

B
Type

2
Docs

Plats

B-018203

Building Permits Number (List all associated with these documents)

1632

Street Number

S Wright Rd.

Street Name

ROS

Community Code

035-201-025

APN

SONOMA COUNTY
BUILDING INSPECTION DEPARTMENT
 ROOM 115A • 2555 MENDOCINO AVE. • SANTA ROSA, CALIFORNIA 95401
 TELEPHONE (707) 527-2221

When indicated this permit will cover work as noted.

APPLICANT: ENTER DATA IN AREA OUTLINED BY HEAVY RULE AND COMPLETE CERTIFICATE STATEMENTS ON REVERSE SIDE. NO EXISTING LENDER

PERMIT NUMBER **18203**

A
P
E
M
G

OWNER NAME: **Donald W Krusze**
 MAILING ADDRESS: **PO Box 3772**
 CITY: **SANTA ROSA** TEL NO: **525 8537**

LENDING INSTITUTION NAME: _____
 ADDRESS: _____
 CITY: _____

W.A.H. FEES IN ACCORDANCE WITH TITLE 25, CHAPTER 5, HOUSING & COMMUNITY DEVELOPMENT)

FIRE ZONE	TYPE OF STRUCTURE
OCCUPANCY	NO. OF STORIES

CONTRACTOR NAME: **SAME AS ABOVE**
 ADDRESS: _____
 CITY: _____
 STATE LIC. NO.: _____

DATE RECEIVED: **4/27/76** REC'D BY: **PCW** DATE ISSUED: **4/27/76**

MOBILEHOME PARK INDIVIDUAL MOBILEHOME

JOB ADDRESS: **1632 WRIGHT RD**
 SUB DIVISION: _____ LGT _____ BLK _____
 CITY: _____
 NEAREST CROSS STREET: _____

SEWER CONNECTION: _____ SANITATION ENGINEER: _____
 APPROVED BY: _____ DATE: **1/1**

PREVIOUS PERMIT NO. _____

BUILDING PERMIT NO. _____

SEPTIC TANK INSTALLATION: _____ HEALTH DEPARTMENT
 PERMIT NUMBER _____ OR CLEARANCE _____
 DATE REC'D: **1/1** DATE ISSUED: **1/1**

FEES - PER CHAPTER 7, et. seq. Sonoma County Code.

- BUILDING
- PLAN CHECK
- PLUMBING
- ELECTRICAL **7.00**
- MECHANICAL
- GRADING
- S.W.C.A.
- LATF FEES
- OTHER

TOTAL \$ 7.00

NO PLANS PLANS APPROVED SPECS APPROVED
 BUILDING INSPECTOR: *[Signature]*

INSPECTIONS: _____
 FINAL GRADING _____ CONCRETE SLAB _____
 FORMS _____ FRAME _____
 MASONRY _____ FIREPLACE HEARTH _____

DIAPHRAGMS _____
 LINTEL _____
 CHIMNEY _____
 ROOFING _____
 ALARM SYSTEM _____
 SIDING _____
 CLOSE IN _____ **1976**
 STUCCO MESH _____ **MAY**
 SCRATCH _____
 DROV-IN _____
 LATH OR GYP. BD _____
 STAIRWAYS & HANDRAILS _____

PAID
 PR 27-76 SCOT 903A *****7.00
 PR 27-76 SCOT 10 903 *****182.03

ASSESSOR'S PARCEL NO.: **35-231-25**
 CLASS OF WORK: **ELECTRICAL**
 USE OF BUILDING: **ARG - DUMP**

PLANNING DEPARTMENT ZONING PERMIT OR CLEARANCE
 L.S. NO. _____ FILE NO. **8256**
 ZONING DISTRICT: **A-1** USE OF STRUCTURE OR AND: **electrical serv**

DIMENSIONS OF SITE: **2.0 ac** AREA: **85-3743sq**
 YARDS FRONT: **1** LEFT SIDE: **1** RIGHT SIDE: _____

	SQ. IN SQUARE FEET	RATE PER SQUARE FOOT	VALUE	FEES
FLOOR AREA				
GARAGE DET. <input type="checkbox"/> ATT. <input type="checkbox"/>				
CARPORT DET. <input type="checkbox"/> ATT. <input type="checkbox"/>				
DECK YES <input type="checkbox"/> AWNING NO <input type="checkbox"/>				
TOTAL ▶				

