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Type

Plans

BLD15-4481

Permit Number

69

Street Number

OXFORD CT

Street Name

WIN

Community Code

058-262-019

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: **FLETCHER SKERLETT**

Date Applied: **9/2/15**

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: **69 OXFORD CT** City: **SANTA ROSA** ZIP: **95403**
 Cross Street: **CHERSEA DR** Project Phone #: **707 230 4715** Project Fax #: () Unit # Lnt #
 Directions: **058-262-019** Email address: _____

Describe Project: **REMOVE EXISTING ROOF SHINGLES AND REPLACE** Living Area: **24** Contract Price: **16,000**
 Garage: _____ Decks: _____

OWNER NAME AND ADDRESS
 Name: **FLETCHER + HALEY SKERLETT**
 Mailing Address: **69 OXFORD CT**
 City: **SANTA ROSA** State: **CA** ZIP: **95403**
 Day Ph: **707 230 4715** Fax: ()

APPLICANT NAME AND ADDRESS
 Name: **SOME 1/2 OWNER**
 Mailing Address: _____
 City: _____ State: _____ ZIP: _____
 Day Ph: () Fax: ()

CONTRACTOR INFORMATION
 Company Name: **SELF**
 Address: _____
 City: _____ State: _____ ZIP: _____
 Day Ph: () Fax: ()

OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)
 Name: **N/A**
 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: _____

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.)
 Lender's Name: _____
 Lender's Address: _____

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>.
9/2/15 **FSKERLETT**
 Date Signature of Property Owner or Authorized Agent

FOR DEPARTMENT USE
 Zoning _____ File No. _____ Acres _____
 Existing Use/Structures _____
 Proposed Use/Structures _____
 Zoning Min. Yard Requirements: Front _____ Left _____ Right _____ Back _____
 NOTE: The State 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: _____

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-described 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.
FSKERLETT
 PERMITTEE SIGNATURE
69 OXFORD CT SANTA ROSA 95403
 ADDRESS CITY 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: **SEED-T/O & reroof 24 CT**
15: CLASS A comp.

PERMITS SUBJECT TO FINAL INSPECTION
 Plans Approved Final FIRM Aerial Photo Report Available
 Plans Subject to Final Inspection Pre-FIRM Geotechnical report Available
 Inspected/Approved By: _____ Date: _____
 Type of Construction: **VIR3** Occupancy: _____ No. of Stories: _____ No. of Bedrooms: _____
 Terms/Conditions for Insurance: _____ Date: **9-2-15** Auto File: _____ No. of Units: _____ Certificate of Occupancy: _____
 Machine Sync for Permit Fee _____

JOB ADDRESS: **69 Oxford Ct**
 PERMIT NUMBER: **B1815-4481**
 INSPECTION AREA: _____

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

131) SPECIAL INSPECTION REQUIRED		<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, SEE ADDITIONAL SHEET
INSPECTION RECORD	DATE	NAME	REMARKS	
101) ROUGH GRADING				
103) FOUNDATION				
FORMS/SETBACK				
FOOTING				
WALLS				
106) UFER GROUND #				
104) CAISSONS/PIERS				
105) SLAB				
107) UNDERGROUND UTILITIES				
110) MASONRY				
109) RETAINING WALLS				
113) FIREPLACE				
FOOTING				
HEARTH/PROTECTION				
THROAT				
114) CHIMNEY				
120) UNDERFLOOR/UNDERSLAB				
115) HYDRONICS				
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				
ROOF 9-15-15 JLB <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	9/30/15	D. G.		
139) INSULATION				
142) WALLBOARD				
143) FIREWALLS				
135) STUCCO/PLASTER				
<input type="checkbox"/> LATH	<input type="checkbox"/> SCRATCH			
137) ROOFING				
130) TUB/SHOWER PAN				
162) FIRE DAMPERS/DOORS				
164) SUSPENDED CEILING				
<input type="checkbox"/> ROUGH ELEC.	<input type="checkbox"/> ROUGH MECH.			
165) EXITING - RAMPS/STAIRS				
163) HANDRAILS/GUARDRAILS				
CORRIDORS/DOORS				
166) ACCESSIBILITY COMPLIANCE				
144) WATER TANKS				
<input type="checkbox"/> SLAB	<input type="checkbox"/> WALLS			
170) TEMPORARY OCCUPANCY				
171) TEMPORARY ELECTRICAL				
172) TEMPORARY GAS				
174) ELECTRIC METER AUTHORIZATION				
152) PANEL BOARDS/SERVICE				
189) SEPTIC ELECTRIC FINAL				
175) GAS METER AUTHORIZATION				
153) GAS PRESSURE TEST				
HOUSE	YARD			
190) MANUF. HOME FOUNDATION				
191) MANUF. HOME INSTALLATION				
CONTINUITY				
STAIRS/SKIRTS				
RIDGE BOLTING				
193) MANUF. HOME COND. FINAL				
SWIMMING POOLS				
194) PRE-GUNITE				
195) PRE-DECK				
196) PRE-PLASTER/FENCE				
197) VINYL/FIBERGLASS POOL EXCAVATION				
102) GRADING FINAL				
176) ELECTRICAL FINAL				
177) MECHANICAL FINAL				
178) PLUMBING FINAL				
199) FINAL	9/30/15	D. G.		
OCCUPANCY (OK TO OCCUPY)				
650) SUSMP INSPECTION				
651) NPDES EROSION COMPLIANCE				
652) NPDES SEDIMENT COMPLIANCE				
653) NPDES DOCS/SWPPP				
FIRE INSPECTION REQUIRED	DATE	NAME		
<input type="checkbox"/> Yes <input type="checkbox"/> No				
759) KNOX BOX				
760) PROPANE TANK HOLD DOWNS				
770) SPRINKLER FINAL				
771) ABOVEGROUND HYDROSTATIC				
772) UNDERGROUND HYDROSTATIC				
773) UNDERGROUND FLUSH				
774) THRUST BLOCKS				
775) PIPE WELD				
776) HYDRANTS/APPLIANCES				
777) PUMP ACCEPTANCE				
778) WATER SUPPLY/TANK				
779) ALARM SYSTEM				
780) HOOD & DUCT SYSTEM				
781) ABOVEGROUND TANK/DISPENSER				
198) FIRE FINAL				
CLEARANCES:				
FIRE	<input type="checkbox"/> Local	<input type="checkbox"/> County		
HEALTH DEPARTMENT				
ZONING				
SANITATION				
PLAN RETENTION REQUIRED?				
<input type="checkbox"/> Yes <input type="checkbox"/> No				

PERMIT # B1815-4481