

748 Brittain Ln

**SONOMA COUNTY  
BUILDING INSPECTION**

575 ADMINISTRATION DRIVE  
SANTA ROSA, CA 95403-2084  
SONOMA COUNTY (707) 527-2221

JOB ADDRESS

748 Brittain Ln

INCORPORATED CITY YES NO  
Sonomapol RD

JOB REFERENCE  
140  
C-1

PERMIT NUMBER  
117866

INSPECTION AREA  
3

**OWNER**  
NAME: John Williams  
ADDRESS: 748 Brittain Ln  
CITY: Santa Rosa CA  
ZIP CODE: 95408 5490  
TEL NO: 578

**PROJECT**  
ADDRESS: 748 Brittain Ln  
CITY: Santa Rosa CA  
SUBDIVISION NAME: UNIT NO: LOT: BLOCK:

**ASSESSOR'S PARCEL NO.:** 035-251-33.9  
**NEAREST CROSS STREET:** Ebasita pool Rd

**CONTRACTOR:**  
NAME: SELF  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
STATE LG NO: \_\_\_\_\_ LIC CLASS: \_\_\_\_\_

**DESIGNER:**  
NAME: SELF  
ADDRESS: \_\_\_\_\_  
CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_  
TEL NO: \_\_\_\_\_

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.

CONDITION OF SOIL AT JOB SITE  
 ORIGINAL  ENGINEERED FILL  LOOSE FILL

SITE REVIEW: 0-2% level

BY: PWS DATE: 10-26-92

REQUIRED REPORTS  
 GEOLOGY  SOILS  COMPACTION  
FLOOD ZONE   
 YES  NO 100 YR FLOOD ELEV: \_\_\_\_\_

SEWER CONNECTION: SANITATION ENGINEER  
APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

ROAD ENCROACHMENT:  
APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

SEPTIC TANK INSTALLATION: HEALTH DEPARTMENT  
PERMIT NUMBER: 92-3325 CLEARANCE  
DATE REC'D: \_\_\_\_\_ DATE ISSUED: 3/18/93

**LICENSED CONTRACTORS DECLARATION:** I hereby affirm 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.

Contractor's Signature: \_\_\_\_\_ Lic. # \_\_\_\_\_

**OWNER-BUILDER DECLARATION:** I hereby affirm that I am exempt from the Contractor's License Law (Sec. 7044, Business and Professions Code) because I am the owner of the property and the structure to be constructed, altered, improved, repaired, or replaced, and I am not receiving any compensation for such services. I am not acting as a contractor for any other person.

**OWNER'S DECLARATION:** I hereby affirm that I am the owner of the property and the structure to be constructed, altered, improved, repaired, or replaced, and I am not receiving any compensation for such services. I am not acting as a contractor for any other person.

Owner's Signature: John Williams

WORK AUTHORIZED: Addition 40  
Existing SFD  
Bathroom - Dry  
Reseal - Toilet  
New Pop Repair

FLOOR AREA	SIZE IN SQUARE FEET	RATE PER SQUARE FOOT	VALUE
Garage Carport	60	72.90	4374
Deck			Contract Price 1626
FEES - Per Chapter 7, of seq. Sonoma County Code			TOTAL 6,000

**WORKER'S COMPENSATION DECLARATION:** I hereby affirm that I have a certificate of insurance to all persons or a certificate of Workers Compensation Insurance, or a certified copy thereof filed with the Existing Inspector's Office (Sec. 3800, Lab. C).

Policy No. \_\_\_\_\_ Insurance Co. \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

**CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE:** I certify that in the performance of the work for which this permit is issued, no person in any manner so as to become subject to the Workers Compensation Law of California.

Owner's or Contractor's Signature: John Williams

**CONSTRUCTION LENDING AGENCY:** I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 309, Civ. C).

Lender's Name: \_\_\_\_\_  
Lender's Address: \_\_\_\_\_

<input checked="" type="checkbox"/> BUILDING	72.00
<input type="checkbox"/> PLAN CHECK	
<input checked="" type="checkbox"/> PLUMBING	25.00
<input checked="" type="checkbox"/> ELECTRICAL	25.00
<input checked="" type="checkbox"/> MECHANICAL	25.00
<input type="checkbox"/> GRADING	
<input type="checkbox"/> SITE PROP	
<input checked="" type="checkbox"/> PLANNING	14.00
<input checked="" type="checkbox"/> FIRE MIGHT	10/26/92
<input checked="" type="checkbox"/> SEISMIC	60
<input checked="" type="checkbox"/> INVEST. FEES	099222 145.00
<input checked="" type="checkbox"/> PROCESSING FEE	10.00
<b>TOTAL \$</b>	

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMPLETED WITHIN 180 DAYS, AND IS SUBJECT TO EXPIRATION IF WORK THEREUNDER IS SUSPENDED FOR 180 DAYS.

**PERMITTEE**  
NAME: John Williams  
ADDRESS: 748 Brittain Ln Santa Rosa CA  
CITY: Santa Rosa CA  
I certify that I have read this application and state that the above information is correct and that I, the owner of the property, authorize the contractor to comply with all County 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 a Certificate of Exemption from the Worker's Compensation provisions 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, the permit shall be deemed void.

Signature: John Williams DATE: 10-23-92

CONTRACTOR  OWNER  AGENT FOR CONTRACTOR  AGENT FOR OWNER

APPROVED BY: PWS DATE: 1-5-92

DATE RECEIVED: 10/23/92  
CALCULATED BY: MW  
NO. OF BEDROOMS: 1

CERTIFICATE OF OCC

FINAL DATE

**PLANNING DEPARTMENT**

ZONING: RR FILE # \_\_\_\_\_ ACRES: 3.4

EXISTING USE: SFD

PROPOSED USE: Bath Addition 0/0

YARDS FRONT: N/A LEFT SIDE: 9 1/2 m RIGHT SIDE: N/A REAR: 20 m

**PLANNING APPROVALS**

FOR PERMIT ISSUANCE: \_\_\_\_\_  
ON OCCUPANCY: \_\_\_\_\_

BY: M. Perry DATE: 11/12/93

REMARKS:

SOUND MITIGATION:  REQUIRED  EXEMPT  
DEVELOPMENT FEES:  REQUIRED  EXEMPT

MACHINE SPACE FOR PERMIT FEE

CHECK	\$320.00
CHNG	910.00
118004	05-18-92001
#	0117866
BLDG.	\$70.00
BLDG.	\$25.00
BLDG.	\$25.00
BLDG.	\$25.00
PLANIG	\$14.00
EQ FGM	\$0.60
BLDG.	\$16.00
BLDG.	\$145.00
BLDG.	\$16.00

**SONOMA COUNTY  
BUILDING INSPECTION**

INSPECTOR COPY

575 ADMINISTRATION DRIVE  
SANTA ROSA, CA 95403-2884  
TELEPHONE (707) 527-2221

JOB ADDRESS

718 Brittain Ln

FATED CITY YES/NO

MAP REFERENCE  
E-1  
1410

PERMIT NUMBER

INSPECTION AREA

3

**OWNER**  
Name: John Williams  
Address: 748 Brittain Ln City: Santa Rosa, CA Zip: 95403  
Tel No: 578 5490

**PROJECT**  
Address: 748 Brittain Ln City: Santa Rosa, CA  
Subdivision Name: \_\_\_\_\_ Unit No: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

**CONTRACTOR**  
Name: Self  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

**DESIGNER**  
Name: Self  
Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

ASSESSOR'S PARCEL NO. 035-251-33-9  
NEAREST CROSS STREET SEBASTIA POOL RD

CERTAIN AREAS WITHIN JOB AREA MAY BE GEOLOGICALLY HAZARDOUS. YOU ARE ADVISED TO REVIEW ANY GEOLOGY DATA THAT THIS DEPT HAS AVAILABLE TO AID YOU IN MAKING A DETERMINATION AS TO THE FEASIBILITY OF A PROPOSED BUILDING SITE.

CONDITION OF SOIL AT JOB SITE  
 ORIGINAL  ENGINEERED FILL  ROCK FILL

SITE REVIEW: 11-26-92

BY: DWS DATE: 11-26-92

REQUIRED REPORTS  
 GEOLOGY  SOILS  COMPACTION  
 FLOOD ZONE  100 YR FLOOD ELEV  
 YES  NO

SEWER CONNECTION: SANITARIAN ENGINEER

APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

ROAD ENCROACHMENT:  
APPROVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

SEPTIC TANK INSTALLATION: HEALTH DEPARTMENT  
PERMIT NUMBER: 11-235 OR CLEARANCE: 25  
DATE REC'D: 11 DATE ISSUED: 11-23

**LICENSED CONTRACTOR'S DECLARATION:** I hereby affirm that I am licensed under provisions of Chapter 1 (commencing with Section 70001) of Division 3 of the Business and Professions Code and my license is in full force and effect.

