

B

Type

Docs

Plans

BLD03-3815

Building Permit Number

2531

Street Number

CORBY AVE

Street Name

ROS

Community Code

~~XXXXXX~~

APN



**COUNTY OF SONOMA**  
**PERMIT AND RESOURCE MANAGEMENT DEPARTMENT**

2550 Ventura Avenue, Santa Rosa, CA 95403  
 (707) 565-1900 FAX (707) 565-1103

**Application Fees / Invoice for Building Permit: BLD03-3815**

**Project Address:** 2501 CORBY AVE ROS  
**Cross Street:** HEARN AVE

**Status:** STARTED  
**Printed:** July 10, 2003  
**Initialized by:** CNIEDERM  
**Activity Type:** A-BLD 301

**APN:** 043-053-037

**Description:** DRY ROT AND TERMITE REPAIR

**Res/Com:** R **Insp Area:** 10  
**Std/Quick:** ?? **Site Review File #:** ??  
**Fire District:** ROSELAND FIRE GENERAL (S.R.) **Site Review Fees Paid:** \$0.00

**Owner:** BAUM BARRY H & LU ANN A  
 21 WINTER BROOK LN  
 SANTA ROSA CA 95404  
 707 528 0377

**Applicant:** GO CONSTRUCTION  
 5719 DONLAN DR  
 ROHNERT PARK CA  
 94928  
 415 328 6373

**Valuation:**

Occupancy	Type	Factor	Sq Feet	Valuation
	Additional Amount...			7,500.00
	Totals...			\$7,500.00*

**Fees:**

Item#	Description	Account Code	Tot Fee	Prev. Pmts	Cur. Pmts
50	S.M.I.P. RESIDENTIAL	327023-4040	.75	.00	.00
132	BUILDING PERMIT FEE	025015-1341	198.78	.00	.00
735	NPDES - BUILDING	025015-1341	19.88	.00	.00
			<b>\$219.41</b>	<b>\$0.00</b>	

**Total Fees:** \$219.41  
**Total Paid:** \$0.00

**Balance Due:** \$219.41

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:

Date  
Applied:

**INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT**

SITE LOCATION INFORMATION - PRINT CLEARLY											
Site Address: <u>2531 2533 2535 CORBY AVE.</u>	City: <u>SANTA ROSA</u>	ZIP:									
Cross Street: <u>Heann Ave (across DMU)</u>	APN: <u>043-053-039</u>	Project Phone #: <u>415 328 6373</u>	Project Fax #: ( )								
Directions:	Subd. Name:	Unit #	Lot #								
Describe Project: <u>Dry Rot &amp; Permit Repairs</u>	Living Area: _____	Contract Price: <u>\$7,500</u>									
Garage: _____											
Decks: _____											
OWNER NAME AND ADDRESS		APPLICANT NAME AND ADDRESS									
Name: <u>Barry Baum</u>	Name: <u>Gary Otinger - Go Construction</u>										
Mailing Address: <u>2900 Mendocino Ave</u>	Mailing Address: <u>Same as contract</u>										
City: <u>SANTA ROSA</u> State: <u>CA</u> ZIP: _____	City: _____ State: _____ ZIP: _____										
Day Ph: <u>(707) 528 0377</u>	Day Ph: ( ) Fax: ( )										
CONTRACTOR INFORMATION		OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)									
Company Name: <u>GO CONSTRUCTION</u>	Name: _____										
Address: <u>5719 DORIAN DR</u>	Address: _____										
City: <u>ROBERT PARK</u> State: <u>EA</u> ZIP: <u>94928</u>	City: _____ State: _____ ZIP: _____										
Day Ph: <u>415 328-6373</u> Fax: (707) <u>588-9170</u>	Day Ph: ( ) Fax: ( )										
<b>WORKER'S COMPENSATION DECLARATION</b>		<b>CONSTRUCTION LENDING DECLARATION</b>									
<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 checked="" 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: <u>STATE WORKERS COMP FUND</u></p> <p>Policy No: <u>167 4803-02-14504</u></p> <p>(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: <u>4/3/04</u> Applicant: <u>[Signature]</u></p> <p><b>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 3700 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.</b></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: _____</p> <p>Lenders Address: _____</p>									
<b>OWNER-BUILDER DECLARATION</b>		<b>FOR DEPARTMENT USE</b>									
<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 7050) 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 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.)</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 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.)</p> <p><input type="checkbox"/> I am exempt under Sec. _____, B &amp; 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> <p>Sewer Connection: <input type="checkbox"/> Available <input type="checkbox"/> Fees Paid</p> <p>Approved by: _____ Date: _____</p> <p>Road Encroachment: <input type="checkbox"/> Fees Paid</p> <p>Approved by: _____ Date: _____</p> <p>Septic System Permit/Clearance # _____</p> <p>Approved by: _____ Date: _____</p> <p>Flood Zone: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 100 Year Flood Elevation: _____</p> <p>Site Review _____</p> <p>Code Enforcement Violation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Violation # <u>files closed</u></p> <p>This permit is limited to _____ days.</p>									
<b>LICENSED CONTRACTOR'S DECLARATION</b>		<b>EXPIRED</b>									
<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>RI</u> Lic. No. <u>377906</u></p> <p>Exp. Date: <u>5-31-03</u> Contractor: <u>[Signature]</u></p>		<p>Work Authorized: _____</p> <p>Date: _____</p> <p><input type="checkbox"/> New <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Moving <input type="checkbox"/> Occ/Chg</p>									
<b>ASBESTOS DECLARATION</b>		<b>THIS PERMIT SHALL EXPIRE IN THREE(3) YEARS FROM DATE FEES PAID UNLESS OTHERWISE NOTED BY CODE ENFORCEMENT</b>									
<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 could 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.</p> <p>PERMITTEE'S SIGNATURE: <u>[Signature]</u></p> <p>ADDRESS: <u>5719 Dorian Dr Robert Park 94928</u> CITY: _____ ZIP: _____</p> <p><input checked="" type="checkbox"/> Contractor <input type="checkbox"/> Owner <input type="checkbox"/> Agent for Contractor <input type="checkbox"/> Agent for Owner</p>		<p>Plancheck Approved <input type="checkbox"/> No Plans Subject to Field Inspection</p> <p>Plancheck Cleared By: _____ Date: _____</p> <p>Permit Cleared to Issue By: <u>[Signature]</u> Date: <u>7/10/03</u></p> <p><input type="checkbox"/> Post FIRM <input type="checkbox"/> Adjust Prior Report Available</p> <p><input type="checkbox"/> Pre FIRM <input type="checkbox"/> Geotechnical report Available</p> <table border="1"> <tr> <th>Type of Construction</th> <th>Occupancy</th> <th>No. of Stories</th> <th>No. of Bedrooms</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table> <p>Auto. Fire Sprinklers Req'd: _____ No. of Units: _____ Certificate of Occupancy: _____</p> <p>Final Date: _____ Inspector: _____</p>		Type of Construction	Occupancy	No. of Stories	No. of Bedrooms				
Type of Construction	Occupancy	No. of Stories	No. of Bedrooms								
<p>Permit # <u>Bld03-3815</u> Area <u>10</u></p> <p>Permit Coordinator _____</p>		<p>Distribution: White - File Grey - Applicant Pink - Audit Copy Blue - Assessor Cards - Inspector</p>									

JOB ADDRESS: 2531 Corby Ave  
 PERMIT NUMBER: Bld03-3815  
 INSPECTION AREA: 10

# 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:

Date  
Applied:

**INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT**

Site Address: <u>2531 2533 2535 GARY AVE</u>		City: <u>Santa Rosa</u>	ZIP: _____
Cross Street: _____	Subd. Name: _____	Unit #: _____	Lot #: _____
Directions: _____	Project Phone # (408) <u>379-6725</u>		Project Fax # ( ) _____
Describe Project: <u>DRY AT TOWER REPAIR</u>		Living Area: _____	Contract Price: <u>\$75,000</u>
Garage: _____		Decks: _____	

OWNER NAME AND ADDRESS			APPLICANT NAME AND ADDRESS		
Name: _____			Name: <u>FULLY PERMITTED - CONSTRUCTION</u>		
Mailing Address: <u>7400 Mendocino Ave</u>			Mailing Address: _____		
City: _____	State: _____	ZIP: _____	City: _____	State: _____	ZIP: _____
Day Ph: ( ) _____	Fax: ( ) _____		Day Ph: ( ) _____	Fax: ( ) _____	

CONTRACTOR INFORMATION			OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)		
Company Name: <u>CONSTRUCTION</u>			Name: _____		
Address: <u>5719</u>			Address: _____		
City: <u>Santa Rosa</u>	State: <u>CA</u>	ZIP: <u>95403</u>	City: _____	State: _____	ZIP: _____
Day Ph: ( ) _____	Fax: ( ) _____		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 workers 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 workers 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 INDUSTRIAL INSURANCE FUND

Policy No: 105-4703-02

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

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.

