

# CERTIFICATE of OCCUPANCY

## CITY OF GARDEN GROVE - PUBLIC WORKS & DEVELOPMENT

THIS CERTIFICATE ISSUED PURSUANT TO THE REQUIREMENTS OF SECTION 306 OF THE UNIFORM BUILDING CODE CERTIFYING THAT, AT THE TIME OF ISSUANCE, THIS STRUCTURE WAS IN COMPLIANCE WITH THE VARIOUS ORDINANCES OF THE CITY REGULATING CONSTRUCTION OR USE FOR THE FOLLOWING:

JOB ADDRESS 12640 Westminster PERMIT NO 153700A

USE OF BLDG. Industrial GROUP VN TYPE B2

BLDG. APPROVED BY Tedd Robinson DATE 9/27/88 USE ZONE PUD

ZONING REMARKS PUD-102-SG (REV '86)

BLDG. OWNER Stan Smolin ADDRESS P.O. Box 5128 Garden Grove

Patrick P. Importuna BY *[Signature]* DATE 10/21/88

BLDG. OFFICIAL

POST IN A CONSPICUOUS PLACE

# BUILDING PERMIT

Inspection Requests  
638-6771

General Information  
638-6661

For Applicant to Fill in **BLDG V**

PC# 3157

## INSPECTION RECORD

OCCUPANCY <b>B2</b>	TYPE <b>VN</b>	OCC. LOAD	FIRE SPRINK. <b>YES</b>	APPROVAL	DATE	INSPECTOR
USE ZONE	FRONT	LEFT	RIGHT	REAR	PRE INSPECTION	
Evap. Prot.	Setbacks	<b>SEE PLOT PLAN</b>			FOUNDATION & LOCATION	
PLANNING ACTION <b>PUD102-86 (REV 86)</b>	PLANS <b>PROVIDED</b>				CONCRETE FLOOR	
LAND USE APPROVED BY <b>Richardson</b>	DATE <b>9-24-87</b>				REINFORCING	<b>2/10/88</b>
REMARKS:					MASONRY	
					ROOF SHTG	<b>3/16/88</b>
					ROUGH FRAME	
					INSULATION, ENERGY	
					DRYWALL	
					LATH	
					PLAS. BROWN CT	
G.G. SANT/DIS. FEE REQ'D. <b>Yes</b>	O.C. SANT/DIS. FEE REQ'D. <b>Yes</b>	DATE <b>9/24/87</b>	RECD. <b>RDC</b>			
PARCEL MAP						
H/W DEDICATION						
<b>FEES AND BONDS</b>						
	REV. CODE	AMOUNT				
ST. BOND						
WATER BOND						
WATER ASSMT. FEE (ACRG)						
WATER ASSMT FEE (FT)						
PARKWAY TREE FEE						
PARK & REC FEE (DIST)						
DRAIN ASSMT FEE (DIST)						
PLAN RETENTION FEE						
BLDG PLAN CHECK *		<b>1640</b>	<b>84</b>			
BLDG. PERMIT FEE		<b>2475</b>	<b>40</b>			
ISSUANCE		<b>10.00</b>				
VALUATION						
<b>\$ 891450-</b>	TOTAL FEES	<b>4126</b>	<b>24</b>			
AUTHORIZED BY <b>[Signature]</b>	DATE <b>9-24-87</b>					

ADDRESS <b>12640 WESTMINSTER</b>	LOT NO. <b>153700A</b>
OWNER <b>STAN SMOLIN</b>	MAILING ADDRESS
<input type="checkbox"/> ARCH. <b>BILL HANDLEY</b>	MAILING ADDRESS
TEL NO.	STATE, CO., CITY, ZIP
VALUATION <b>8-PLAN 1-240-84</b>	<b>113203A 1-15'87 CHECK 1,640.84</b>
CONTRACTOR	MAILING ADDRESS
TEL NO.	
PRESENT BLDG USE	DESCRIBE WORK TO BE DONE <b>NEW INDUSTRIAL BLDG</b>
FLOOR AREA	ISO FT. <b>43065</b>
If work is not started within 180 days from date of issue, this permit will be null and void.	
A FEE MAY BE CHARGED FOR REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS	
RELOCATION	
PRESENT BLDG ADDRESS	MOVING CONTRACTOR
ADDRESS	

**WORKER'S COMPENSATION REQUIREMENTS**

State Compensation Insurance Policy No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

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.