**OWNER-BUILDER DECLARATION:** I hereby affirm that I am exempt from the Contractor's License Law for the following reason (See 70315 Business and Professions Code. Any city or county which requires a permit to construct after improve demolition or repair any structure prior to its issuance may require the applicant for such permit to file a signed statement "I am licensed pursuant to the provisions of the Contractor's License Law (Chapter 1) (commencing with Section 70001) of Division 3 of the Business and Professions Code and that I am exempt therefrom and the basis for the alleged exemption. Any violation of Section 70315, any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).  
 as owner of the property, or my employees with wages as the sole compensation, will do the work, and the structure is not erected or altered for use (See 7044 Business and Professions Code. The Contractor's License Law does not apply to an owner of property who builds or repairs thereon and who does such work himself or through his own employees, provided that such activities are not intended or offered for sale; however, the building or improvement is sold within one year of completion, the owner is not without the liability of a contractor if he did not build or improve for the purpose of sale.)  
 as owner of the property, am exclusively contracting with licensed contractors to construct the project (See 7044 Business and Professions Code. The Contractor's License Law does not apply to an owner of property who builds or improves thereon and contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law.)  
 I am exempt under Section \_\_\_\_\_ of the Business and Professions Code.

FLOOR AREA	SIZE IN SQUARE FEET	RATE PER SQUARE FOOT	VALUE
10	700	4374	
DECK			
PERMIT			
FEES - Per Chapter 7, of Sonoma County Code			
TOTAL			6,000

**WORKER'S COMPENSATION DECLARATION:** I hereby affirm that I have a certificate of coverage to the performance of the work for which this permit is issued or a certified copy thereof filed with the Building Inspection Department (See 38000 Lab. C.)

Policy No: \_\_\_\_\_ Insurer's Name: \_\_\_\_\_  
Applicant's Signature: \_\_\_\_\_ Expiration: \_\_\_\_\_

**CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE:** I certify that the performance of the work for which this permit is issued will not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.

Owner or Contractor's Signature: John Williams

**CONSTRUCTION LENDING AGENCY:** I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (See 3007 Civ. C.)

Lender's Name: \_\_\_\_\_  
Lender's Address: \_\_\_\_\_

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS, AND IS SUBJECT TO EXPIRATION IF WORK THEREUNDER IS SUSPENDED FOR 180 DAYS.

**PERMITTEE**  
Name: John Williams City: Santa Rosa Zip: 95403  
Address: 748 Brittain Ln  
I certify that I have read this application and state that the above information is correct and that I am the owner or the duly authorized agent of the owner. I agree to comply with all County 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 from the Worker's Compensation provisions 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 void.

Signature: John Williams DATE: 11-23-92

CONTRACTOR  OWNER  AGENT FOR CONTRACTOR  AGENT FOR OWNER

**PLANNING DEPARTMENT**

ZONING: RM-10 FILE NO: \_\_\_\_\_ ACRES: 1+

EXPIRES: 10/1/93

PROPOSED USE: \_\_\_\_\_

VARIOUS SIDES: FRONT: \_\_\_\_\_ LEFT: \_\_\_\_\_ RIGHT: \_\_\_\_\_ REAR: \_\_\_\_\_

**PLANNING APPROVALS**

FOR PERMIT ISSUANCE: \_\_\_\_\_ DATE: \_\_\_\_\_

FOR OCCUPANCY: \_\_\_\_\_ DATE: \_\_\_\_\_

REMARKS: \_\_\_\_\_

WORK AUTHORIZED: addition to existing 3rd floor  
basement - 1000 sq ft  
risers

NEW:  ALTER:  REPAIR:  MAINTENANCE:  DECOR:

FLOOR AREA	SIZE IN SQUARE FEET	RATE PER SQUARE FOOT	VALUE
10	700	4374	
DECK			
PERMIT			
FEES - Per Chapter 7, of Sonoma County Code			
TOTAL			6,000

- BUILDING
- PLAN CHECK
- PLUMBING
- ELECTRICAL
- MECHANICAL
- GRADING
- SITE/PROP
- PLANNING
- FIRE
- SEISMIC VIBRATION

INVEST FEES: 99222 74000

PROCESSING FEE: \_\_\_\_\_

TOTAL \$: \_\_\_\_\_

PLANS APPROVED  NO PLANS SUBJECT TO FIELD INSPECTION

APPROVED BY: DWS DATE: 11-23-92

TYPE OF WORK	NO. OF PERMITS	NO. OF BEDROOMS	AMOUNT
CHECK			\$20.00
CHRG			\$0.00
19904			\$18,930.00
#			\$1170.00
BLDG.			\$70.00
BLDG.			\$25.00
BLDG.			\$25.00
BLDG.			\$25.00
PLUMB			\$10.00
EN FOR			\$10.00
PLUMB			\$10.00
EN FOR			\$10.00
PLUMB			\$10.00
EN FOR			\$10.00

SOUND MITIGATION:  REQUIRED  EXEMPT  
DEVELOPMENT FEES:  REQUIRED  EXEMPT

INSPECTION RECORD	DATE	NAME	REMARKS
SURVEY			
FOUNDATION FORMS - SFT BACK	8-11-93	<del>John</del> <del>PLM</del>	
SLAB			
UFER GROUND			
CONC BLOCK			
RETAINING WALLS			
MASONRY			
FIREPLACE - FOOTING <input type="checkbox"/>			
HEARTH <input type="checkbox"/> THROAT <input type="checkbox"/> CHIMNEY <input type="checkbox"/>			
UNDERFLOOR SLAB ELEC			
UNDERFLOOR SLAB MECH			
UNDERFLOOR SLAB PLY			
UNDERFLOOR SLAB FRAME			
ELEG ROUGH	8-11-93	PLM	
MECH ROUGH	8-11-93	PLM	
PLUMB ROUGH	8-11-93	PLM	
GAS TEST			
FRAME ROUGH	8-11-93	PLM	
DIAHRAGMS			
ROOF NAILING			
SHFR WALLS			
DOWN			
ROOFING			
INFILTRATION CONTROL			
INSULATION, ROOF <input type="checkbox"/> WALLS <input type="checkbox"/> FLOORS <input type="checkbox"/>			
WALL BOARD	9-15-93	PLM	
FIRE WALLS			
GAS SERV. EQ. EQUIP			
ELEG SERVICE EQUIP			
PANEL BOARDS			
SMOKE DETECTOR			
STAIRWAYS - HANDRAILS			
SUSPENDED CEILING			
FIRE DAMPERS			
RAMPS - RAILS			
HANDICAP REQ			
ENERGY REQ			
TEMP OCCUPANCY			
TEMP ELEG			
TEMP GAS			
FINAL			
FIRE DEPT			
HEALTH DEPT / PUBLIC WORKS			
PLANNING			
ELEG METER AUTH			
GAS METER AUTH			
PLUMBING FINAL			
ELEG FINAL			
MECH FINAL			
AIR QUALITY CONTROL			
GRADING FINAL			
SWIMMING POOL PRE - FINISH			
PRE - FINISH			
PRE - FINISH			

3

PERMIT #

PLAN RETENTION REQUIRED  
 YES  NO

OWNER - BUILDER VERIFICATION

Attention Property Owner:

An "owner-builder" building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed property improvement (yes or no) yes.

2. I (have/have not) have signed an application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction: N/A

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Phone: \_\_\_\_\_ Contractors Licence No: \_\_\_\_\_

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise and provide major work: N/A

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Phone: \_\_\_\_\_ Contractors Licence No: \_\_\_\_\_

5. I will provide some of the work but I have contracted (hired) the following persons to provide the work indicated: N/A

Name Address Phone Type of work  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: Property Owner: Anna Williams Date: 1-12-93

=====

Job Address: 740 Brittain Ln. S.R. A.P.N. # D35-251-33-9

Description of work: Bath addition

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SONOMA COUNTY BUILDING INSPECTION DEPARTMENT

PERMIT QUESTIONNAIRE

Prior to issuance of a building permit, this department is required to verify that your project is consistent with regulations of other agencies. This questionnaire will assist us in informing you of those agencies you must contact and those approvals you must secure prior to issuance of a building permit.

PROJECT ADDRESS: 748 BRITAIN LN

=====
Sewage disposal for the subject building will be provided by:

- Connection to public sewer: 
Septic Disposal System: 
The proposed building contains no plumbing:

=====
Water for the subject building will be provided by:

- A private well: 
From the following water district: \_\_\_\_\_
The building contains no plumbing or water systems: \_\_\_\_\_

=====
The subject building is located in the following School District:

=====
The subject building (  is), (  is not), (  may be) located within the Santa Rosa sphere of influence. These are the areas of anticipated future City annexations. Projects within these areas are subject to City review and approval prior to building permit issuance.

- Access to the property:
Exists and will not be altered: 
Will be developed or altered: 
Access is from a public or private street: \_\_\_\_\_

=====
Fire protection at this property is provided by the following Fire District: ROSELAND. This property (  is), (  is not) in a State Wildfire Responsibility Area.

=====
The following question applies to non-residential buildings:
Will the building occupants need to comply with the applicable requirements of Sections 25505, 25533 and 25534 of the Health and Safety Code and the requirements for a permit for construction or modification from the Air Quality Control District? YES \_\_\_ NO

=====
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 for construction that (  does), (  does not) contain asbestos or, that no demolition is authorized by this permit.