REAR OTHER BUILDINGS ON SITE: **EX storage Bldgs**
 OTHER INFORMATION: **Permit allows pour for pump purpose ONLY**

APPROVED BY: *[Signature]* DATE: **4/27/76**
 SONOMA COUNTY PLANNING DEPARTMENT

FINAL ZONING CLEARANCE: REQUIRED NOT REQUIRED

OTHER INSPECTIONS: _____

One copy of plot plan required.
 I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all County Ordinances and State Laws regulating building construction.
 THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 60 DAYS.
 BY: *[Signature]*
 SIGNATURE OF PERMITTEE OR AUTHORIZED AGENT

FINAL INSPECTION DATE: **5/4/76** BY: **WVJ**

REMARKS: **4 p.**

To: COUNTY OF SONOMA, BUILDING INSPECTION DEPARTMENT
 The undersigned applicant for building permit certifies as follows:

CONTRACTOR'S LICENSE LAW CERTIFICATE

(COMPLETE EITHER A OR B)

- A. THE APPLICANT IS LICENSED UNDER THE PROVISIONS OF THE CONTRACTORS LICENSE LAW UNDER LICENSE NUMBER _____ WHICH LICENSE IS IN FULL FORCE AND EFFECT.
- B. THE APPLICANT IS EXEMPT FROM THE PROVISIONS OF THE CONTRACTORS LICENSE LAW FOR THE FOLLOWING REASONS:

WORKMEN'S COMPENSATION CERTIFICATE
 (One of three must be completed)

1. A currently effective certificate of Workmen's Compensation Insurance coverage is on file with this office.
2. I certify that in the performance of the work for which this permit will be issued I shall not employ any person in any manner so as to become subject to the workmen's compensation laws of California.
3. I do not regularly engage in construction work, however, I certify that Workmen's Compensation Insurance is currently in force.

DATE: _____ SIGNATURE: _____
 Policy # _____
 APPROVED: _____

APPROVED INSPECTION	DATE	INSPECTED BY
ROUGH PLUMBING		
ROUGH PLUMBING AND SHOWER PAN TESTS		
GAS PIPING		
FINAL ROUGH PLUMBING		
HOUSE-SEWER		
HOT WATER HEATER INSTALLATION & VENT		
FINISH PLUMBING		
FINAL GAS PIPING		
METER SET		
FINAL INSPECTION		

PLUMBING		FEES	NO.	RATE	QUANT.
PLUMBING FIXTURES				25c	
SEWER				10c	
GAS OUTLETS - 1/2" S OVER 5 @ 30c EACH				25c	
HOT WATER HEATER AND/OR VENT	ELECTRIC <input type="checkbox"/>			EA.	
WATER PIPING				\$1.50	
VAC. BREAKER W/WATER PIPING				\$2.00	
NEW SINGLE FAMILY DWELLING (PER SQUARE FOOT OF LIVING AREA)				0.150	
OTHER					
PLAN CHECKING FEE					
PERMIT FEE					2.00

TOTAL PLUMBING FEES → 2.00

MECHANICAL		FEES	NO.	RATE	QUANT.
UNDER FLOOR DUCTS					
FINAL DUCT WORK					
VENTS & FLUES					
ROOF MOUNTS FOR EQUIPMENT, INCLUDING PITCH POCKETS					
ELECTRICAL WIRING AND DISCONNECTS					
EQUIPMENT AND GRILL INSTALLATION					
FINAL MECHANICAL					
INSTALLATION OF LADDERS					

