

BLD12-4203

Permit Number

27555

Street Number

RIVER RD

Street Name

CLO

Community Code

117-060-010

APN

COUNTY OF SONOMA
PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 VENTURA AVENUE, SANTA ROSA, CA 95403-2829
 (707) 565-1900 FAX (707) 565-1103

Building Permit Invoice: BLD12-4203

Project Address: 27555 RIVER RD CLO
Cross Street: 1 ST

Printed: Monday, October 15, 2012

APN: 117-060-010

Initialized by: AFRANZIN

Activity Type: A-BLD 1201

Description: INTALL WATER LINE FROM SUSMP TO WATER TANK AND

Res/Com: C

Insp Area: 08

Std/Quick: ??

Site Review File #: ??

Fire District: CLOVERDALE FPD

Site Review Fees Paid: \$0.00; ??; ??

Owner: MONTROSE VINEYARDS LLC
 6127 ROYAL ANN DR
 SAN JOSE CA 95129

Applicant: MONTROSE VINEYARDS LLC
 6127 ROYAL ANN DR
 SAN JOSE CA 95129

408 916 7947

Valuation:

Occupancy	Type	Factor	Sq Feet	Valuation
	Totals...			\$0.00*

Fees:

Item#	Description	Account Code	Tot Fee	Prev. Pmts	Cur. Pmts
122	ELECTRICAL FEE	025015-1341	74.00	.00	.00
124	PLUMBING FEE	025015-1341	74.00	.00	.00
140	TECH ENHANCEMENT FEE	025015-4040	4.00	.00	.00
			\$152.00	\$0.00	

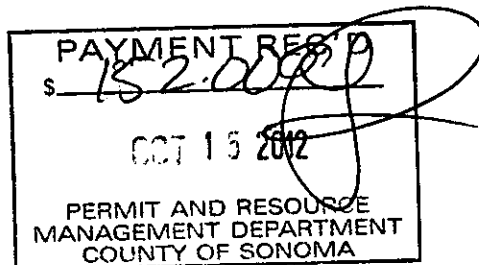
Total Fees: \$152.00

Total Paid: \$0.00

Balance Due: \$152.00

"Refunds of fees paid may be made pursuant to Section 108.6 of Appendix 1 of the California Building Code and adopted model codes, subject to the following: 1) 100% of a fee erroneously paid or collected. 2) 90% of the plan review fee when an application for a permit is withdrawn or canceled or expires or becomes void before any plan review effort has been expended. No portion of the plan review fee shall be refunded when any plan review effort has been expended. 3) 90% of the building, plumbing, electrical, and/or mechanical fee may be refunded when a permit is withdrawn, or cancelled or expires or becomes void before any work was done and before any inspections are performed. No portion of these fees shall be refunded when any work was done and/or any inspections have been performed. 4) Application for refund must be made within one year of the date the fee is paid."

When validated below, this is your receipt.
This Building Permit shall EXPIRE



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: **AMITAVA GUHA** Date Applied: **10/15/12**

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: **27555 RIVER RD** City: **CLOVE RDALIE** ZIP: **95425**
 Cross-Street: **1st St. CLD** APN: **117-060-010** Project Phone #: () Project Fax #: ()
 Directions: _____ Email address: **guha408@yahoo.com** Unit # _____ Lot # _____
 Describe Project: **Install water line from a sump to the water tank & Elec. & pump.** Living Area _____ Contract Price: **4k.**
 Garage Deck _____

OWNER NAME AND ADDRESS

APPLICANT NAME AND ADDRESS

Name: **AMITAVA GUHA** Name: _____
 Mailing Address: **6127 ROYAL ANN DR** Mailing Address: _____
 City: **SAN JOSE** State: **CA** ZIP: **95129.** City: _____ State: _____ ZIP: _____
 Day Ph: **(408) 916-7947** Fax: () Day Ph: () Fax: ()

CONTRACTOR INFORMATION

OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)

Company Name: **Luciani Pump** Name: _____
 Address: **Mill St.** Address: _____
 City: **Healdsburg** State: **CA** ZIP: _____ City: _____ State: _____ ZIP: _____
 Day Ph: () Fax: () 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. _____
 (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 _____

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: **10/15/12** Signature of Property Owner or Authorized Agent: **[Signature]**

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 revoked.

PERMITTEE SIGNATURE: **[Signature]**
 ADDRESS: **6127 ROYAL ANN DR** CITY: **SAN JOSE** ZIP: **95129.**

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 _____ 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. Mitigation Required Address subject to change
 Approval for Permit Issuance: _____ Approval for Occupancy: _____

By: _____ Date: _____

Conditions: _____

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: **Elec. & plumb for**

new sump to water tank connection

<input 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
Plancheck Cleared By _____	Date: _____	Type of Construction _____
Occupancy _____	No. of Stories _____	No. of Bedrooms _____
Auto. Fire Sprinklers Req'd _____	No. of Units _____	Certificate of Occupancy _____

RECEIVED REC'D
 Machine Space for Permit Fee
OCT 15 2012
 PERMIT AND RESOURCE MANAGEMENT DEPARTMENT
 COUNTY OF SONOMA

JOB ADDRESS: **27555 River Rd. CLD**
 PERMIT NUMBER: **PBD12-4203**
 INSPECTION AREA: **8**

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