NOTE: If, after making such certificate, the applicant for the permit should be subject to the Worker's Compensation provisions of this code, he shall fail to comply with the provisions of Section 3700 of his permit shall be deemed revoked.

I certify that I have read this application and state that the above information is correct, I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed relevant to this permit.

**[Signature]** **9/24/87**

PERMIT APPLICANT SIGNATURE DATE

**BUSINESS TAX CERTIFICATE INFORMATION**

I certify that the following Contractor's License No. \_\_\_\_\_ and Classification \_\_\_\_\_ is in full force and effect.

(PRINT) CONTRACTOR \_\_\_\_\_ (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT \_\_\_\_\_ DATE \_\_\_\_\_

BUSINESS TAX CERTIFICATE NO. \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

I certify that I am exempt from Section 7031.5 of the Business and Professional Code, Division 3 Chapter 9 Contractors License Law, under the following Section Owner: Section 7044  Minor work under \$200; Section 7048  Employee working for wages only; Section 7053

Other \_\_\_\_\_

(PRINT) PROPERTY OWNER \_\_\_\_\_ (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT **[Signature]** **9/24/87** DATE

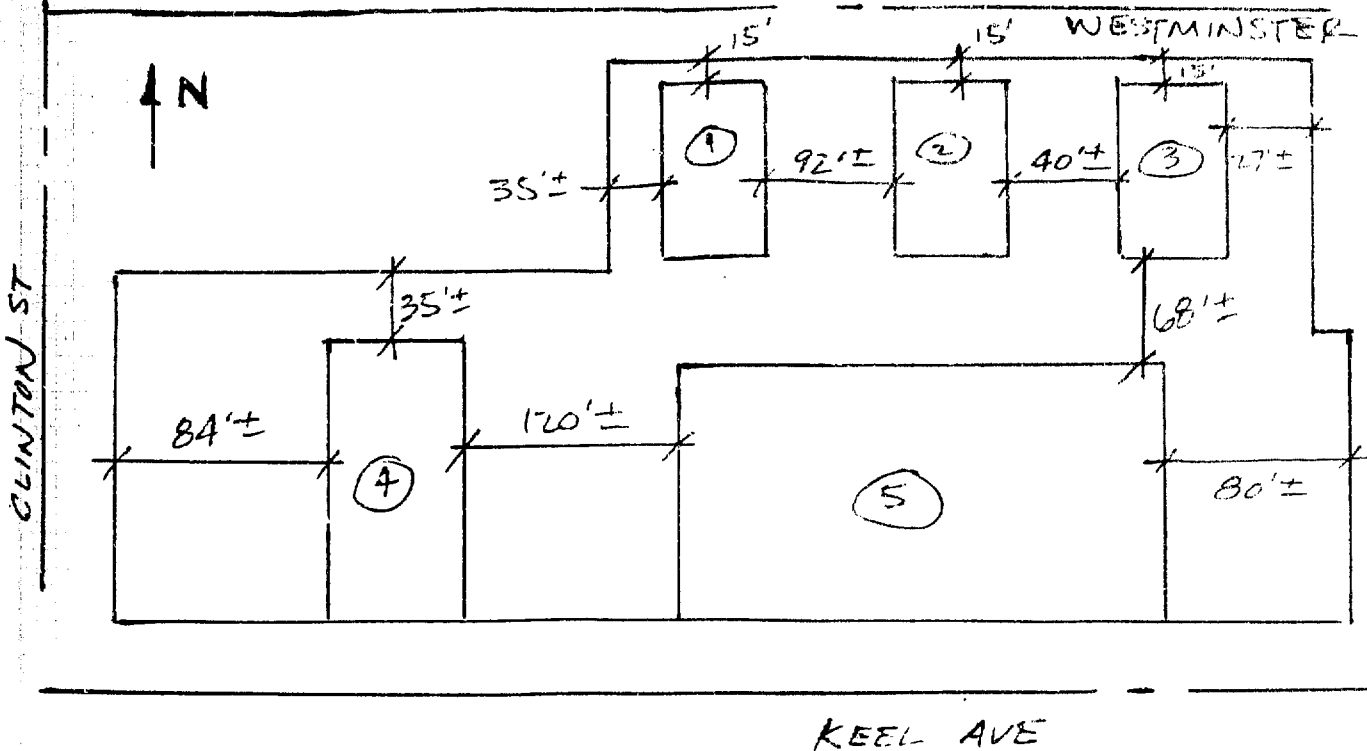
CITY OF GARDEN GROVE

# PLOT PLAN

DEVELOPMENT SERVICES DEPARTMENT

OWNER <b>STAN SMOLIAN</b>	JOB ADDRESS <b>BELOW</b>	PERMIT NO. <b>BELOW</b>
NAME OF CONSTRUCTION LENDER & BRANCH <b>PIONEER BANK REAL ESTATE LOAN DEPT</b>	ASSESSOR'S PARCEL ID <b>198-111-2THRU6, 10THRU20</b>	PLEASE CHECK ONE OR MORE <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish
ADDRESS <b>P.O. Box 200</b>	CITY <b>FULLERTON 92632</b>	DATE <b>9-24-87</b>
JOB DESCRIPTION <b>NEW INDUSTRIAL BUILDINGS</b>		PERMIT VALUE <b>BELOW</b>

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS



BLDG	ADDRESS	VALUATION	BLT#
1	12610 WESTMINSTER	311430	15361A
2	12620 "	247790	15362A
3	12630 "	238150	15363A
4	12600 "	347370	15364A
5	12640 "	891450	15365A

#1 Building Insp./#2 Assessor #3 Permittee #4 File  
I certify the information hereon is complete and correct. By

PLOT PLAN APPROVED BY

# BUILDING PERMIT

## INSPECTION RECORD

USE ZONE	TYPE	OCC. LOAD		FIRE SPRINK.		APPROVAL	DATE	INSPECTOR
		FRONT	LEFT	FRONT	REAR			