MECHANICAL		FEES	NO.	RATE	QUANT.
FORCED AIR OR GRAVITY FURNACE OR BURNER	11,100,000 BTU OVER 100,000 BTU OVER \$5.00			\$4.00	
FLOOR FURNACE, SUSPENDED HEATER, RECESSED WALL HEATER OR FLOOR MOUNTED UNIT HEATER				EA. \$4.00	
APPLIANCE VENT, VENT FAN (SINGLE DUCT)				EA. \$2.00	
REFRIGERATION, COMFORT COOLING, ABSORPTION, OR EVAPORATIVE COOLING UNITS				EA. \$4.00	
BOILER, COMPRESSOR OR ABSORPTION SYSTEM - REFER TO CODE FOR RATES					
AIR HANDLING UNITS - 1-10,000 CFM @ \$3.00 10,001 AND OVER @ \$5.00				\$3.00	
EVAPORATIVE COOLER, SEPARATE VENTILATION SYSTEM, HOOD FOR EXHAUST SYSTEM				EA. \$3.00	
INCINERATOR - DOMESTIC - \$5.00 INDUSTRIAL OR COMMERCIAL - \$20.00					
OTHER APPLIANCES OR EQUIPMENT				EA. \$3.00	
NEW SINGLE OR TWO FAMILY DWELLING (PER SQUARE FOOT OF LIVING AREA)				0.150	
PERMIT FEE					3.00

TOTAL MECHANICAL FEES → 3.00

ELECTRICAL		FEES	NO.	RATE	QUANT.
ROUGH WIRING					
ELECTRICAL OUTLETS	1 FIRST 20 @ 25c EACH - OVER 20 @ 10c EACH			25c	
LIGHTING FIXTURES	1 FIRST 20 @ 25c EACH - OVER 20 @ 10c EACH			25c	
RANGE, DUCT WATER HEATER, CLOTHES DRYER, FORCED AIR UNIT, DISHWASHER, ETC.	MOBILE HOME ACCEPTABLE			EA. \$1.00	
SERVICE AS NOTED					3.00
AIR HEATERS	(PER KW)			10c	
MOTORS					
NEW SINGLE FAMILY DWELLING (PER SQUARE FOOT OF LIVING AREA)				0.150	
OTHER					
PLAN CHECKING FEE					
PERMIT FEE					3.00

TOTAL ELECTRICAL FEES → 7.00

SONOMA COUNTY BUILDING INSPECTION DEPARTMENT
 ROOM 115A • 2555 MENDOCINO AVE. • SANTA ROSA, CALIFORNIA 95401
 TELEPHONE (707) 527-2221

When validated this permit covers work as noted.

APPLICANT: ENTER DATA IN AREA OUTLINED BY HEAVY RULE, AND COMPLETE CERTIFICATE STATEMENTS ON REVERSE SIDE

NO EXISTING LENDER

PERMIT NUMBER

29186

A
P
E
M
G

FIRE ZONE	TYPE OF STRUCTURE
OCCUPANCY	NO OF STOREYS

IM.H. FEES IN ACCORDANCE WITH TITLE 25, CHAPTER 5, HOUSING & COMMUNITY DEVELOPMENT

MOBILEHOME PARK INDIVIDUAL MOBILEHOME

OWNER NAME: DON KRUSZE
 MAILING ADDRESS: P.O. Box 3772
 CITY: SANTA ROSA TEL NO: 525-1998

NAME: _____
 ADDRESS: _____
 CITY: _____

CONTRACTOR NAME: NONE
 ADDRESS: _____
 CITY: _____
 STATE LIC NO: _____ TEL NO: _____

DATE RECEIVED: 1-16-78 REC'D BY: RA DATE ISSUED: 1-16-78

PREVIOUS PERMIT NO. _____
 BUILDING PERMIT NO. _____

JOB ADDRESS: 1632 SOUTH WILSON RD
 SUB DIVISION: _____ LOT: _____ BLK: _____
 CITY: SANTA ROSA
 NEAREST CROSS STREET: LUOWIG AVE.
 ASSESSOR'S PARCEL NO: 035-501-25

SEWER CONNECTION: _____ SANITATION ENGINEER: _____
 APPROVED BY: _____ DATE: 1/1

CLASS OF WORK: PROVIDE ELECTRICAL 2 STORAGE SHEDS
 USE OF BUILDING: ELECTRICAL
 NEW ALTERATION ADDITION DEMOLISH REPAIR MOVING

SEPTIC TANK INSTALLATION: _____ HEALTH DEPARTMENT: _____
 PERMIT NUMBER: _____ OR CLEARANCE: _____
 DATE REC'D: 1/1 DATE ISSUED: 1/1

FLOOR AREA	SIZE IN SQUARE FEET	RATE PER SQUARE FOOT	VALUE	FEC
GARAGE	DET <input type="checkbox"/> ATT <input type="checkbox"/>			
CARPORT	DET <input type="checkbox"/> ATT <input type="checkbox"/>			
DECK	YES <input type="checkbox"/>			
AWNING	NO <input type="checkbox"/>			
TOTAL ▶				

PLANNING DEPARTMENT ZONING PERMIT OR CLEARANCE
 L.S. NO: _____ FILE NO: MH 8256
 ZONING DISTRICT: A1 USE OF STRUCTURE OR LAND: RES.

