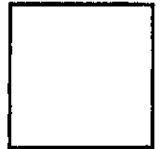




Type



Plans

BLD14-5013

Permit Number

10483

Street Number

Willig DR.

Street Name

JEN

Community Code

099-113-016

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: BLD14-5013

Project Address: 10481 WILLIG DR JEN
Cross Street: HWY 1

APN: 099-113-016
Description: MINOR FOUNDATION REPAIR OF ONE PIER UNDER LAUNDRY
Res/Com: R
Std/Quick: ??
Fire District: MONTE RIO FPD

Printed: Monday, October 20, 2014
Initialized by: HPARNIGO
Activity Type: A-BLD 1401
Insp Area: 02
Site Review File #: ??
Site Review Fees Paid: \$0.00; ??; ??

Owner: DEE THOMAS STEPHEN ET AL
PO BOX 85
JENNER CA 95450

Applicant: APPLIED BUILDING SOLUTIONS
16129 MAIN ST UNIT B-154
GUERNEVILLE CA 95446

707 865 4186

Valuation:

Occupancy	Type	Factor	Sq Feet	Valuation
	Additional			12,500.00
	Totals...			\$12,500.00*

Fees:

Item#	Description	Account Code	Tot Fee	Prev. Pmts	Cur. Pmts
7	CREDIT CARD CONVEN FEE	26010104-46003	13.18	.00	.00
50	S.M.I.P. RESIDENTIAL	80170200-46040	1.62	.00	.00
52	CA BLDG STANDARDS SB1473	80170300-46040	1.00	.00	.00
124	PLUMBING FEE	26010115-41051	74.00	.00	.00
132	BUILDING PERMIT FEE	26010115-41051	418.29	.00	.00
140	TECH ENHANCEMENT FEE	26010104-46040	4.00	.00	.00
735	NPDES - BUILDING	26010112-41142	50.19	.00	.00

\$562.28 \$0.00

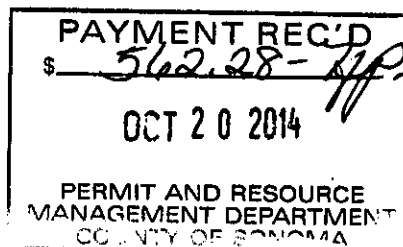
Total Fees: \$562.28

Total Paid: \$0.00

Balance Due: \$562.28

"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1) 100% of a fee erroneously paid or collected. 2) 90% of the plan review fee when an application for a permit is withdrawn or canceled or expires or becomes void before any plan review effort has been expended.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has been expended. 3) 90% of the building, plumbing, electrical, and/or mechanical fee may be refunded when a permit is withdrawn, or cancelled or expires or becomes void before any work was done and before any inspections are performed.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:

Jason Offilo

Date

Applied: 10/20/14

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: 10483 Willing Dr.

City: Jenner

ZIP:

Cross-Street:

Hwy 1

APN:

Project Phone #:

Project Fax #:

Directions:

Email address:

Unit #

Lot #

Describe Project: minor foundation repair of
Re pipe Gas, Hot/cold water

SFD -

Contract Price:

12,500.

OWNER NAME AND ADDRESS

Name: Steve Dec

Mailing Address: 10483 Willing Dr.

City: Jenner

State: CA

ZIP:

Day Ph: (707) 865-9345

Fax: ()

APPLICANT NAME AND ADDRESS

Name: Applied Building Solutions Inc.

Mailing Address: 16129 Main St Unit B-154

City: Guerneville

State: CA

ZIP: 95446

Day Ph: (707) 865-4106

Fax: ()

CONTRACTOR INFORMATION

Company Name: Applied Building Solutions

Address: 16129 Main St Unit B-154

City: Guerneville

State: CA

ZIP: 95446

Day Ph: (707) 865-4106

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: Arguard Insurance Co.
Policy No: APWC574220

(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: 3/14/15 Applicant: [Signature]

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.

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: Signature of Property Owner or Authorized Agent

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: Gen B Lic. No.: 987984

Exp. Date: 10/31/15 Contractor: [Signature]

ASBESTOS DECLARATION

Written asbestos notification pursuant to Part 6 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 Worker's Compensation law, this permit shall be deemed revoked.

PERMITTEE SIGNATURE: [Signature]
ADDRESS: 16129 Main St 13-154 Guerneville CITY: ZIP: 95446

☒ Contractor ☐ Owner ☐ Other Licensed Professional

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

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:

By:

Date:

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: Replace (1) Foundation pier
re-plumb entire house except drain
lines - includes gas plumbing.

<input type="checkbox"/> Plans Approved	<input type="checkbox"/> Post FIRM	<input type="checkbox"/> Aquest Photo 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
Permit Cleared for Issuance	Date:	Occupancy
		No. of Stories
		No. of Bedrooms
		Auto. Fire Sprinklers Req'd
		No. of Units
		Certificate of Occupancy

Machine Readable Form
PAYMENT REC'D
\$ 562.28
OCT 20 2014
PERMIT AND RESOURCE
MANAGEMENT DEPARTMENT
COUNTY OF SONOMA

Distribution: White - File Canary - Applicant Blue - Assessor Carbon - Inspector

JOB ADDRESS:

10483 Willing Dr. JEN

PERMIT NUMBER: BDP14-5013

INSPECTION AREA:

02