Exp. Date: \_\_\_\_\_ Applicant: \_\_\_\_\_

**WARNING: FAILURE TO SECURE WORKERS 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.**

**CONSTRUCTION LENDING DECLARATION**

I hereby affirm under penalty of perjury that there is no 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 M.I. 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 charge

Approval for Permit Issuance: \_\_\_\_\_ Approval for Occupancy: \_\_\_\_\_

By: \_\_\_\_\_ Date: \_\_\_\_\_

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 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 \_\_\_\_\_

Date: \_\_\_\_\_ Owner: \_\_\_\_\_

Sewer Connection:  Available  Fees Paid

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Read Encroachment:  Fees Paid

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Septic System Permit/Clearance: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Flood Zone:  Yes  No 100 Year Flood Elevation: \_\_\_\_\_

Site Review: \_\_\_\_\_

Code Enforcement Violation:  Yes  No Violation # 1111-522

This permit is valid to \_\_\_\_\_ days.

**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: 21 Lic. No.: 377906

Exp. Date: \_\_\_\_\_ Contractor: \_\_\_\_\_

Work Authorized: \_\_\_\_\_

New  Addition  Alteration  Repair  Moving  Occ/Chg

**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 demolitic 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: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contractor  Owner  Agent for Contractor  Agent for Owner

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

Plans Approved  No Plans Submitted to Field Inspection

Planned/Checked By: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Canceled for Issuance By: \_\_\_\_\_ Date: 7/10/03

Paid FIRM  Alquist Pricko Report Available

Pro FIRM  Geotechnical report Available

Type of Construction	Occupancy	No. of Stories	No. of Bedrooms
Auto. Fire Sprinklers Req'd	No. of Units	Certificate of Occupancy	

Final Date: 9/11/03

Distribution: White - File Canary - Applicant Pink - Audit Copy Blue - Assessor Cardstock - Inspector

Permit # 377906-015 Area 10

Permit Coordinator: \_\_\_\_\_

JOB ADDRESS: \_\_\_\_\_ PERMIT NUMBER: \_\_\_\_\_ INSPECTION AREA: \_\_\_\_\_

131) SPECIAL INSPECTION REQUIRED		<input type="checkbox"/> YES	<input type="checkbox"/> NO	IF YES, SEE ADDITIONAL SHEET	
INSPECTION RECORD	DATE	NAME	REMARKS		
103) FOUNDATION					
• FORMS/SETBACK					
FOOTING					
WALLS					
106) UFER GROUND #					
104) CAISSONS/PIERS					
105) SLAB					
110) MASONRY					
109) RETAINING WALLS					
113) FIREPLACE					
FOOTING					
HEARTH/PROTECTION					
THROAT					
114) CHIMNEY					
120) UNDERFLOOR/UNDERSLAB					
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					
<input type="checkbox"/> ROOF					
<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					
139) INSULATION					
142) WALLBOARD					
135) STUCCO/PLASTER					
<input type="checkbox"/> LATH <input type="checkbox"/> SCRATCH					
137) ROOFING					
130) TUB/SHOWER PAN					
164) SUSPENDED CEILING					
ROUGH ELECTRICAL					
ROUGH MECHANICAL					
165) EXITING					
STAIRS/HANDRAILS					
RAMP					
CORRIDORS/DOORS					
166) ACCESSIBILITY COMPLIANCE					
ENERGY REQUIREMENTS					
170) TEMPORARY OCCUPANCY			FIRE INSPECTION REQUIRED	DATE	NAME
171) TEMPORARY ELECTRICAL			<input type="checkbox"/> Yes <input type="checkbox"/> No		
172) TEMPORARY GAS			770) SPRINKLER FINAL		
174) ELECTRIC METER AUTHORIZATION			771) ABOVEGROUND HYDROSTATIC		
152) PANEL BOARDS/SERVICE			772) UNDERGROUND HYDROSTATIC		
175) GAS METER AUTHORIZATION			773) UNDERGROUND FLUSH		
153) GAS PRESSURE TEST			774) THRUST BLOCKS		
HOUSE			775) PIPE WELD		
YARD			776) HYDRANTS/APPLIANCES		
190) MANUF. HOME FOUNDATION			777) PUMP ACCEPTANCE		
191) MANUF. HOME INSTALLATION			778) WATER SUPPLY/TANK		
CONTINUITY			779) ALARM SYSTEM		
STAIRS/SKIRTS			780) HOOD & DUCT SYSTEM		
RIDGE BOLTING			781) ABOVEGROUND TANK/DISPENSER		
SWIMMING POOLS			198) FIRE FINAL		
194) PRE-GUNITE					
195) PRE-DECK			CLEARANCES:		
196) PRE-PLASTER/FENCE			FIRE <input type="checkbox"/> Local <input type="checkbox"/> County		
102) GRADING FINAL			HEALTH DEPARTMENT		
176) ELECTRICAL FINAL			ZONING		
177) MECHANICAL FINAL			SANITATION		
178) PLUMBING FINAL			N.C.A.P.C.D.		
199) FINAL					
OCCUPANCY (OK TO OCCUPY)				PLAN RETENTION REQUIRED	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

PERMIT # BX 1003-0819