

10805 MILL STATION RD
(BLD99-0273)

COUNTY OF SONOMA

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA

(707) 565-1900 FAX (707) 565-1103

BUILDING PERMIT RECEIPT

BLD99-0273

Site Location Information
Address: 10805 MILL STATION RD GRA
Cross Street: SULLIVAN RD

Printed By: FWILLIAM 09:32 Jul 20, 1999

APN: 061-030-025

Initialized By: FWILLIAM A-BLD 9901

Owner
PETERSON MARY E
10805 MILL STATION RD
SEBASTOPOL CA

Applicant
PETERSON MARY E
10805 MILL STATION RD
SEBASTOPOL CA

954729021

954729021

707 823 2446

707 823 2446

Contractor

Architect or Engineer

Lic. #:

Lic. #:

Building Permit Expires 3 YEARS from the Date Permit Fees Are Paid (See Register Validation Date)

Status: STARTED

Permit Description: INSTALL 6 WNDWS/FIX DRY ROT/INSULATE/REPLC SIDINGS

Issued:

Valuation/Contract Price: \$2,000.00

Type: SALT

Planchek Multiplier:

Penalty Multiplier (Where Applicable):

Occupancy

Type

Factor Sq. Feet

Valuation

Subtotal: .00

Multiplier 1.00: .00

Addl Fixed Amount: 2,000.00

Total Valuation: 2,000.00

Table Date: 07/01/1999

Item #	Item Account Code	Description	Fee	Prev. Paid
0011	1341	3505 INSPECTIONS - OTHER	\$.00	\$.00
0012	1341	3505 INSP. OUTSIDE NORMAL HRS	\$.00	\$.00
0013	1341	3505 REINSPECTION(S) FEE	\$.00	\$.00
0050	327023-4040	S.M.I.P. RESIDENTIAL	\$.50	\$.00
0100	1341	3502 SITE REVIEW/ELEV. CERT.	\$.00	\$.00
0121	1341	3502 FIRE SAFE STDS & REF PRMD	\$.00	\$.00
0122	1341	3504 ELECTRICAL FEE	\$.00	\$.00
0123	1341	3504 MECHANICAL FEE	\$.00	\$.00
0124	1341	3504 PLUMBING FEE	\$.30	\$.00
0132	1341	3504 BUILDING PERMIT FEE	\$69.25	\$.00
0220	1600	VIO. PENALTY FEE (BLDG)	\$.00	\$.00
0721	4114	2001 VIO. INVEST. FEE (BLDG)	\$.00	\$.00
1165	3829	6146 ZONING PERMITS W/O D.R.	\$.00	\$.00
5011	1341-WAIVED	3505 INSPECTIONS - OTHER	\$.00	\$.00
5012	1341-WAIVED	3505 INSP. OUTSIDE NORMAL HRS	\$.00	\$.00
5013	1341-WAIVED	3505 REINSPECTION(S) FEE	\$.00	\$.00
5100	1341-WAIVED	3502 SITE REVIEW/ELEV. CERT.	\$.00	\$.00
5121	1341-WAIVED	3502 FIRE SAFE STDS & REF PRMD	\$.00	\$.00
5122	1341-WAIVED	3504 ELECTRICAL FEE	\$.00	\$.00
5123	1341-WAIVED	3504 MECHANICAL FEE	\$.00	\$.00
5124	1341-WAIVED	3504 PLUMBING FEE	\$.00	\$.00
5132	1341-WAIVED	3504 BUILDING PERMIT FEE	\$.00	\$.00
5220	1600-WAIVED	VIO. INVEST. FEE	\$.00	\$.00
5221	4114-WAIVED	2001 VIOLATION INVESTIG FEE	\$.00	\$.00
6165	3829-WAIVED	6146 ZONING PERMITS W/O D.R.	\$.00	\$.00