	Ex. Pres.					PRE INSPECTION		
	Setbacks					FOUNDATION & LOCATION		
PLANNING ACTION						REINFORCING		
LAND USE APPROVED BY						MASONRY		
REMARKS						ROOF SHING		
						ROUGH FRAME		
						INSULATION, ENERGY		
						DRYWALL		
						LATH		
						PLAS. BROWN CT.		
						LANDSCAPING		
B.O.SANT.DIS. FEE REQ'D.		O.C.SANT.DIS. FEE REQ'D.		DATE				
PARCEL MAP		REQ'D		PROVIDED				
R/W DEDICATION						PRE GUNTE		
FEE'S AND BONDS						PRE DECK		
		REV. CODE	AMOUNT			PRE PLASTER		
ST. BOND						PLANNING		
WATER BOND						FINAL		
WATER ASSMT. FEE (ACRG.)						<h3>WORKER'S COMPENSATION REQUIREMENTS</h3> <p>State Compensation Insurance Policy No. _____ Expiration Date _____            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.  <b>NOTE:</b> If, after making such certificate, the applicant for the permit should become subject to the Worker's Compensation provisions of this code, he shall forthwith comply with the provisions of Section 3700 or his permit shall be deemed revoked.            I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed relevant to this permit.</p> <p>PERMIT APPLICANT SIGNATURE: <u>STAN SMOLIN</u> DATE: <u>9/24/89</u></p> <h3>BUSINESS TAX CERTIFICATE INFORMATION</h3> <p>I certify that the following Contractor's License No. _____ and Classification _____ is in full force and effect.</p> <p>(PRINT) CONTRACTOR: _____ (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT: _____ DATE: _____</p> <p>BUSINESS TAX CERTIFICATE NO. _____ EXPIRATION DATE: _____</p> <p>I certify that I am exempt from Section 7031.5 of the Business and Professional Code, Division 3, Chapter 9, Contractors' License Law, under the following Section: Owner: Section 7044 <input checked="" type="checkbox"/> Minor work under \$200: Section 7048 <input type="checkbox"/> Employee working for wages only: Section 7053 <input type="checkbox"/></p> <p>Other: _____ DATE: <u>9/24/89</u></p> <p>(PRINT) PROPERTY OWNER: _____ (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT: _____ DATE: _____</p>		
WATER ASSMT. FEE (FT.)								
PARKWAY TREE FEE								
PARK & REC. FEE (DIST.)								
DRAIN ASSMT. FEE (DIST.)								
PLAN RETENTION FEE								
BLDG. PLAN CHECK								
BLDG. PERMIT FEE								
ISSUANCE								
VALUATION								
		TOTAL FEES						

