

B

Type

Plans

BLD07-3030

Permit Number

22028

Street Number

NINIVE DR

Street Name

TIM

Community Code

109-440-022

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: Rick O'Neil Date Applied: 6/20/07

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY			
Site Address: <u>22028 Nineve Rd</u>		City: <u>Timber Cove</u>	
Cross-Street: <u>HWY 1</u>		APN: _____	Project Phone #: () _____
Directions: _____		Subd. Name _____	Project Fax #: () _____
Describe Project: <u>Res Fire Sprinklers (3006-351)</u>		Living Area _____	Contract Price: _____
Garage _____		Deck _____	Unit # _____
Lot # _____			
OWNER NAME AND ADDRESS		APPLICANT NAME AND ADDRESS	
Name: <u>PARKER</u>		Name: _____	
Mailing Address: <u>1700 La Vereda Rd</u>		Mailing Address: _____	
City: <u>Berkeley</u>	State: <u>Ca.</u>	City: _____	State: _____
Day Ph: <u>510 548-7994</u>	Fax: () _____	Day Ph: () _____	Fax: () _____
CONTRACTOR INFORMATION		OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)	
Company Name: <u>Tom's Plumbing INC.</u>		Name: _____	
Address: <u>37230 Church St Box 92</u>		Address: _____	
City: <u>GUALALA</u>	State: <u>CA</u>	City: _____	State: _____
Day Ph: <u>707 884 3818</u>	Fax: <u>707 884-3083</u>	Day Ph: () _____	Fax: () _____
WORKER'S COMPENSATION DECLARATION		CONSTRUCTION LENDING DECLARATION	
<p>I hereby affirm under penalty of perjury one of the following declarations:</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> 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:</p> <p>Carrier: _____ Policy No: _____ (This section need not be completed if the permit is for one hundred dollars (\$100) or less.)</p> <p><input type="checkbox"/> 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.</p> <p>Exp. Date: _____ Applicant: <u>Rick O'Neil</u></p> <p>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.</p>		<p>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.)</p> <p>Lenders Name: _____ Lenders Address: _____</p>	
OWNER-BUILDER DECLARATION		FOR DEPARTMENT USE	
<p>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).):</p> <p><input type="checkbox"/> 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.)</p> <p><input type="checkbox"/> 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.)</p> <p><input type="checkbox"/> I am exempt under Sec. _____, B & P.C. for this reason _____</p> <p>Date _____ Owner _____</p>		<p>Zoning _____ File No. _____ Acres _____</p> <p>Existing Use/Structures _____</p> <p>Proposed Use/Structures _____</p> <p>Zoning Min. Yard Requirements: Front _____ Left _____ Right _____ Back _____</p> <p>NOTE: Fire Safe Standards require all parcels greater than 1 Acre to have a min. 30' setback unless mitigated. <input type="checkbox"/> Mitigation Required <input type="checkbox"/> Address subject to change</p> <p>Approval for Permit Issuance: _____ Approval for Occupancy: _____</p> <p>By: _____ Date: _____</p> <p>Conditions: _____</p>	
LICENSED CONTRACTOR'S DECLARATION		Sewer Connection: <input type="checkbox"/> Available <input type="checkbox"/> Fees Paid	
<p>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.</p> <p>Lic. Class: <u>C16-C36</u> Lic. No. <u>281907</u></p> <p>Exp. Date: <u>3/31/08</u> Contractor: <u>Rick O'Neil</u></p>		<p>Approved by: _____ Date: _____</p>	
ASBESTOS DECLARATION		Road Encroachment: <input type="checkbox"/> Fees Paid	
<p>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 <input type="checkbox"/> does <input type="checkbox"/> does not contain asbestos, or that <input type="checkbox"/> no demolition is authorized by this permit.</p> <p>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.</p> <p>PERMITTEE SIGNATURE: <u>Rick O'Neil</u></p> <p>ADDRESS _____ CITY _____ ZIP _____</p> <p><input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Owner <input type="checkbox"/> Other Licensed Professional</p>		<p>Septic System Permit/Clearance # _____</p> <p>Approved by: _____ Date: _____</p>	
PERMIT AND RESOURCE MANAGEMENT DEPARTMENT		Flood Zone: <input type="checkbox"/> Yes <input type="checkbox"/> No 100 Year Flood Elevation: _____	
<p>Final Date: _____ Inspector: _____</p>		<p>Site Review _____</p> <p>Drainage Review: _____</p> <p>Approved by: _____ Date: _____</p>	
THIS PERMIT SHALL EXPIRE IN THREE(3) YEARS FROM DATE FEES ARE PAID UNLESS OTHERWISE NOTED BY CODE ENFORCEMENT		Fire: _____	
		<p>Approved by: _____ Date: _____</p>	
		Code Enforcement Violation <input type="checkbox"/> Yes <input type="checkbox"/> No Violation # _____	
		<p>This permit is limited to _____ days.</p>	
		Work Authorized: _____	
		<p><u>Residential Fire Sprinklers</u></p>	
		Plans Approved	
		<p><input checked="" type="checkbox"/> Plans Approved <input type="checkbox"/> Post FIRM <input type="checkbox"/> Alquist Priolo Report Available</p> <p><input type="checkbox"/> No Plans Subject to Field Inspection <input type="checkbox"/> Pre FIRM <input type="checkbox"/> Geotechnical report Available</p>	
		<p>Planchek Cleared By: <u>SM JF 6/20/07</u> Date: _____</p> <p>Permit Cleared for Issuance By: <u>Regina 6/20/07</u> Date: _____</p>	
		<p>Type of Construction: _____ Occupancy: <u>R3</u> No. of Stories: _____ No. of Bedrooms: _____</p>	
		<p>Auto. Fire Sprinklers Req'd: _____ No. of Units: _____ Certificate of Occupancy: _____</p>	
		EXPIRED	
		MACHINE SPACE FOR PERMIT FEE	
		<p>PAYMENT REC'D</p> <p>\$ _____</p> <p>JUN 28 2007</p> <p>PERMIT AND RESOURCE MANAGEMENT DEPARTMENT</p>	
		<p>Distribution: White - File Canary - App@JPH Audit Copy - Cash - Voucher - Cardstock - Inspector</p>	