Permit qualified for fee waiver (Y/N): N

\$69.75

\$.00

Total Calculated Fees

\$69.75

Previously Paid

\$.00

Balance Due

\$69.75

CASH REGISTER
VALIDATION
REQUIRED
BELOW

017103 07/20/99901 \$69.75

0990273

SIERRA \$69.75

***TTL \$69.75

CHECK \$69.75

CNMG \$0.00

COUNTY OF SONOMA - PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

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

Use Print:
Our Name: Mary Peterson

Date Applied: 7/20/99

INFORMATION WITHIN HEAVY LINE TO BE COMPLETED BY APPLICANT

SITE LOCATION INFORMATION - PRINT CLEARLY

Site Address: <u>10805 Mill Station Road</u>		City: <u>Sebastopol</u>	ZIP: <u>95472</u>
Cross Street: <u>Sullivan Rd and Dyer Ave</u>		APN: <u>060-025</u>	Project Phone #: <u>(707) 823-2446</u>
Directions:	Subd. Name:	Unit #:	Lot #:
Describe Project: <u>Remove siding on south wall, replace windows, fix dry rot as needed, insulate and replace siding</u>		Living Area:	Contract Price: <u>\$2000.</u>
Garage:		Decks:	

OWNER NAME AND ADDRESS		APPLICANT NAME AND ADDRESS	
Name: <u>Mary Peterson</u>		Name:	
Mailing Address: <u>10805 Mill Station Rd</u>		Mailing Address:	
City: <u>Sebastopol</u>	State: <u>CA</u>	City:	State:
Day Ph: <u>(707) 823-2446</u>	Fax: ()	Day Ph: ()	Fax: ()
ZIP: <u>95472</u>		ZIP:	

CONTRACTOR INFORMATION		OTHER PERSONS (ARCHITECT, ENGINEER, ETC.)	
Company Name:		Name:	
Address:		Address:	
City:	State:	City:	State:
Day Ph: ()	Fax: ()	Day Ph: ()	Fax: ()
ZIP:		ZIP:	

WORKER'S COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

☐ I have and will maintain a certificate of consent to self-insure for worker's compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

☐ I have and will maintain worker's compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My worker's compensation insurance carrier and policy number are:

Carrier: _____
Policy No.: _____

(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 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.

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 the real, 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 the real, 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: 7/20/99 Owner: Mary Peterson

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

Lic. Class: _____ Lic. No.: _____

Exp. Date: _____ Contractor: _____

ASBESTOS DECLARATION

When asbestos notification pursuant to Part 61 of Title 40 of the Code of Federal Regulations is required when asbestos exists in buildings, or portions thereof, undergoing demolition. I hereby declare that demolition authorized by this permit is from construction that ☐ does ☐ does not contain asbestos, or that ☐ no demolition is authorized by this permit.

I certify that I have read this application and affirm under penalty of perjury that the above information is correct. I agree to comply with all local Ordinances and State laws relating to building construction. I hereby authorize representatives of the County of Sonoma to enter upon the above-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.

NOTICE!! THIS PERMIT WILL EXPIRE BY LIMITATION IF WORK IS NOT STARTED IN 180 DAYS OR IF WORK IS ABANDONED FOR MORE THAN 180 DAYS. A REQUEST FOR TIME EXTENSION MUST BE SUBMITTED IN WRITING TO THE BUILDING CODE ADMINISTRATOR WITHIN THE FIRST 180 DAYS OF THE PERMIT.

Mary Peterson
PERMITTEE SIGNATURE

ADDRESS: _____ CITY: _____ ZIP: _____

☐ Contractor ☒ Owner ☐ Agent for Contractor ☐ Agent for Owner

Permit # BLD99-0273 Area 7

Permit Coordinator: _____

CONSTRUCTION LENDING DECLARATION

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued, (Sec. 3097, Civ. C.).

