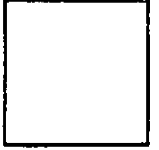


B

Type



Plans

BLD15-1855

Permit Number

1600

Street Number

Javore Dr

Street Name

BEL

Community Code

125-590-059

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: BLD15-1855

Project Address: 1600 JAVORE DR BEL
Cross Street: DEBBIE

Printed: Monday, April 20, 2015
Initialized by: JTOLBERT
Activity Type: A-BLD 1401

APN: 125-590-059
Description: REROOF / TEAR OFF / CLASS A COMP - SFD
Res/Com: R
Std/Quick: ??
Fire District: SANTA ROSA FPD

Insp Area: 03
Site Review File #: ??
Site Review Fees Paid: \$0.00; ??; ??

Owner: BOOTH WAYNE W & DEBRA J
1600 JAVORE DR
SANTA ROSA CA 95407-7484

Applicant: CALIFORNIA ROOF SAVERS INC
150 LANDING WAY
PETALUMA CA
94952
800 339 1172

Valuation:

Occupancy	Type	Factor	Sq Feet	Valuation
	Totals...			\$9,855.00*

Fees:

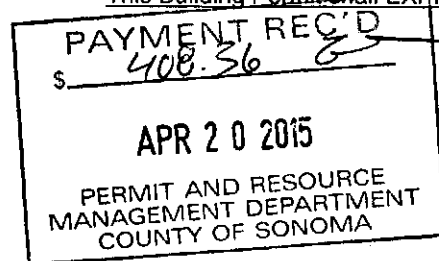
Item#	Description	Account Code	Tot Fee	Prev. Pmts	Cur. Pmts
50	S.M.I.P. RESIDENTIAL	80170200-46040	1.28	.00	.00
52	CA BLDG STANDARDS SB1473	80170300-46040	1.00	.00	.00
132	BUILDING PERMIT FEE	26010115-41051	359.00	.00	.00
140	TECH ENHANCEMENT FEE	26010104-46040	4.00	.00	.00
735	NPDES - BUILDING	26010112-41142	43.08	.00	.00
			\$408.36	\$0.00	

Total Fees: \$408.36
Total Paid: \$0.00

Balance Due: \$408.36

"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1) 100% of a fee erroneously paid or collected. 2) 90% of the plan review fee when an application for a permit is withdrawn or canceled or expires or becomes void before any plan review effort has been expended.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has been expended. 3) 90% of the building, plumbing, electrical, and/or mechanical fee may be refunded when a permit is withdrawn, or cancelled or expires or becomes void before any work was done and before any inspections are performed.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: **FRED WELCHMAN** Date Applied: **4-20-15**

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: **1600 JAVORE DR.** City: **SANTA ROSA, CA.** ZIP: _____
 Cross-Street: **DEBBIE** Alt: **125 590059** Project Phone #: () Project Fax #: ()
 Directions: _____ Email address: _____ Unit #: _____ Lot #: _____
 Describe Project: **REMOVE COMP ROOFING/INSTALL NEW GAF H.D. ULTRA LIFETIME ROOF SFD** Living Area: _____ Contract Price: **9855.00**
 Garage: _____ Decks: _____

OWNER NAME AND ADDRESS

APPLICANT NAME AND ADDRESS

Name: **WAYNE BOOTH** Name: _____
 Mailing Address: **600 JAVORE DR.** Mailing Address: _____
 City: **SANTA ROSA** State: **CA.** ZIP: _____ City: _____ State: _____ ZIP: _____
 Day Ph: **707 490-7027** Fax: () Day Ph: () Fax: ()

CONTRACTOR INFORMATION

OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)

Company Name: **CALIFORNIA ROOF SAVERS.** Name: _____
 Address: **150 LANDING WAY** Address: _____
 City: **PETALUMA** State: **CA.** ZIP: **94952** City: _____ State: _____ ZIP: _____
 Day Ph: **707 769-1170** Fax: **707 766-9396** 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 FUND**
 Policy No.: **9041211**

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: _____

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: **C-39** Lic. No.: **568460**
5-31-15 Contractor: **CALIF. ROOF SAVERS**
 Exp. Date: **2016**

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: _____
 ADDRESS: **150 LANDING WAY** CITY: **PETALUMA, CA.** ZIP: _____
 Contractor Owner Other Licensed Professional

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: **new roof / tear off / Class A / 10 Comp SFD**

<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: _____
Permit Cleared for Issuance: _____	Date: 4/20/15	Auto. Fire Sprinklers Req'd: _____
No. of Units: _____	Certificate of Occupancy: _____	

PAYMENT REC'D
 \$ _____
APR 20 2015
 PERMIT AND RESOURCE MANAGEMENT DEPARTMENT
 COUNTY OF SONOMA

JOB ADDRESS: 1600 JAVORE DR. PETAL
 PERMIT NUMBER: BLD15-1855
 INSPECTION AREA: 3

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