1. INSPECTOR

ADDRESS	LOT NO.	BLK NO.	TRACT NO.	PERMIT NO.
12600 - 12600 WESTMONTANA				153695A
OWNER	STAN SMOLIN			TEL NO.
MAILING ADDRESS	283 N. Rampart, Suite E			ZIP
<input type="checkbox"/> ARCH <input type="checkbox"/> ENGR.	DALE K. PRACE			STATE LIC NO. & TYPE
MAILING ADDRESS				24004
TEL NO.	(714) 978-7324			
VALIDATION				
CONTRACTOR				
MAILING ADDRESS				
TEL NO.				
PRESENT BLDG USE				
PROPOSED BLDG USE				
DESCRIBE WORK TO BE DONE				
CORALINE				
NEW <input type="checkbox"/> ADD'D <input type="checkbox"/> ALTER <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>				
FLOOR AREA (SQ. FT.)		NO. OF STORIES		NO. OF DWELLING UNITS
1,700 C.Y.				
If work is not started within 180 days from date of issue or if abandoned for more than 180 days this permit will be null and void				
A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.				
RELOCATION				
PRESENT BLDG. ADDRESS				
MOVING CONTRACTOR				
ADDRESS				

9/24/89

1. INSPECTOR

# BUILDING PERMIT

Inspection Requests  
741-5332

General Information  
741-5307

For Applicant to Fill In

PC # F-070

## INSPECTION RECORD

OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.		APPROVAL	DATE	INSPECTOR
		FRONT	LEFT	RIGHT	REAR			
USE ZONE						PRE INSPECTION		
	Eav. Proj.					FOUNDATION & LOCATION		
	Setbacks					CONCRETE FLOOR		
PLANNING ACTION						REINFORCING		
						MASONRY		
LAND USE APPROVED BY						ROOF SHTG		
REMARKS:						ROUGH FRAME		
						INSULATION, ENERGY		
						DRYWALL		
						LATH		
						PLAS. BROWN CT.		
						LANDSCAPING		
G.G. SANT. DIS. FEE REQ'D.		O.C. SANT. DIS. FEE REQ'D.		DATE	INITIAL			
PARCEL MAP			REQ'D	PROVIDED				
R/W DEDICATION						PRE GUNITE		
<b>FEES AND BONDS</b>						PRE DECK		
		REV. CODE	AMOUNT			PRE PLASTER		
ST. BOND						PLANNING		
WATER BOND						FINAL	11/21/88	EFL
WATER ASSMT. FEE (ACRG)						<b>WORKER'S COMPENSATION REQUIREMENTS</b>		
WATER ASSMT. FEE (FT)						State Compensation Insurance Policy No. <u>WP80328240</u> Expiration Date <u>5-1-89</u>		
PARKWAY TREE FEE						<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. <b>NOTE:</b> If after making such certificate, the applicant for the permit should be otherwise subject to the Worker's Compensation provisions of this code he shall continue to comply with the provisions of Section 3700 or his permit shall be deemed revoked. <input type="checkbox"/> I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed relevant to this permit.		
PARK & REC FEE (DIST)						<u>Steve Dinkling</u> 8-21-88 <small>PERMIT APPLICANT SIGNATURE DATE</small>		
DRAIN ASSMT. FEE (DIST)						<b>BUSINESS TAX CERTIFICATE INFORMATION</b> I certify that the following Contractor's License No. <u>302558</u> and Classification <u>C-162</u> is in full force and effect. <u>FIRE SPRINKLER INC</u> <u>STEVE DINKLING</u> 8-2-88 <small>(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE</small>		
PLAN RETENTION FEE						<small>BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE</small> I certify that I am exempt from Section 7031.5 of the Business and Professional Code, Division 3, Chapter 9, Contractors' License Law, under the following section: Owner: Section 7044 <input type="checkbox"/> Minor work under \$200 Section 7045 <input type="checkbox"/> Employee working for wages only: Section 7053 <input type="checkbox"/> Other: _____		
BLDG. PLAN CHECK			110	16				
BLDG. PERMIT FEE			163	65				
ISSUANCE			10	02				
VALUATION								
			<b>TOTAL FEES</b>	283	21			
AUTHORIZED BY					DATE			
					9-1-88			