Lenders Name: _____

Lender: _____

FOR DEPARTMENT USE

Zoning: _____ File No.: _____ Acres: _____

Existing Use/Structures: _____

Proposed Use/Structures: _____

Zoning Min. 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 change

Approval for Permit Issuance: _____ Approval for Occupancy: _____

By: _____ Date: _____

Conditions: _____

Sewer Connection: ☐ Available ☐ Fees Paid

Approved by: _____ Date: _____

Road Encroachment: ☐ Fees Paid

Approved by: _____ Date: _____

Septic System Permit/Clearance # _____

Approved by: _____ Date: _____

Flood Zone: ☐ Yes ☒ No 100 Year Flood Elevation: _____

Site Review: _____

By: _____ Date: _____

Condition of Soil at Job Site: ☐ Original ☐ Engineered Fill ☐ Loose Fill

Required Reports: ☐ Geology ☐ Soils ☐ Compaction

Code Enforcement Violation: ☒ Yes ☐ No

Work Authorized: REMOVE Siding, Windows, Dry Rot
INSUL + Replace Siding

☐ New ☐ Addition ☐ Alteration ☐ Repair ☐ Moving ☐ OccChg

☐ Plans Approved		Machine Space for Permit Fee:	
☐ No Plans Subject to Field Inspection			
Plan Check Clearance By: _____	Date: <u>07/20/99</u>	#	<u>0390273</u>
Permit Clearance for Issuance By: _____	Date: <u>7/20/99</u>	#	<u>169.75</u>
Type of Construction	Occupancy	No. of Storcks	No. of Bedrooms
Auto. Fire Sprinklers Req'd	No. of _____	Certificate of Occupancy	
Final Date: <u>7/29/99</u>	Inspector: <u>D.H. Linea</u>	CHECK	CHNG
		\$59.75	\$0.00

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

JOB ADDRESS: 10805 Mill Station Rd

MAP REFERENCE: _____

PERMIT NUMBER: BLD99-0273 INSPECTION AREA: _____

SPECIAL INSPECTION REQUIRED		☐ YES	☐ NO	IF YES, SEE ADDITIONAL SHEET
INSPECTION RECORD	DATE	NAME	REMARKS	
FOUNDATION				
SETBACK				
WALLS				
UNDER GROUND #				
CAISSONS/PIERS				
SLAB				
MASONRY				
RETAINING WALLS				
FIREPLACE				
FOOTING				
HEARTH/PROTECTION				
THROAT				
CHIMNEY				
UNDERFLOOR/UNDERSLAB				
U/F ELECTRICAL				
U/F MECHANICAL				
U/F PLUMBING				
U/F FRAMING				
U/F INSULATION				
SHEAR WALLS				
☐ INTERIOR				
☐ EXTERIOR				
DIAPHRAGMS				
☐ ROOF				
☐ FLOOR				
SIDING/SHEATHING	7/23/95	DBP		
HOLD DOWNS				
CLOSE-IN				
ROUGH ELECTRICAL				
ROUGH MECHANICAL				
ROUGH PLUMBING				
ROUGH FRAME				
SMOKE DETECTORS				
INSULATION				
WALLBOARD				
STUCCO/PLASTER				
☐ LATH				
☐ SCRATCH				
TUB/SHOWER PAN				
SUSPENDED CEILING				
ROUGH ELECTRICAL				
ROUGH MECHANICAL				
EXITING				
STAIRS/HANDRAILS				
RAMPS				
CORRIDORS/DOORS				
HANDICAP REQUIREMENTS				
ENERGY REQUIREMENTS				
TEMPORARY OCCUPANCY				
TEMPORARY ELECTRICAL				
TEMPORARY GAS				
ELECTRIC METER AUTHORIZATION				
PANEL BOARDS/SERVICE				
GAS METER AUTHORIZATION				
GAS PRESSURE TEST				
HOUSE				
YARD				
MANUF. HOME FOUNDATION				
MANUF. HOME INSTALLATION			FIRE INSPECTION REQUIRED ☐ Yes ☐ No	
CONTINUITY			Inspected by:	
STAIRS/SKIRTS				
RIDGE BOLTING				
SWIMMING POOLS				
PRE-GUNITE				
PRE-DECK			CLEARANCES:	
PRE-PLASTER/FENCE			FIRE ☐ Local ☐ County	
GRADING FINAL			HEALTH DEPARTMENT	
ELECTRICAL FINAL			ZONING	
MECHANICAL FINAL			SANITATION	
PLUMBING FINAL			N.C.A.P.C.D.	
FINAL			PLAN RETENTION REQUIRED?	
OCCUPANCY (OK TO OCCUPY)			☐ Yes ☐ No	

PERMIT #