DIMENSIONS OF SITE: 171 x 484 AREA: 2000
 YARDS: FRONT: _____ LEFT SIDE: _____ REAR: _____ RIGHT SIDE: _____

OTHER BUILDINGS ON SITE: existing house, 2 storage sheds
 OTHER INFORMATION: storage for personal effects

APPROVED: SONOMA COUNTY PLANNING DEPARTMENT
 BY: Jacobs DATE: 1/16/78

FINAL ZONING CLEARANCE: REQUIRED NOT REQUIRED

OTHER INSPECTIONS: _____

FEES - PER CHAPTER 7, et. seq. Sonoma County Code.

<input type="checkbox"/> BUILDING	_____
<input type="checkbox"/> PLAN CHECK	_____
<input type="checkbox"/> PLUMBING	_____
<input checked="" type="checkbox"/> ELECTRICAL	12.00
<input type="checkbox"/> MECHANICAL	_____
<input type="checkbox"/> GRADING	_____
<input type="checkbox"/> S.W.C.A.	_____
<input type="checkbox"/> LATE FEES	_____
<input type="checkbox"/> OTHER	_____
<input checked="" type="checkbox"/> NO PLANS	TOTAL \$ 12.00
<input type="checkbox"/> PLANS APPROVED	_____
<input type="checkbox"/> SPECS. APPROVED	_____

BUILDING INSPECTOR: D. Amadori

INSPECTIONS

FINAL GRADING	CONCRETE SLAB
FORMS	FRAME
MASONRY	FIREPLACE HEARTH
DIAPHRAGMS	
LINTEL	
CHIMNEY	
ROOFING	
ALARM SYSTEM	
SIDING	
CLOSE IN	
STUCCO MESH	
SCRATCH	
BROWN LATH OR GYP. BD.	
STAIRWAYS & HANDRAILS	

One copy of plot plan required.
 I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all County Ordinances and State Laws regulating building construction.
 THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 60 DAYS.
 BY: Don Krusze
 SIGNATURE OF PERMITTEE OR AUTHORIZED AGENT

CERTAIN AREAS WITHIN SONOMA COUNTY MAY BE GEOLOGICALLY HAZARDOUS. YOU ARE INVITED TO REVIEW ANY GEOLOGIC DATA THAT THIS DEPT. HAS AVAILABLE TO AID YOU IN MAKING A DETERMINATION AS TO THE SUITABILITY OF A PROPOSED BUILDING SITE.

REMARKS: _____

FINAL INSPECTION BY: _____ DATE: _____

PAID 16-78
 355 *****29186

To: COUNTY OF SONOMA, BUILDING INSPECTION DEPARTMENT

1. The undersigned applicant for building permit certifies as follows:

CONTRACTOR'S LICENSE LAW CERTIFICATE

(COMPLETE EITHER A OR B)

A. THE APPLICANT IS LICENSED UNDER THE PROVISIONS OF THE CONTRACTORS LICENSE LAW UNDER LICENSE NUMBER 12345678 WHICH LICENSE IS IN FULL FORCE AND EFFECT.

B. THE APPLICANT IS EXEMPT FROM THE PROVISIONS OF THE CONTRACTORS LICENSE LAW FOR THE FOLLOWING REASONS: None

WORKMEN'S COMPENSATION CERTIFICATE

(One of three must be completed)

- A currently effective certificate of Workmen's Compensation Insurance coverage is on file with this office.
- I certify that in the performance of the work for which this permit will be issued I shall not employ any person in any manner so as to become subject to the workmen's compensation laws of California.
- I do not regularly engage in construction work, however, I certify that Workmen's Compensation Insurance is currently in force.