Applicant: John Williams Date: 10-23-92

Received By: \_\_\_\_\_

SCHOOL DISTRICT CERTIFICATION OF COMPLIANCE

RETURN TO: Building Inspection Department, County of Sonoma, 575 Administration Dr., Room 114A, Santa Rosa, California 95408

FROM: School District Bellevue Wright Telephone No. \_\_\_\_\_

THIS CERTIFICATION IS VOID IF NOT RETURNED TO THE BUILDING INSPECTION DEPARTMENT WITHIN 30 DAYS AFTER THIS FORM IS SIGNED AND DATED BY THE SCHOOL DISTRICT

BOX #1 [To be completed by developer and verified by Building Department or Department of Planning and Land Use]

EFFECTIVE DATE: \_\_\_\_\_ (Date Plan Check Fee Was Paid) BUILDING PERMIT NO. \_\_\_\_\_

PROPERTY OWNER'S NAME 748 Brittain Lane

PROJECT ADDRESS John Williams

If applicable: Mobilehome Park Name \_\_\_\_\_ Lot/Space Number \_\_\_\_\_

ASSESSOR PARCEL NO. \_\_\_\_\_

PROJECT DESCRIPTION - Include number of dwelling units. If agricultural, state specific use. Also include information regarding whether or not replacement dwelling, building used for religious purposes, private school or owned and occupied by governmental entity.

Building Type (circle one): Residential Commercial/Industrial Mobilehome/Manufactured Home

Remodeling with an increased square footage of 600

Square footage breakdown per residential unit: garage/carport \_\_\_\_\_ residential area\* \_\_\_\_\_

open roofed-over area \_\_\_\_\_

Total No. of residential units 1 Total Square Feet of Eligible Building Area\*: \_\_\_\_\_

I declare under penalty of perjury under the laws of the State of California on behalf of \_\_\_\_\_ (Developer) that the information furnished in Box #1 is accurate and correct to the best of my knowledge.

Developer Signature \_\_\_\_\_

The County of Sonoma Building Department/Department of Planning and Land Use (circle one) on Oct. 23, 1992 has verified the square footage and use information furnished by the above developer.

County of Sonoma Signature C. Niederman

- \* Residential Buildings are building occupancies for single and multiple family dwellings, apartments, condominiums, and residential hotels where the primary purpose is to provide a residence and not a service, such as health care.
- \* Commercial/Industrial Buildings are building occupancies other than residential. Includes those buildings where the primary purpose is to provide a service, such as health care. Also includes senior citizen housing (Civil Code 51.3), residential care facility for elderly (H&S Code 1589.2(j)), multilevel facility for elderly (H&S Code 15432(d)(9)), and adult only mobilehomes (Gov. Code 65995.2(n)).
- \* Eligible Commercial/Industrial Area is all chargeable covered and enclosed space calculated by the building department. Chargeable Covered and Enclosed Space includes all the covered and enclosed space within the perimeter of a commercial or industrial structure but does not include any storage areas incidental to the principal use of the development, garage, parking structure, unenclosed walkway, or utility or disposal area.
- \* Eligible Residential Area means the Assessable Space calculated by the building department which includes all the square footage within the perimeter of a residential structure, but does not include any carport, walkway, overhang, patio, enclosed patio, detached accessory structure, or similar area.

BOX #2 [To be completed by school district] Receipt No. \_\_\_\_\_

SCHOOL DISTRICT CERTIFICATION

School District requirements for the above project have been satisfied pursuant to (circle one):

Gov. Code 53080 Gov. Code 65970 Agreement Existing Not subject to  
(for relocatables) before 1/1/87 fee requirement

This Certification covers only the amount of square footage identified above. Any additional square footage for the project is subject to another certification of compliance.

Total amount of fees collected: \$ 0 at \$ 0 /square foot X 0 square feet.

With regards to mobilehomes/manufactured homes, it is understood that the validity of any certificate of occupancy or Statement of Installation Acceptance issued by the County is conditioned on the concurrent payment of fees set forth above.

AUTHORIZED SCHOOL DISTRICT OFFICIAL Donna D. Slawac Signature 10/26/92 Date

original - Building Inspection Dept.  
1st copy - District  
2nd copy - Developer  
1/80

Business Mgr. Title

**BUILDING PERMIT CHECK LIST  
SONOMA COUNTY BUILDING INSPECTION**

If corrections are needed, check which return procedure is preferred:

NAME: \_\_\_\_\_ PLANCHECK # 271750

Pickup \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Mail to \_\_\_\_\_

Mailing Address: 748 BRITAIN LN  
SANTA ROSA CA 95407

You have submitted plans to this department for review. Clearances designated will be required prior to issuance of your building permit. You are advised to contact these agencies early in your process to prevent unnecessary delays in building permit issuance.

<u>AGENCY OR CLEARANCE REQUIRED</u>	<u>CLEARANCES</u>	
	<u>REQUIRED</u>	<u>RECEIVED</u>
<u>PLANNING</u> .....	CH	CH
<u>BUILDING DEPARTMENT:</u>		
GRADING PERMIT .....	[ ]	[ ]
GEOTECHNICAL REPORT .....	[ ]	[ ]
ELEVATION CERTIFICATE (FLOOD) .....	[ ]	[ ]
ADDITIONAL FEES (PLANCHECK) (VIOLATION) .....	[ ]	[ ]
OWNER BUILDER VERIFICATION .....	CH	CH
WORKER'S COMPENSATION .....	[ ]	[ ]
SCHOOL MITIGATION FEE .....	CH	CH
DEVELOPMENT FEES .....	[ ]	[ ]
ASSESSOR'S FLOOR PLAN (TO SCALE) .....	CH	CH
<u>HEALTH DEPARTMENT:</u>		
SEPTIC .....	CH	[ ]
FOOD HANDLING .....	[ ]	[ ]
<u>PUBLIC WORKS:</u>		
SEWER .....	[ ]	[ ]
ROAD ENCROACHMENT .....	[ ]	[ ]
PARCEL MAP IMPROVEMENT CONDITIONS .....	[ ]	[ ]
<u>SPECIAL DISTRICTS (LIST DISTRICT):</u>		
WATER .....	[ ]	[ ]
SEWER .....	[ ]	[ ]
<u>UTILITY CERTIFICATE:</u>		
SANTA ROSA .....	[ ]	[ ]
<u>SONOMA COUNTY WATER AGENCY:</u>		
DRAINAGE .....	[ ]	[ ]
CREEK SETBACK .....	[ ]	[ ]
FIRE MARSHALL .....	IN/A	[ ]
DEMOLITION PERMIT (ASBESTOS DECLARATION AB2791).....	[ ]	[ ]

NOTE: The PINK COPY is a preliminary determination of required clearances. A complete list will be developed during the plan review process.



BUILDING INSPECTION DEPARTMENT  
COUNTY OF SONOMA

575 ADMINISTRATION DR., ROOM 114 A  
SANTA ROSA, CALIFORNIA 95403  
TELEPHONE 527-3221

THEODORE J. MORRISON  
DIRECTOR OF BUILDING  
INSPECTION SERVICES

CHIEF BUILDING INSPECTOR  
E. TED THORHAUG  
SENIOR CIVIL ENGINEER

Incomplete Submittal Notice

JOHN WILLIAMS  
248 BRITAIN LN  
SANTA ROSA, CA 95407

Re: Owner's Name WILLIAMS Plan Check number 27175-W Date 11.4.92

Plans for the above described project have been previewed for completeness and the items checked below are required before commencement of plan check for this project. Project plan will be on hold until receipt of all requested items. Thereafter plan checking will begin in plan check submittal or resubmittal date sequence whichever is appropriate.

- Plans submitted appear to be preliminary drawings. Submit final documents signed and stamped according to applicable State Law.
- Plans are Incomplete. Submit all drawings indicated on the enclosed Plan Check List, signed and stamped according to applicable State Law.
- Project is not exempt from Architects law for the reason indicated below. Submit documents prepared, signed and stamped by appropriate licensed Architect or Professional Engineer.
  - Structure is nonresidential (not R-3 or M).
  - Structure is a three story (or more) dwelling or accessory building.
  - Structure is a metal, concrete or masonry residential or accessory building.
  - Structure is a multi-dwelling project of more than 4 dwelling units on a single parcel or lot.
- Structural design for non-conventional portions of the project is missing. Submit drawings and calculations for all non-conventional portions of this project stamped and signed by licensed personnel according to applicable State law.
- Project soils or geotechnical report is missing. Submit requested report(s) along with plans revised to incorporate all report recommendations into project design.
- STILL MISSING  
Energy Conservation documentation is missing. Submit complete energy calculations and plans revised to include all energy conservation features assumed in the energy calculations.
- Project does not qualify for Rapid Check for one or more of the following reasons. Follow the instructions below to use the Rapid Check system, otherwise your project will be plan checked by our standard procedure.
  - Rapid Check Category I. Project is not a single story conventional wood framed residence or accessory structure. If you still want a Rapid plan check follow the instructions for Rapid Check Category II
  - Rapid Check Category II. Structural Peer Review Letter is missing. If you want your project to be expedited under the Peer Review System obtain a structural peer review letter according to the attached Instructions.
- Project plans do not comply with Flood Plain Management Regulations. Submit revised drawings according to the attached Instructions.

SEE ENCLOSED ENERGY CALC FORM

If you have any questions, please contact one of our plan check staff at the counter or by phone after 1:30 PM Monday through Friday.

Please Return This Form With Your Resubmitted Documents.

748 Brittain Lane, Santa Rosa

Williams, Art

P-1892

2/16/62

P-17142 sewer only

5/1/70

S-13207 new system

5/1/70

B-28429 E-service

11/15/77

VALID BY REVIEW AND INSPECTION AFTER EXPIRATION.

MAR

1977

VALID BY REVIEW AND INSPECTION AFTER EXPIRATION.