ADDRESS	15640 Westminster Blvd 5	
LOT NO.	15640	PERMIT NO. 159297A
OWNER	Buena Churion	
MAILING ADDRESS	P.O. Box 5148 Garden Grove	
MAILING ADDRESS		
TEL NO.		
DATE OF THIS PERMIT		
VALIDATION		
CONTRACTOR	Fire Sprinkler, Inc	
MAILING ADDRESS	P.O. Box 368 Fullerton 92634	
TEL NO.	956-5040	30/558 C-16
PRESENT BLDG USE	COMMERCIAL	
DESCRIBE WORK TO BE DONE	Fire sprinkler	
NEW <input type="checkbox"/> ADD <input type="checkbox"/> ALTER <input type="checkbox"/> REPAIR <input type="checkbox"/> RECONSTRUCT <input type="checkbox"/>		
FLOOR AREA		
(SQ. FT.)		
If work is not started within 180 days from date of issuance of this permit for more than 180 days this permit will be null and void.		
A FEE MAY BE CHARGED FOR REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS		
<b>RELOCATION</b>		
PRESENT BLDG ADDRESS		
MOVING CONTRACTOR		
ADDRESS		

I. INSPECTOR

# BUILDING PERMIT

Inspection Requests  
638-6771

General Information  
638-6661

## INSPECTION RECORD

For Applicant to Fill in

OCC. CATEGORY	TYPE	OCC. LOAD		FIRE SPRINK.		APPROVAL	DATE	INSPECTOR
		FRONT	LEFT	RIGHT	WEAR			
USE	Zone	Exp. Pres.				PRE INSPECTION	1/15/88	
		Setbacks				FOUNDATION & LOCATION		
						CONCRETE FLOOR		
						REINFORCING		
PLANNING REVIEW					PLANS	MASONRY		
LAND USE APPROVED BY	<i>David...</i>				DATE	ROOF SHITG		
					6/10/88	ROUGH FRAME		
REMARKS	NOTE: THE TRAINING AND STORAGE ROOMS MAY NOT BE CONVERTED TO OFFICE USE.					INSULATION, ENERGY		
						DRYWALL		
						LATH		
						PLAS. BROWN CT.		
						LANDSCAPING		
G.S.A.M.T.D.S. FEE RECD.	O.C.S.A.M.T.D.S. FEE RECD.			REQ'D	PROVIDED			
PARCEL MAP						PRE GUNITE		
RAW DEDICATION						PRE DECK		
FEES AND BONDS						PRE PLASTER		
		REV. CODE	AMOUNT			PLANNING		
ST. BOND						FINAL		
WATER BOND								
WATER ASSMT. FEE (ACRG.)								
WATER ASSMT. FEE (FT.)								
PARKWAY TREE FEE								
PARK & REC. FEE (DIST.)								
DRAIN ASSMT. FEE (DIST.)								
PLAN RETENTION FEE			20 00					
BLDG. PLAN CHECK			625 26					
BLDG. PERMIT FEE			932 10					
INSURANCE			10 00					
VALUATION	180,000.-	TOTAL FEES	1,587 36					
AUTHORIZED BY								

ADDRESS: 12640 Westminster Avenue

LOT NO. BLK NO. TRACT NO. PERMIT NO. **157657A**

OWNER: Buena Clinton Center II TEL NO: (714) 530-6605

MAILING ADDRESS: P.O. Box 5128, Garden Grove 92645

ARCH  ENGR. **Handley Engineering**

MAILING ADDRESS: 130 El Camino Real, #100, Tustin 92680

TEL NO: (714) 669-1141 STATE LIC. NO. & TYPE

VALIDATION: PL RET 20.00, B-PLAN 625.26, B-PER 932.10, ISS 10.00

CONTRACTOR: #6243A 6-13-88 CHECK 1,587.36 Owner

MAILING ADDRESS: CITY ZIP

TEL NO: STATE LIC. NO. & TYPE

PRESENT BLDG. USE: PROPOSED BLDG. USE:

DESCRIBE WORK TO BE DONE: *Interior Partitions, Mezzanine Additions*

NEW  ADD  ALTER  REPAIR  DEMOLISH

FLOOR AREA: (SQ. FT.) *5000sq* NO OF STORIES: NO OF DWELLING UNITS:

If work is not started within 180 days from date of issue or if abandoned for more than 180 days, this permit will be null and void.

