENSER                                     |  |
| RIDGE BOLTING                     |      |                              | 198) FIRE FINAL   |  |
| SWIMMING POOLS                    |      |                              |   |  |
| 194) PRE-GUNITE                   |      |                              |   |  |
| 195) PRE-DECK                     |      |                              | CLEARANCES:   |  |
| 196) PRE-PLASTER/FENCE            |      |                              | 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               |      |                              | N.C.A.P.C.D.  |  |
| 199) FINAL                        |      |                              |   | PLAN RETENTION REQUIRED?                                 |
| OCCUPANCY (OK TO OCCUPY)          |      |                              |   | <input type="checkbox"/> Yes <input type="checkbox"/> No |

*Finalized 12/15/07*

**Date:** 12/15/07  
**By:** SMT

PERMIT # 134041005697