# SONOMA COUNTY

# BUILDING INSPECTION DEPARTMENT

875 ADMINISTRATION DRIVE, RM 114A

SANTA ROSA, CALIFORNIA 95407-2884

TELEPHONE (707) 527-2221

PLAN CHECK  
APPLICATION  
NUMBER

27175-W

## PLAN CHECK APPLICATION ONLY — NOT A PERMIT

APPLICANT: ENTER DATA IN AREA OUTLINED BY HEAVY RULE.

OWNER	NAME <u>John Williams</u>		OWNER PHONE # <u>578-5490</u>		
	CURRENT MAILING ADDRESS <u>748 BRITAIN LN</u>		CONTACT PERSON PHONE #		
PROJECT	CITY <u>SANTA ROSA, CA</u>		ZIP CODE <u>95407</u>		
	ADDRESS <u>748 BRITAIN LN</u>				
	CITY <u>SANTA ROSA, CA</u>		ZIP CODE <u>95407</u>		
	SUBDIVISION NAME		UNIT NO.	LOT	BLOCK
	ASSESSOR'S PARCEL NO. <u>035-251-33-9</u>				
NEAREST CROSS STREET <u>SEBASTAPOL</u>					

DESCRIBE WORK PROPOSED:

addition to existing SPA  
(bathroom)  
and pergola

SPECIFY # OF BEDROOMS

NEW	ADDITION	ALTERATION	REPAIR	MOVING	OCC. CHG.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
USE	FLOOR AREA IN SQUARE FEET	VALUATION PER SQUARE FOOT	VALU. CH.	PLAN CHECK FEE	
DWELLING	100	72.90	4.274		
GARAGE DET	<input type="checkbox"/>				
CARPORT ATT	<input type="checkbox"/>				
DECK	<input type="checkbox"/>				
AWNING	<input type="checkbox"/>				
HOURLY RATE FEE	HOURS	RATE	TOTAL ▶ 4374		

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

APPLICANT SHALL READ AND BE FAMILIAR WITH THE INSTRUCTIONS ATTACHED TO THE BUILDING PERMIT FORM BEFORE SIGNING THE PLAN CHECK APPLICATION.

THIS APPLICATION SHALL EXPIRE BY LIMIT 11:30P IF BUILDING PERMIT IS NOT ISSUED WITHIN 180 DAYS OF THE ISSUANCE OF THIS PLAN CHECK APPLICATION. I UNDERSTAND THAT NO REFUND OF PLAN CHECK FEES MAY OCCUR FOLLOWING COMMENCEMENT OF PLAN CHECK. REFER TO PLAN CHECK APPLICATION NUMBER WHEN MAKING INQUIRIES OF JOB STATUS.

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 regarding building construction.

APPLICANT NAME (PRINT) John Williams  
ADDRESS 748 BRITAIN LN  
CITY SANTA ROSA STATE CA ZIP 95407

*John Williams*  
SIGNATURE OF APPLICANT

TYPE OF CONSTRUCTION	OCCUPANCY
----------------------	-----------

COPY TO FIRE DEPT.  
YES  NO

FEES - Per Chapter 7, et. seq. Sonoma County Code	
<input checked="" type="checkbox"/> PLAN CHECK	40.30
<input checked="" type="checkbox"/> SITE REVIEW	35.00
<input type="checkbox"/> FIRE SERVICE	N/A
<b>TOTAL \$</b>	<b>75.30</b>

013962 10/23/92C01	
PERMIT	0027175
PLANCK	\$40.30
STESUV	\$35.00
***TTL	\$75.30
CHECK	\$75.30
CHNG	\$0.00

REC'D BY	DATE RECEIVED	INSPECTION AREA
<i>Cl</i>	10-23-92	3



**COUNTY OF SONOMA  
PUBLIC HEALTH DEPARTMENT**

1030 Center Drive, Suite A - Santa Rosa, CA 95403

MARK A. KOSTIENEY  
Director  
GEORGE R. FLORES, M.D.  
Health Officer

**CONDITIONAL  
PRIVATE SEWAGE DISPOSAL PERMIT (Clearance)**

REVIEW AND UNDERSTAND CONDITIONS PRIOR TO CONSTRUCTION

Name: John & Anne Williams  
Address: 740 Brittain Lane (3)  
City: Santa Rosa, CA  
Permit. no.: 93-3365

**CONDITION(S):**

The existing septic system was designed for a 2-bedroom residence only. The house therefore is limited to 4 occupants. Approval of this clearance does not imply approval of any previous or future additions of bedrooms.

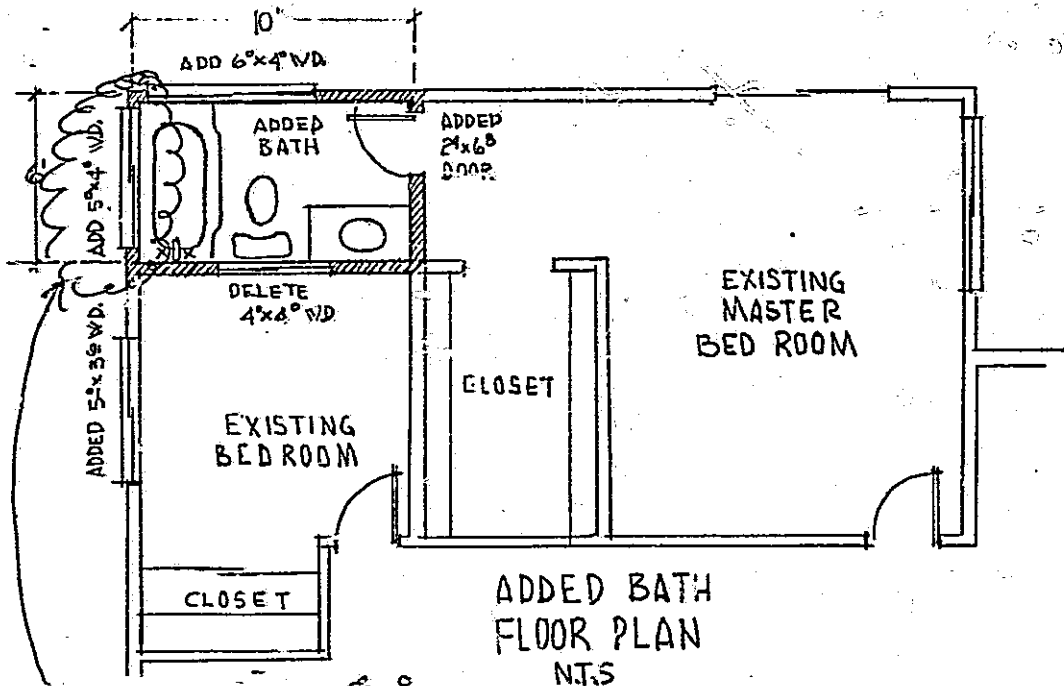
Condition(s) Accepted by: John Williams

Date: 3-18-93

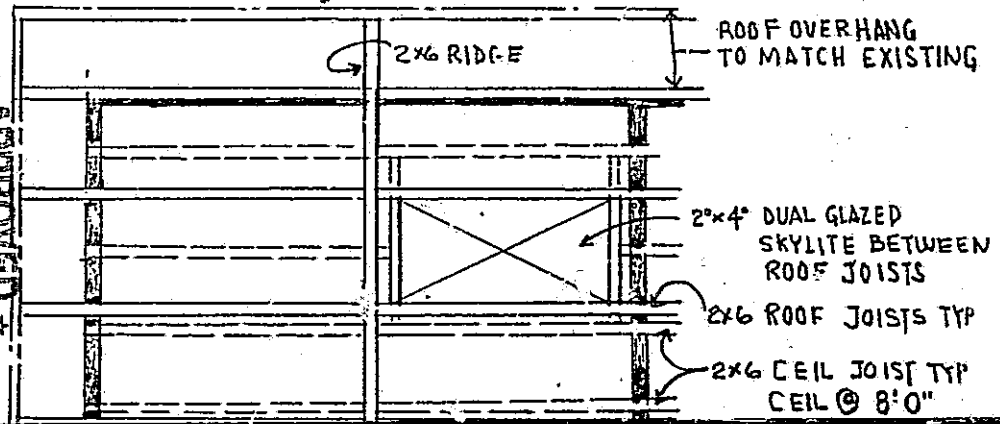
03091 (Rev. 5/89)

