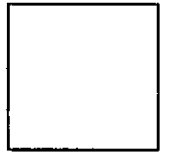


B

Type



Plans

BLD11-2482

Permit Number

9141

Street Number

GREEN VALLEY RD

Street Name

GRA

Community Code

130-090-020

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: Jennifer Moore Date Applied: 6-20-11

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: 9141 Green Valley Road City: Sebastopol ZIP: 95472
 Cross-Street: Ross Road APN: 130-090-066 Project Phone #: 707 823 5933 Project Fax #: 707 823 5218
 Directions: _____ Email address: Jen@canbuilders Unit #: _____ Lot #: _____
 Describe Project: Remove & Replace metal roofing, roof insulation & related accessories Living Area: _____ Garage: _____ Decks: 261880 Contract Price: 162558.00

OWNER NAME AND ADDRESS

APPLICANT NAME AND ADDRESS

Name: Manzana Products
 Mailing Address: P.O. Box 209
 City: Sebastopol State: CA ZIP: 95472
 Day Ph: 707 823-5313 Fax: 707 823-5218

Name: Can Builders & Associates Builders Inc
 Mailing Address: 112 Pine Breeze Lane
 City: Sebastopol State: CA ZIP: 95472
 Day Ph: 707 829-8589 Fax: 707 823 9760

CONTRACTOR INFORMATION

OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)

Company Name: Can Builders & Associates Builders
 Address: 112 Pine Breeze Lane
 City: Sebastopol State: CA ZIP: 95472
 Day Ph: () 829-8589 Fax: () 823-9760

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: State Compensation Fund
 Policy No.: 1879466

(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: 10/31 Applicant: Jennifer Moore

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 Contractors 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 Contractors 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 Contractors License Law.)

I am exempt under Sec. _____, B & P.C. for this reason _____

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>.

Date: 6-20-11 Signature of Property Owner or Authorized Agent: Jennifer Moore

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: BAC51 Lic. No.: 738609
 Exp. Date: 7/31/11 Contractor: Jennifer Moore

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.

PERMITTEE SIGNATURE: Jennifer Moore
 ADDRESS: 112 Pine Breeze Ln, Sebastopol 95472
 CITY: _____ ZIP: _____

Contractor Owner Other Licensed Professional

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 B6 20 M3 BR F2 SR Acres: 12.51
 Existing Use/Structures: Manzana
 Proposed Use/Structures: Re-roof
 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: _____
 By: (14) Date: _____
 Approval for Occupancy: _____
 By: W. G. Gorch Date: 6-20-2011
 Conditions: In M3 area

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 _____

Drainage Review:
 Approved by: _____ Date: _____

Fire:
 Approved by: _____ Date: _____

Code Enforcement Violation Yes No Violation # _____
 This permit is limited to _____ days.

Work Authorized: reroof (metal)

<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
Check Cleared by: <u>Cal Swarth</u> Date: <u>6/20/11</u>	Type of Construction: <u>11B.5-1</u>	Occupancy: _____ No. of Stories: _____ No. of Bedrooms: _____
Permit Cleared for Issuance: <u>6/20/11</u>	Auto. Fire Sprinklers Req'd: _____	No. of Units: _____ Certificate of Occupancy: _____

PAYMENT REC'D
 Machine Space for Permit Fee
 \$ _____
 JUN 20 2011
 PERMIT AND RESOURCE MANAGEMENT DEPARTMENT
 COUNTY OF SONOMA