JOB ADDRESS: 22028 NINEVE DR
TM
 PERMIT NUMBER: 15007-3030
 INSPECTION AREA: 2

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: BLD07-3030

Project Address: 22028 NINIVE DR TIM
Cross Street: HWY 1

APN: 109-440-022

Printed: Thursday, June 28, 2007
Initialized by: TLITTLE
Activity Type: B-BLD 601

Description: RESIDENTIAL FIRE SPRINKLERS (BLD06-3511)
Res/Com: R
Std/Quick:
Fire District: TIMBER COVE FIRE

Insp Area: 02
Site Review File #:
Site Review Fees Paid: \$0.00

Owner: PARKER MICHAEL L & ANN
 1700 LA VEREDA RD
 BERKELEY CA 94709-1023

Applicant: TOMS PLUMBING INC
 PO BOX 92
 GUALALA CA
 95445
 707 884 3818

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

Fees:					
Item#	Description	Account Code	Tot Fee	Prev. Pmts	Cur. Pmts
7	CREDIT CARD CONVEN FEE	025015-4020	14.75	.00	.00
119	FIRE COMMERCIAL REVIEW	649103-3661	678.00	.00	.00
121	FIRE RESIDENTIAL REVIEW	649103-3641	226.00	226.00	.00
140	TECH ENHANCEMENT FEE	025015-4040	2.26	2.26	.00
			\$921.01	\$228.26	

Total Fees: \$921.01
Total Paid: \$228.26

Balance Due: \$692.75

Refunds are regulated by the California Building Code (CBC) which reads: "Under Section 107.6, CBC, the building official may authorize refunding of not more than 80 percent of the plan review fee paid when an application is withdrawn or canceled before any plan reviewing is done. The building official may authorize refunding of not more than 80 percent of the permit fee paid when no work has been done under the permit. There shall be no refunding of any fee paid except on written application filed by the original permittee not later than 180 days after the date of fee payment."

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

PAYMENT REC'D \$ <u>692.75</u>
JUN 28 2007
PERMIT AND RESOURCE MANAGEMENT DEPARTMENT COUNTY OF SONOMA



License Detail
Contractor License # 281907

CALIFORNIA CONTRACTORS STATE LICENSE BOARD

DISCLAIMER

A license status check provides information taken from the CSLB license data base. Before relying on this information, you should be aware of the following limitations:

- CSLB complaint disclosure is restricted by law (B&P 7124.6). If this entity is subject to public complaint disclosure, a link for complaint disclosure will appear below. Click on the link or button to obtain complaint and/or legal action information.
- Per B&P 7071.17, only construction related civil judgments reported to the CSLB are disclosed.
- Arbitrations are not listed unless the contractor fails to comply with the terms of the arbitration.
- Due to workload, there may be relevant information that has not yet been entered onto the Board's license data base.

Extract Date: 06/20/2007

***** Business Information *****

TOM'S PLUMBING INC
P O BOX 92
GUALALA, CA 95445
Business Phone Number: (707) 884-3818

Entity: Corporation
Issue Date: 02/01/1973 Expire Date: 03/31/2008

RETAIN
BLD 07-3030

***** License Status *****

This license is current and active. All information below should be reviewed.

***** Classifications *****

Class	Description
C16	FIRE PROTECTION CONTRACTOR
C36	PLUMBING
C42	SANITATION SYSTEM

***** Bonding Information *****

CONTRACTOR'S BOND: This license filed Contractor's Bond number 602019 in the amount of

\$12,500 with the bonding company
SURETY COMPANY OF THE PACIFIC.
Effective Date: **01/01/2007**

Contractor's Bonding History

BOND OF QUALIFYING INDIVIDUAL(1): The Responsible Managing Officer (RMO) RICHARD LEE O'NEIL certified that he/she owns 10 percent or more of the voting stock/equity of the corporation. A bond of qualifying individual is **not** required.
Effective Date: **12/28/1989**

***** Workers Compensation Information *****

This license has workers compensation insurance with the
STATE COMPENSATION INSURANCE FUND
Policy Number: **713-0002010** Effective Date: **10/01/1998** Expire Date: **10/01/2007**

Workers Compensation History

Personnel listed on this license (current or disassociated) are listed on other licenses.

Personnel List **Other Licenses**

License Number Request **Contractor Name Request** **Personnel Name Request**
Salesperson Request **Salesperson Name Request**

© 2006 State of California. [Conditions of Use](#) [Privacy Policy](#)