*PC 2/25*  
BP 117864  
V 099222

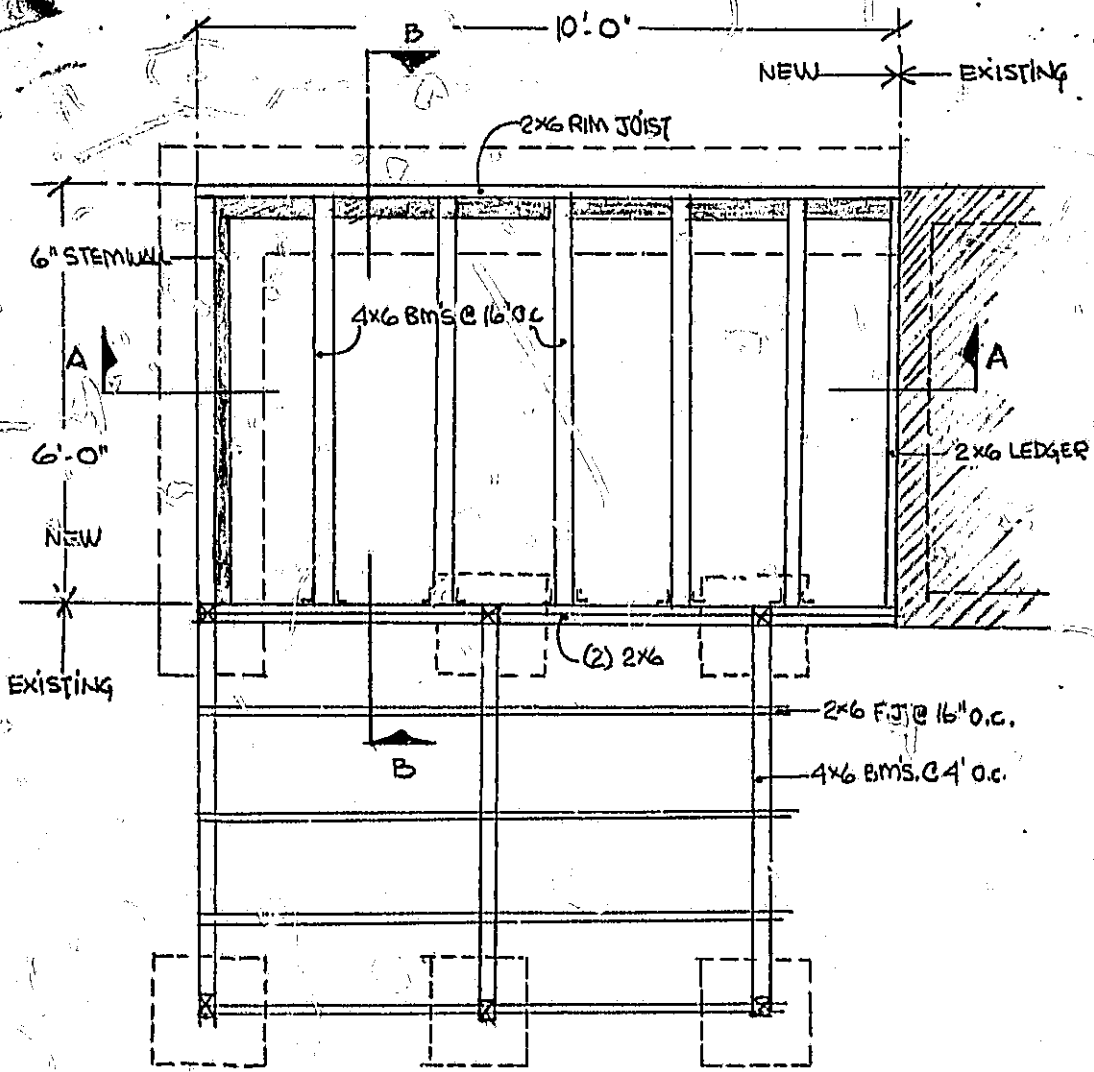




Exclude window 5' x 4'  
 Due to Energy Calc. 12-18-97



Sonoma County  
 Building Inspection Dept.  
 JAN 5 1993  
 \* APPROVED \*



FOUNDATION PLAN

SCALE 1/2" = 1'0"

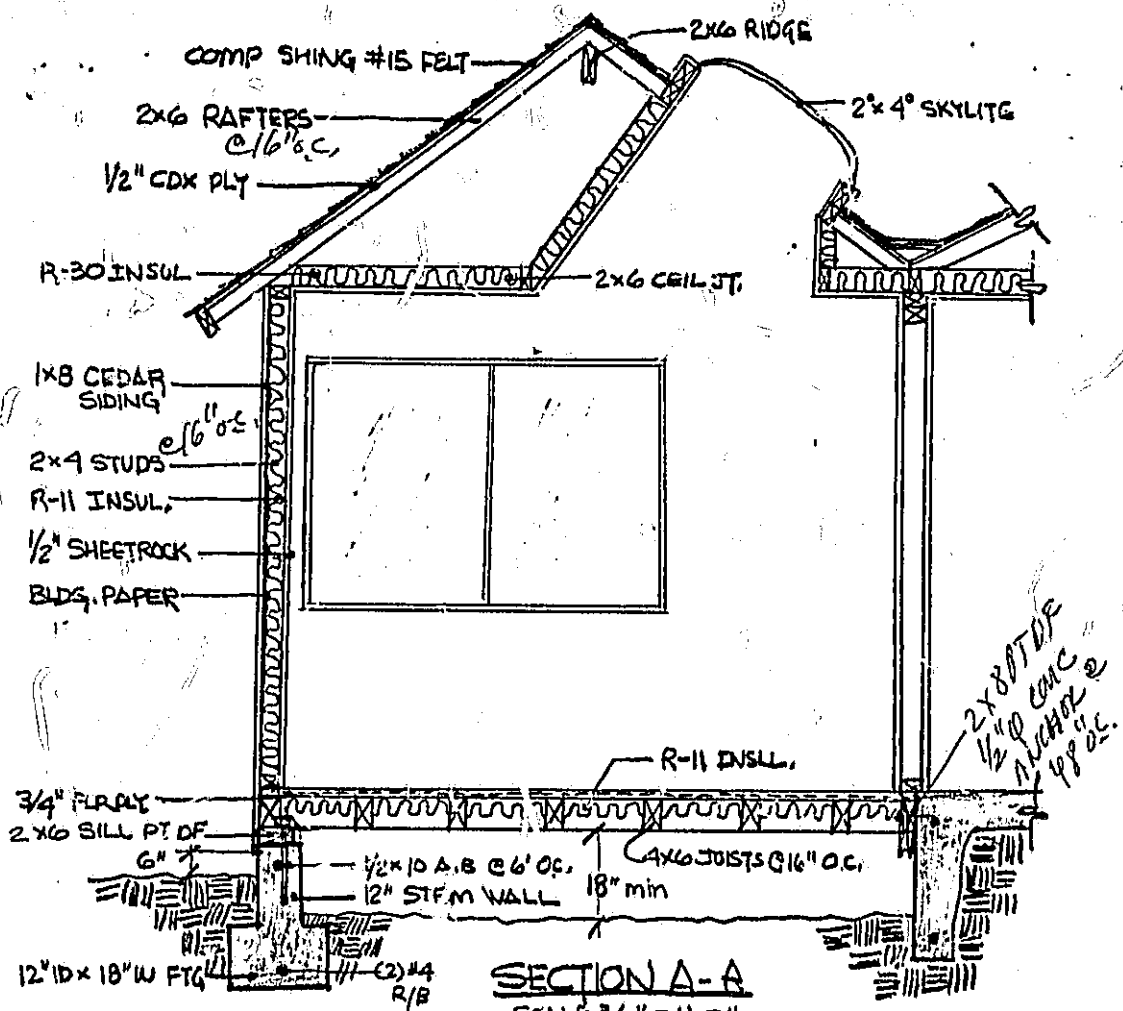
★ APPROVED ★

JAN 5 1993

Santa Clara County  
Building Inspection Dept.

Nov. 24. 1992  
AA WEIGEL

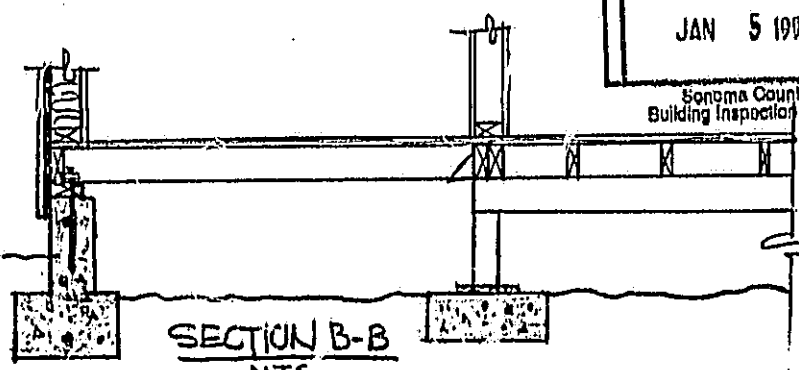
JOHN + ANN WILLIAMS RES.



★ APPROVED ★

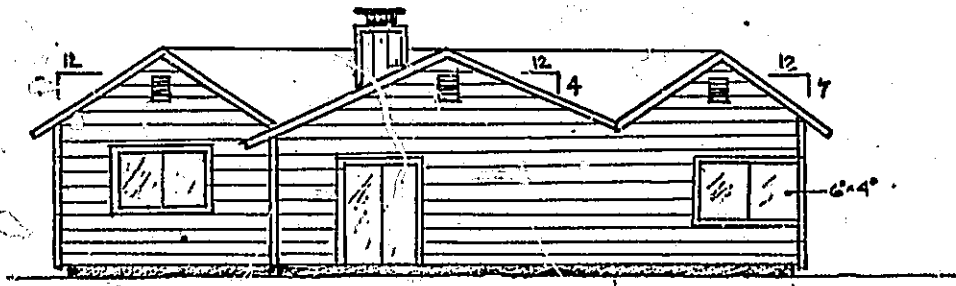
JAN 5 1993

Sonoma County Building Inspector Dept.

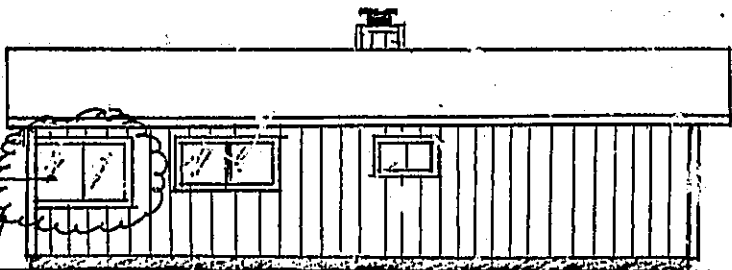


NOV 24 1992  
A.A. WEIGEL

JOHN FANN WILLIAMS RE.