A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

RELOCATION

PRESENT BLDG. ADDRESS: MOVING CONTRACTOR: ADDRESS:

### WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. \_\_\_\_\_ Expiration Date \_\_\_\_\_

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.

**NOTE:** If, after making such certificate, the applicant for the permit should become subject to the Worker's Compensation provisions of this code, he shall forthwith comply with the provisions of Section 3700 or his permit shall be deemed revoked.

I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed relevant to this permit.

*Stan Smolin* 4/28/88  
PERMIT APPLICANT SIGNATURE DATE

### BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. \_\_\_\_\_ and Classification \_\_\_\_\_ is in full force and effect.

(PRINT) CONTRACTOR: (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT: DATE:

BUSINESS TAX CERTIFICATE NO. \_\_\_\_\_ EXPIRATION DATE \_\_\_\_\_

I certify that I am exempt from Section 7031.5 of the Business and Professional Code, Division 3, Chapter 9, Contractors' License Law, under the following Section: Owner: Section 7044  Minor work under \$200: Section 7048  Employee working for wages only: Section 7053

Other: *Stan Smolin* 4/28/88  
(PRINT) PROPERTY OWNER: (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT: DATE:

T. INSPECTOR

GARDEN GROVE


# PLOT PLAN

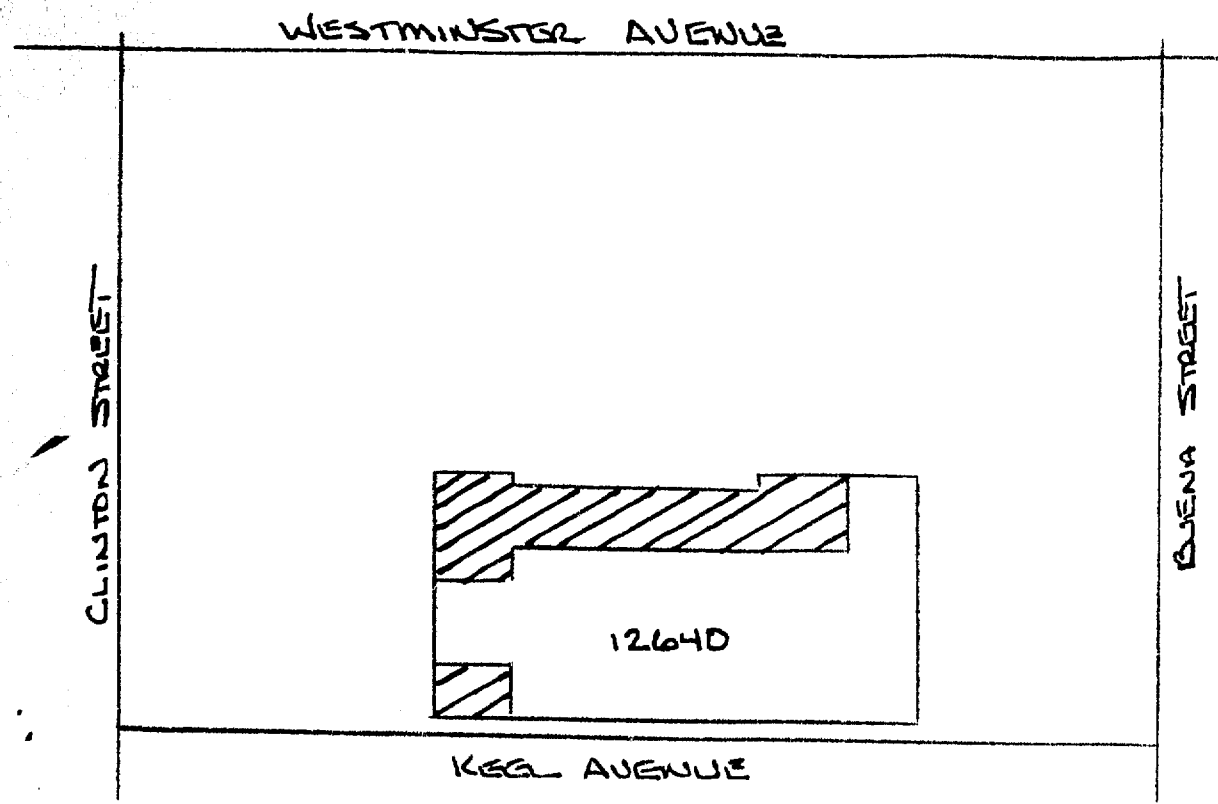
DEVELOPMENT SERVICES DEPARTMENT

1

Buena Clinton Center II		JOB ADDRESS 12640 Westminster Avenue			PERMIT NO. 157657A
ADDRESS P.O. Box 5128, Garden Grove 92645	CITY	ASSESSOR'S PARCEL NO. 19811102	LOT	BLOCK	TRACT
PLEASE CHECK ONE OR MORE					
<input type="checkbox"/> New <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish					
DATE 6-13-88		JOB DESCRIPTION Int. Partitions Add mezzanine		PERMIT VALUE 180,000	

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.