Policy #

DATE

SIGNATURE

APPLICANT

APPROVED INSPECTION	DATE	INSPECTED BY		FEES	NO.	RATE	AMOUNT	
ROUGH PLUMBING			PLUMBING	PLUMBING FIXTURES		\$ 1.50		
ROUGH PLUMBING AND SHOWER PAN TESTS				SEWER		\$ 3.00		
GAS PIPING				GAS OUTLETS 1 TO 5 \$1.50 OVER 5 30¢ EACH				
FINAL ROUGH PLUMBING				HOT WATER HEATER AND/OR VENT <input type="checkbox"/> ELECTRIC		\$ 1.50		
HOUSE SEWER				WATER PIPING		\$ 1.50		
HOT WATER HEATER INSTALLATION & VENT				VAC. BREAKER W/WATER PIPING		\$ 2.00		
FINISH PLUMBING				NEW SINGLE FAMILY DWELLING (PER SQUARE FOOT OF LIVING AREA)		0.75		
FINAL GAS PIPING				OTHER				
METER SET				PLAN CHECKING FEE				
FINAL INSPECTION				PERMIT FEE			2.00	
			TOTAL PLUMBING FEES					2.00

APPROVED INSPECTION	DATE	INSPECTED BY		FEES	NO.	RATE	AMOUNT	
UNDER FLOOR DUCTS			MECHANICAL	FORCED AIR OR GRAVITY FURNACE OR BURNER 1-10,000 BTU @ \$3.00 100,000 BTU OVER @ \$3.00		\$4.00	\$5.00	
FINAL DUCT WORK				FLOOR FURNACE, SUSPENDED HEATER, RECESSED WALL HEAT. OR FLOOR MOUNTED UNIT HEATER		EA \$ 4.00		
VENTS & FLUES				APPLIANCE VENT, VENT FAN (single duct)		EA \$ 2.00		
ROOF MOUNTED UNITS FOR EQUIPMENT, INCLUDING PITCH POLES				REFRIGERATION, COMFORT COOLING, ABSORPTION OR EVAPORATIVE COOLING UNITS		EA \$ 4.00		
ELECTRICAL WIRING AND DISCONNECTS				BOILER, COMPRESSOR OR ABSORPTION SYSTEM - REFER TO CODE FOR RATES				
EQUIPMENT AND GRILL INSTALLATION				AIR HANDLING UNITS 1-10,000 CFM @ \$3.00 10,000 AND OVER @ \$5.00		\$2.00	\$5.00	
FINAL MECHANICAL				EVAPORATIVE COOLER SEPARATE VENTILATION SYSTEM, HOOD OR EXHAUST SYSTEM		EA \$ 3.00		
INSTALLATION OF LADDERS				INCINERATOR - DOMESTIC \$3.00 INDUSTRIAL OR COMMERCIAL \$25.00				
				OTHER APPLIANCES OR EQUIPMENT		EA \$ 3.00		
				NEW SINGLE OR TWO FAMILY DWELLING (PER SQUARE FOOT OF LIVING AREA)		0.75		
			TOTAL MECHANICAL FEES					3.00

APPROVED INSPECTION	DATE	INSPECTED BY		FEES	NO.	RATE	AMOUNT		
ROUGH WIRING			ELECTRICAL	ELECTRICAL OUTLETS (FIRST 20 @ 25¢ EACH - OVER 20 @ 10¢ EACH)	3	25¢	10¢		
ELECTRICAL SERVICES AND SWITCHBOARDS				LIGHTING FIXTURES (FIRST 20 @ 25¢ EACH - OVER 20 @ 10¢ EACH)		25¢	10¢		
SERVICE & EQUIPMENT GROUNDING				RANGE OVEN WATER HEATER CLOTHES DRYER, REFRIGERATOR, DISHWASHER ETC. (NO BLENDED RELEVANCE)		EA \$1.00			
FINISH WIRING				SEWER AS NOTED		3.00			
FIXTURE INSTALLATION				AIR HEATERS (PER KW)		10¢			
FINAL ELECTRICAL				MOTORS					
TEMPORARY POWER POLES				NEW SINGLE FAMILY DWELLING (PER SQUARE FOOT OF LIVING AREA)		0.75			
METER SET				OTHER					
				PLAN CHECKING FEE					
				PERMIT FEE					3.00
			TOTAL ELECTRICAL FEES					12.00	