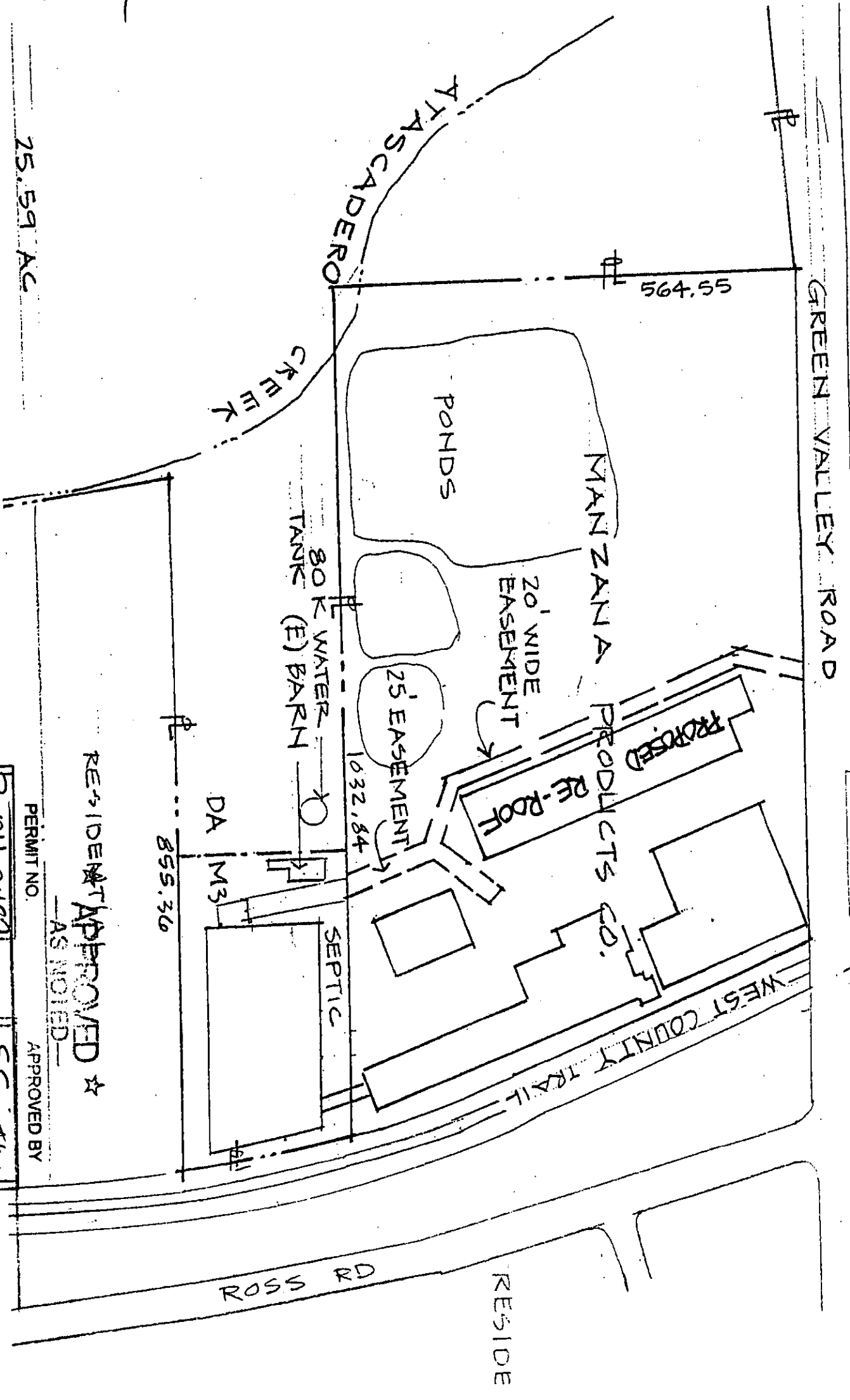
JOB ADDRESS: 7141 Green Valley Rd. Sebastopol PERMIT NUMBER: Bu011-2482 INSPECTION AREA: _____

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

ZONING APPROVAL

WORK INDICATED ON THESE DRAWINGS IS APPROVED ON THE BASIS THAT ALL WORK WILL COMPLY WITH ALL REQUIREMENTS OF THE COUNTY OF SONOMA, WHETHER SHOWN ON THESE DRAWINGS OR NOT. *WRS/2011*

6-20-2011
 PERMIT AND RESOURCE MANAGEMENT DEPARTMENT



SITE PLAN

REIDENTIFIED APPROVED ★
 AS NOTED

PERMIT NO. **Bu011-24821**

APPROVED BY **E Smith**

PERMIT AND RESOURCE MANAGEMENT

APPROVED JOB CARDS AND JOB CARDS TO BE ON JOB SITE.

BUILDER SHALL BE RESPONSIBLE FOR THE APPROVED PLANS. PERMIT AND RESOURCE MANAGEMENT SHALL BE RESPONSIBLE FOR THE APPROVED WRITING. PERMIT AND RESOURCE MANAGEMENT SHALL BE RESPONSIBLE FOR THE APPROVED MANAGEMENT. PERMIT AND RESOURCE MANAGEMENT SHALL BE RESPONSIBLE FOR THE APPROVED REJECTION.

APPROVAL OF THIS PERMIT AND DOES NOT AUTHORIZE THE BUILDER TO MAKE ANY CHANGES WITHOUT THE WRITING OF THE PERMIT AND RESOURCE MANAGEMENT DEPARTMENT. SPECIAL INSPECTION AND INSPECTION.

PLEASE READ ALL REQUIREMENT SECTIONS OF APPLICABLE CODES.