EAST ELEVATION  
SCALE  $\frac{1}{8}'' = 1'-0''$



NORTH ELEVATION  
SCALE  $\frac{1}{8}'' = 1'-0''$

★ APPROVED ★  
JAN 5 1993

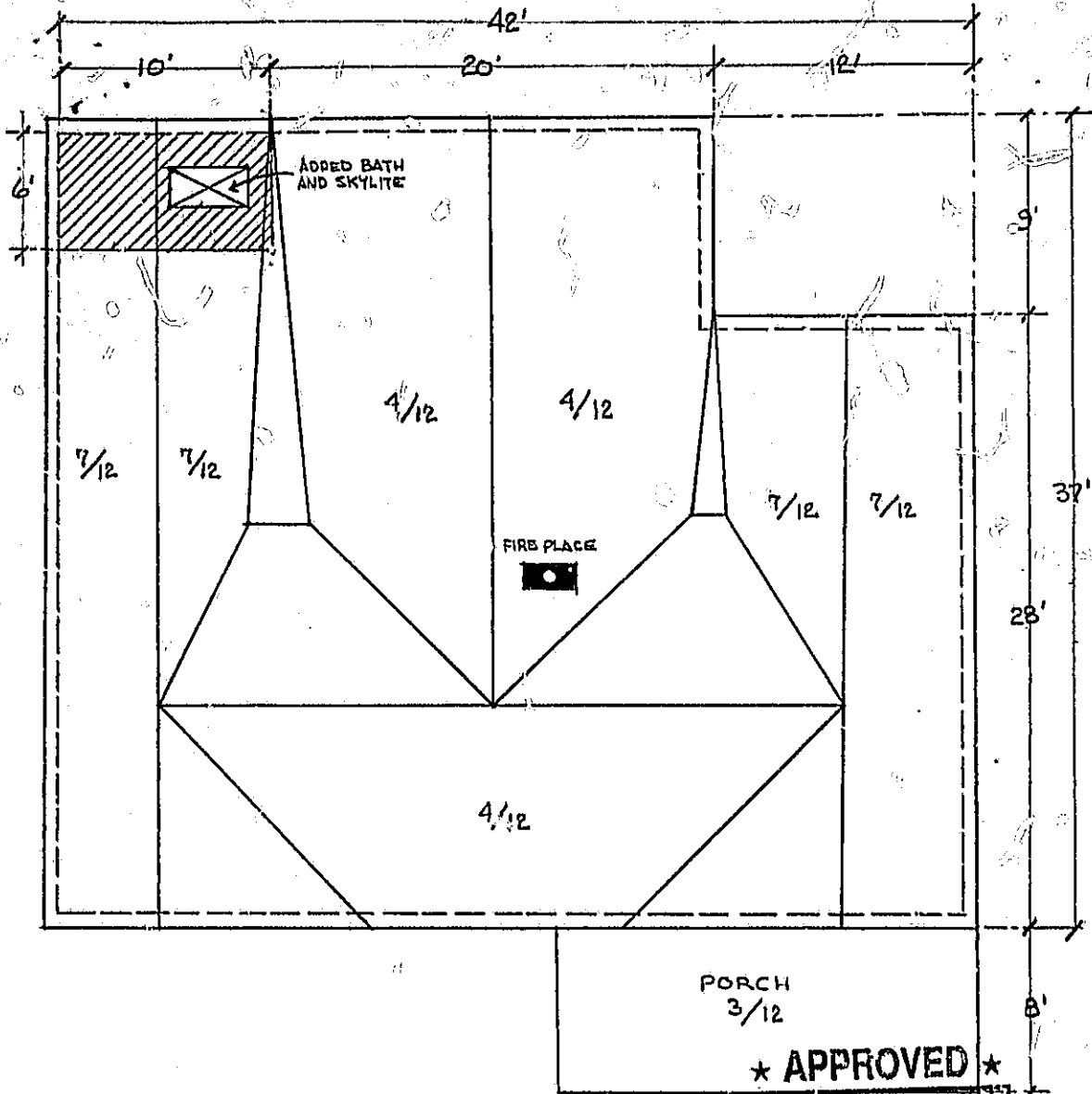
Sonoma County  
Building Inspection Dept.

REVISION:

DUE TO ENERGY CALCULATIONS THIS WINDOW  
HAS TO BE EXCLUDED FROM PLANS. 5'-4"

NOV 24, 1992  
AD WEIGEL

JOHN & ANN WILLIAMS RES.



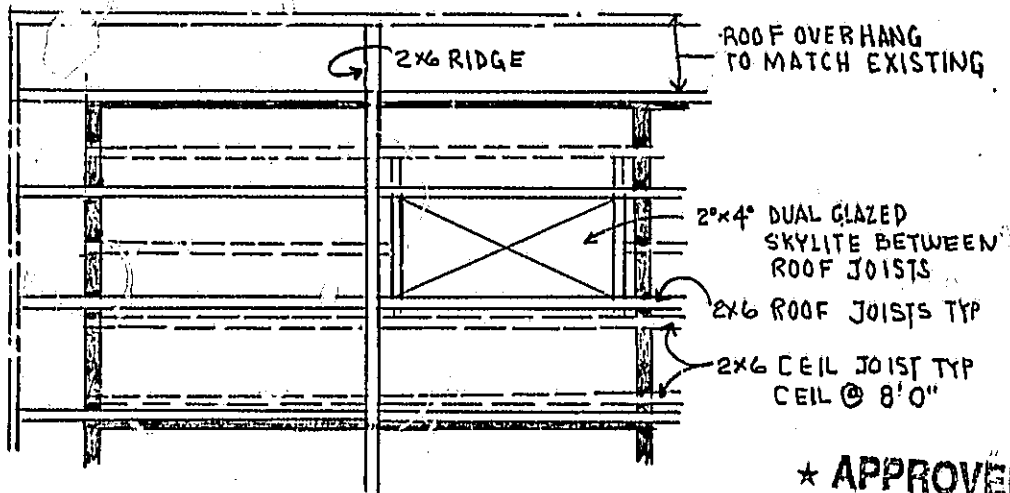
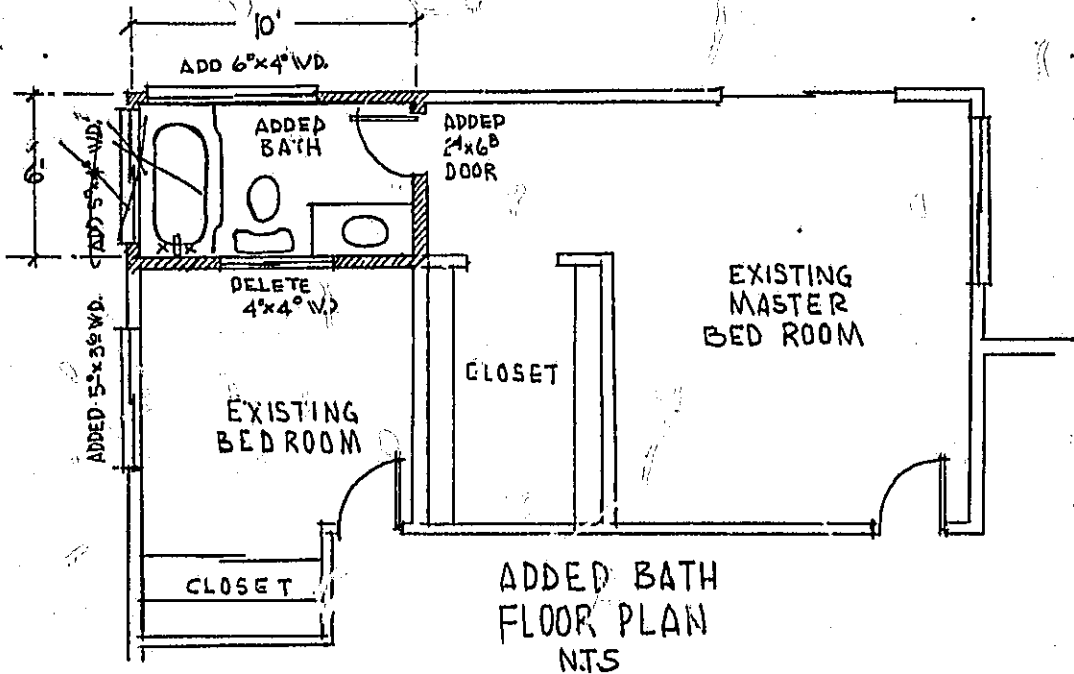
ROOF PLAN  
N.T.S.

JAN 5 1993

Santa Rosa County  
Building Inspection Dept.

RESIDENCE 707-578-5490  
JOHN & ANN WILLIAMS  
748 BRITAIN LANE  
SANTA ROSA CA 95407

OCT 14. 1992  
A.A. WEIGEL



FRAME PLAN  
ROOF RAFTERS AND CEILING JOISTS  
NEW BATHROOM  
N.T.S.

★ APPROVED ★  
JAN 5 1993

Sanoma County  
Building Inspection Dept.

OCT. 14. 1992  
AA WEIGEL

JOHN + ANN WILLIAMS RES.

BATHROOM ADDITION

11-10-92

Project Title \_\_\_\_\_  
 Project Address BRITTON LANE SANTA ROSA  
DWAYNE J. HAWK (707) 894-5638  
 Documentation Author \_\_\_\_\_ Telephone \_\_\_\_\_  
PRESCRIPTIVE PACKAGE TABLE 7-1 2  
 Compliance Method (Package, Point System or Computer) \_\_\_\_\_ Climate Zone \_\_\_\_\_

Date \_\_\_\_\_  
 Building Permit # \_\_\_\_\_  
 Plan Check / Date \_\_\_\_\_  
 Field Check / Date \_\_\_\_\_  
 Enforcement Agency Use Only \_\_\_\_\_

**GENERAL INFORMATION**

Total Conditioned Floor Area: 60 ft<sup>2</sup>  
 Building Type: \_\_\_\_\_ Single Family  Addition  
 (check one or more) \_\_\_\_\_ Multi-Family  Existing-Plus-Addition  
 Front Orientation: \_\_\_\_\_ North / East / South / West / All Orientations  
 (Input orientation in degrees and circle one.)  
 Number of Dwelling Units: R.F.  
 Floor Construction Type: Slab / Glazed Floor (circle one or both)

**BUILDING SHELL INSULATION**

Component Type	Insulation R-Value	Construction Assembly U-Value	Location/Comments (attic, to garage, typical, etc.)
Wall.....	<u>R-13</u>	_____	<u>BTWN. STUDS</u>
Wall.....	_____	_____	_____
Roof.....	<u>R-19</u>	_____	<u>ATTIC</u>
Roof.....	_____	_____	_____
Floor.....	<u>R-19</u>	_____	<u>BTWN. JOISTS</u>
Floor.....	_____	_____	_____
Slab Edge ....	<u>N.A.</u>	_____	<u>N.A.</u>

**FENESTRATION**

**Shading Devices**

Fenestration Orientation	Area (sf)	Fenestration U-Value	Interior (roller blind, etc.)	Exterior (shadescreen, etc.)	Overhang (yes/no)	Framing Type (metal/wood/vinyl)
Front..... ( )	_____	_____	_____	_____	_____	_____
Front..... ( )	_____	_____	_____	_____	_____	_____
Left..... ( )	_____	_____	_____	_____	_____	_____
Left..... ( )	_____	_____	_____	_____	_____	_____
Rear..... ( )	_____	_____	_____	_____	_____	_____
Rear..... ( )	_____	_____	_____	_____	_____	_____
Right..... (E)	<u>24</u>	<u>U-7.5 (DBL)</u>	<u>ROLLER BLIND</u>	_____	<u>YES</u>	<u>METAL</u>
Right..... (E)	_____	_____	_____	_____	_____	_____
Skylight.....	<u>6</u>	<u>U-7.5 (DBL)</u>	<u>ROLLER BLIND</u>	_____	_____	_____
Skylight.....	_____	_____	_____	_____	_____	_____

**THERMAL MASS**

Type/Covering (slab/exposed, tile, etc.)	Area (sf)	Thickness (Inches)	Location/Description (kitchen, bath, etc.)
<u>N.A.</u>	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

BATH ROOM ADDITION

11-10-92

Project Title

Date

**HVAC SYSTEMS**

Note: Input hydronic or combined hydronic data under Water Heating Systems, except Design Heating Load.

Heating Equipment Type (furnace, heat pump, etc.)	Minimum Efficiency (AFUE/HSPF)	Distribution Type and Location (ducts/attic, etc.)	Duct or Piping R-Value	Thermostat Type
---	--------------------------------	--	------------------------	-----------------

EXISTING

Cooling Equipment Type (air conditioner, heat pump, evaporator cooling)	Minimum Efficiency (SEER)	Duct Location (attic, etc.)	Duct R-Value	Thermostat Type	Configuration (split or package)
---	---------------------------	-----------------------------	--------------	-----------------	----------------------------------

**WATER HEATING SYSTEMS**

NO INCREASE

Water Heater Type	Distribution Type	Number in System	Rated <sup>1</sup> Input (kW or Btu/hr)	Tank Capacity (gallons)	Energy <sup>1</sup> Factor or Recovery Efficiency	Standby <sup>1</sup> Loss (%)	External Tank Insulation R-Value
-------------------	-------------------	------------------	---	-------------------------	---	-------------------------------	----------------------------------

GAS      STD.      ONE      72

1. For small gas storage (rated input ≤ 75,000 Btu/hr), electric resistance and heat pump water heaters, list Energy Factor. For large gas storage water heaters (rated input ≥ 75,000 Btu/hr), list Rated Input, Recovery Efficiency and Standby Loss. For instantaneous gas water heaters, list Rated Input and Recovery Efficiency.

**SPECIAL FEATURES/REMARKS (Add extra sheets if necessary)**

**COMPLIANCE STATEMENT**

This certificate of compliance lists the building features and performance specifications needed to comply with Title 24, Parts 1 and 6, of the California Code of Regulations, and the administrative regulations to implement them. This certificate has been signed by the individual with overall design responsibility. When this certificate of compliance is submitted for a single building plan to be built in multiple orientations, any shading feature that is varied is indicated in the Special Features/Remarks section.

**Designer or Owner (per Business & Professions Code)**

Name: \_\_\_\_\_  
 Title/Firm: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Lic. #: \_\_\_\_\_

**Documentation Author**

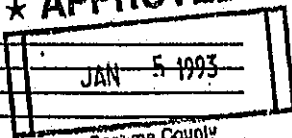
Name: DWAYNE J. HAWK  
 Title/Firm: HAWK'S DRAFTING  
 Address: 220 N. CLOVERDALE BLVD  
CLOVERDALE, CA. 95425  
 Telephone: (707) 894-5638

(signature) \_\_\_\_\_ (date) \_\_\_\_\_

Dwayne J. Hawk      11-10-92  
 (signature) \_\_\_\_\_ (date) \_\_\_\_\_

**Enforcement Agency ★ APPROVED ★**

Name: \_\_\_\_\_  
 Title: \_\_\_\_\_  
 Agency: \_\_\_\_\_  
 Telephone: \_\_\_\_\_



(signature/stamp) \_\_\_\_\_

# Mandatory Measures Checklist: Residential

MF-1R

**NOTE:** Lowrise residential buildings subject to the Standards must contain these measures regardless of the compliance approach used. Items marked with an asterisk (\*) may be superseded by more stringent compliance requirements listed on the Certificate of Compliance. When this checklist is incorporated into the permit documents, the features noted shall be considered by all parties as binding minimum component performance specifications for the mandatory measures whether they are shown elsewhere in the documents or on this checklist only.

DESCRIPTION	DESIGNER	ENFORCEMENT
<b>Building Envelope Measures</b>		
* §150(a): Minimum R-19 ceiling insulation.	DAH	
§150(b): Loose fill insulation manufacturer's labeled R-Value.		
* §150(c): Minimum R-13 wall insulation in framed walls (does not apply to exterior mass walls).	DAH	
* §150(d): Minimum R-13 raised floor insulation in framed floors; minimum R-8 in concrete raised floors.	DAH	
§150(i): Slab edge insulation - water absorption rate no greater than 0.3%, water vapor transmission rate no greater than 2.0 perm/inch.	—	
§118: Insulation specified or installed meets California Energy Commission quality standards. Indicate type and form.	DAH	
§116-17: Fenestration Products, Exterior Doors and Infiltration/Exfiltration Controls		
a. Doors and windows between conditioned and unconditioned spaces designed to limit air leakage.		
b. Manufactured fenestration products have label with certified U-value, and infiltration certification.	DAH	
c. Exterior doors and windows weatherstripped; all joints and penetrations caulked and sealed.		
§150(g): Vapor barriers mandatory in Climate Zones 14 and 16 only.	—	
§150(f): Special infiltration barrier installed to comply with §151 meets Commission quality standards.	—	
§150(e): Installation of Fireplaces, Decorative Gas Appliances and Gas Logs		
1. Masonry and factory-built fireplaces have:		
a. Closeable metal or glass door		
b. Outside air intake with damper and control		
c. Flue damper and control		
2. No continuous burning gas pilots allowed.	—	
<b>Space Conditioning, Water Heating and Plumbing System Measures</b>		
§110-13: HVAC equipment, water heaters, showerheads and faucets certified by the Commission.	DAH	
§150(l): Setback thermostat on all applicable heating systems.	EXIST.	
§150(j): Pipe and Tank Insulation		
1. Indirect hot water tanks (e.g., unfired storage tanks or backup solar hot water tanks) have insulation blanket (R-12 or greater) or combined interior/exterior insulation (R-16 or greater).		
2. First 5 feet of pipes closest to water heater tank, non-recirculating systems, insulated (R-4 or greater).		
3. All buried or exposed piping insulated in recirculating sections of hot water system.		
4. Cooling system piping below 35°F insulated.		
5. Piping insulated between heating source and indirect hot water tank.	EXIST.	
* §150(m): Ducts and Fans		
1. Ducts constructed, installed and sealed to comply with UMC Sections 1002 and 1004; ducts insulated to a minimum installed value of R-4.2 or ducts enclosed entirely within conditioned space.		
2. Exhaust fan systems have backdraft or automatic dampers	EXIST.	
3. Gravity ventilating systems serving conditioned space have either automatic or readily accessible, manually operated dampers.	DAH	
§114: Pool and Spa Heating Systems and Equipment		
1. System is certified with 78% thermal efficiency, on-off switch, weatherproof operating instructions, no electric resistance heating and no pilot light.	—	
2. System is installed with:		
a. At least 36" pipe between filter and heater for future solar heating.		
b. Cover for outdoor pools or outdoor spa.		
3. Pool system has directional inlets and a circulation pump time switch.	—	
§115: Gas-fired central furnace, pool heater, spa heater or household cooking appliance have no continuously burning pilot light. (Exception: Non-electrical cooking appliance with pilot < 150 Btu/hr.)	—	
<b>Lighting Measures</b>		
§150(k): 40 lumens/watt or greater for general lighting in kitchens and rooms with water closets; and recessed ceiling fixtures (C insulation cover) approved.	DAH	

SONOMA COUNTY BUILDING INSPECTION DEPARTMENT  
VIOLATION INVESTIGATION REPORT

\* File #: V - 0992-22-B  
\*  
\* Previous #: V - \_\_\_\_\_  
\*  
\* Inspection Area: \_\_\_\_\_  
\* \* \* \* \*

9-10-92  
Date Received

B.B.  
Initials

1. PROPERTY ADDRESS ? 748 Brittain Ln.  
City UNSR Assessor's Parcel #: 035 - 251 - 33  
Owner Name \_\_\_\_\_ Owner Phone # \_\_\_\_\_  
Owner Mailing Address \_\_\_\_\_

2. WHAT IS THE NATURE OF THE VIOLATION ?  
[ ] Hazardous Conditions (specify) \_\_\_\_\_  
[ ] Substandard Conditions (specify) \_\_\_\_\_  
 Construction Without Permit(s) [ ] Grading/Fill Without Permit(s)  
[ ] Other (specify) \_\_\_\_\_

3. WHAT IS THE USE OF THE STRUCTURE ?  
[ ] Residential: ( ) Single ( ) Duplex ( ) Apartment  
Specify: \_\_\_\_\_  
[ ] Agricultural or Accessory: ( ) Garage/Workshop ( ) Carport ( ) Storage  
( ) Barn ( ) Chicken coop ( ) Retaining wall ( ) Other \_\_\_\_\_  
[ ] Commercial: \_\_\_\_\_  
[ ] Industrial: \_\_\_\_\_

4. WHAT KIND OF WORK IS BEING/HAS BEEN DONE ?  
[ ] Addition: \_\_\_\_\_ [ ] New Detached Structure: \_\_\_\_\_  
[ ] Conversion/Change of Occupancy from \_\_\_\_\_ to \_\_\_\_\_  
 Other Re Roof / Remodel

5. ATTACH CURRENT PERMIT HISTORY AND ASSESSOR'S SCREEN TO THIS FORM

\*\*\*\*\*  
INVESTIGATION ASSIGNMENT: \* PROPERTY REPORT:  
\*\*\*\*\*

[ ] Abatement [ ] Field Staff \* [ ] Required [ ] Not Required  
Investigation Date: 9-10-92 By: B. Bano  
Complainant Name \_\_\_\_\_ Phone # \_\_\_\_\_  
Date Violation Closed: \_\_\_\_\_ Permit # \_\_\_\_\_  
(Invest.doc 11/91) (database record #: )

Remodel area, Re Roof w/o Permits.

KED-A  
AFN



October 21, 1992

BUILDING INSPECTION DEPARTMENT  
COUNTY OF SONOMA

575 ADMINISTRATION DR., ROOM 114 A  
SANTA ROSA, CALIFORNIA 95403  
TELEPHONE 527-2221

THEODORE J. MORRISON  
DIRECTOR OF BUILDING  
INSPECTION SERVICES

CHIEF BUILDING INSPECTOR  
E. TED THORHAUG  
SENIOR CIVIL ENGINEER

John & Anna Williams  
748 Brittain Lane  
Santa Rosa CA 95401

RE: CONSTRUCTION WITHOUT PERMIT AT 748 Brittain Lane  
AP# 035-251-33-9

Dear Mr. & Mrs. Williams:

On September 10, 1992, a visit was made at the above address for work being performed without permits and inspection.

The work that was observed is, briefly described as: reroof and remodel without permit.

In checking our files we still find no record of permits having been issued. Please obtain permit(s) prior to the recommencement of your project. Permit(s) are required to verify code conformance and must be obtained within 30 days of this notice.

Please be advised that if you fail to comply, it leaves us no alternative but to commence abatement proceedings necessary to force compliance with applicable codes.

We regret having to take such action.

Respectfully,

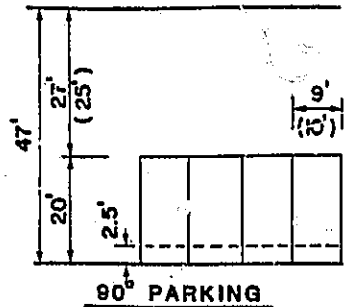
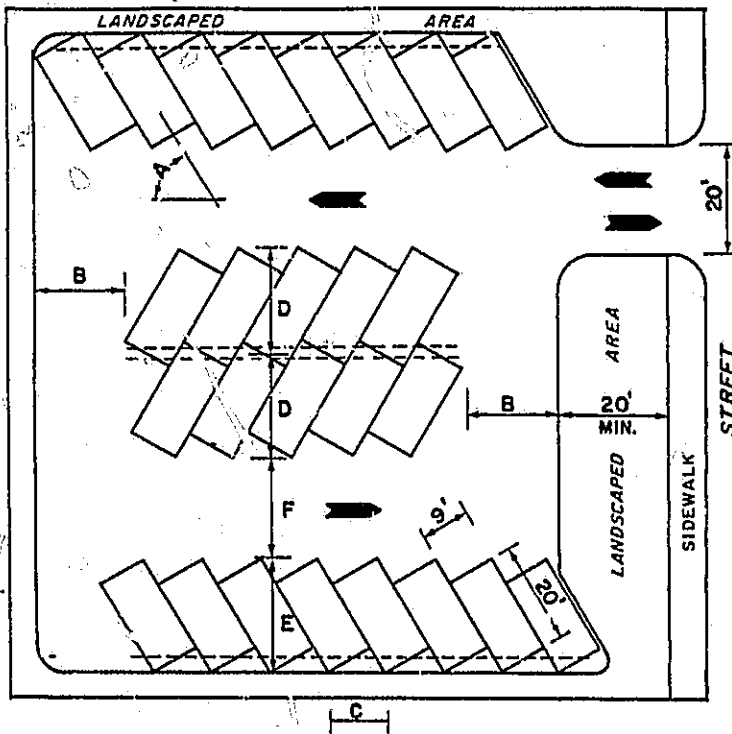
Gerald L. Sheckell  
Abatement Officer

GLS:dp

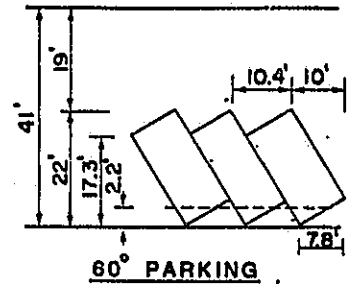
cc: Assessor  
Environmental Health  
Planning, Zoning Enforcement  
file V 0992-22

# OFF-STREET PARKING DESIGN STANDARDS

## SONOMA COUNTY DEPARTMENT of PLANNING

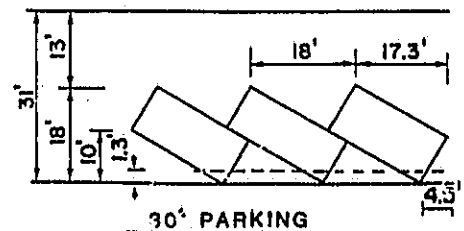
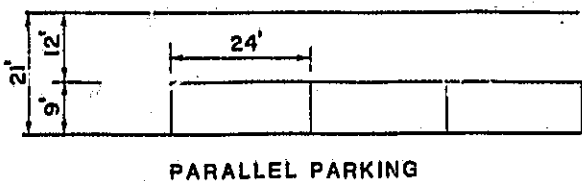
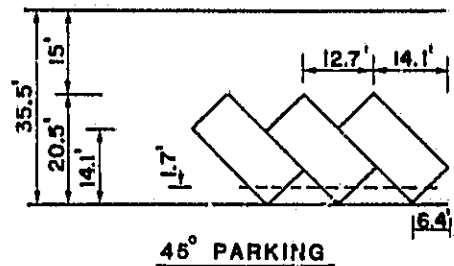


Note: ALTERNATE DIMENSIONS ( ), FOR RESIDENTIAL USE OR WHERE DESIRED.



DIMENSION TABLE				
PARKING ANGLE	A	30°	45°	60° 90°
TURNAROUND	B		17'	4' 14'
CURB LENGTH	C	18'	12.7'	10.4' 9'
STALL DEPTH	D	16.5'	18.8'	19.6' 20'
STALL DEPTH	E	17.8'	20.5'	21.8' 20'
DRIVEWAY	F	13'	15'	19' 27'

Note: PARKING STALLS SHALL BE 9' x 20'  
 COMPACT STALLS SHALL BE 6' x 16'  
 HANDICAP STALLS SHALL BE 12' x 20'  
 LOADING STALLS SHALL BE 12' x 40' x 14'



# SAMPLE SITE PLAN

Horizontal layout please  
North faces top of page

HWY. 6