NOTE:  NEW CONSTRUCTION



PLOT PLAN APPROVED BY \_\_\_\_\_

#1 Building Insp./#2 Assessor/#3 Permittee/#4 File  
I certify the information hereon is complete and correct. By \_\_\_\_\_



General Information: 714-741-5307

CITY OF GARDEN GROVE - DEVELOPMENT SERVICES DEPARTMENT

Inspection Requests: 714-741-5332

# PERMIT (PAGE 2 of 2)



## PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 12640 WESTMINSTER AVE  
 Suite : THRU 12644  
 PERMIT NO. : 94346  
 Permit Type : FIRE SUPP.  
 Type : B16  
 FIRE SPRINKLERS  
 Owner : MTS INVESTMENT LLC  
 Applicant : DONALD LEE  
 Phone : 632-9381

Contractor : LEE FIRE PROTECTION  
 Address : 1188 N. GROVE #D  
 CityStZip : ANAHEIM, CA 92806  
 Phone : 632-9381

Insp Dist : FS  
 Date : 04/30/08  
 Parcel No : 19811127

Value : 10000  
 Floor area : 0

## PROPOSED WORK:

O30 - SPRINKLER  
 RELOCATE EXISTING DROPS TO NEW T-BAR LOCATION

## FEES

111 32074 Plan Check	1	131.27
111 32073 Permit	1	201.96
111 32401 issuance	1	35.00
942 22130 General Plan	1	13.07
080 32550 Cultural Arts	1	6.44
111 32509 PLAN CHECK 65% (\$42.0	1	-131.27
<b>TOTAL</b>		<b>256.47</b>

APPROVAL	DATE	INSPECTOR
Pre Inspect		
Foundation		
Concrete Floor		
Reinforcing		
Masonry		
Roof Shtg		
Rough Frame		
Insul / Energy		
Drywall		
Lath		
Plas. Brown Ct.		
Landscaping		
Pre Gunite		
Pre Deck		
Pre Plaster		
Planning Final		
<del>Bldg</del> Final Fire <i>SMSoltis 7/1/08</i>		
Utility Notified		

## AUTHORIZATION

Issued By: joannec Date \_\_\_\_\_

## DECLARATION

I certify that I have read this application/permit and state that the information on all pages of this document is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this City and County to enter upon the above mentioned property for inspection purposes.

Applicant's Signature *Donald Lee*  
 Print Name *DONALD LEE* Date *4-30-08*

\*\*\*\*\* VALIDATION \*\*\*\*\*  
 PAID ON 30 Apr 2008 AT 09:06  
 RECEIVED BY RONP 198.245.206.215/2 TRANS# 31  
 AMOUNT PAID \$256.47 BY CHECK#4862  
 TOTAL PAID = \$256.47

\*\*\*\*\*





General Information: 714-741-5307

CITY OF GARDEN GROVE - DEVELOPMENT SERVICES DEPARTMENT

Inspection Requests: 714-741-5332

# PERMIT (PAGE 2 of 2)

## PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 12640 WESTMINSTER AVE  
 Suite : THRU 12644  
 PERMIT NO. : 95650  
 Permit Type : BUILDING  
 Type : B21  
           MISCELLANEOUS  
 Owner : MTS INVESTMENT LLC  
 Applicant : RALPH HASTINGS  
 Phone : 949-250-1988

Contractor : OWNER  
 Address : 12640 WESTMINSTER AVE  
 CityStZip :  
 Phone :

Insp Dist : ZB  
 Date : 09/03/08  
 Parcel No : 19811127

Value : 5000  
 Floor area : 0

## PROPOSED WORK:

039 - MISCELLENEOUS  
 TWO METAL CANOPIES OVER ENTRANCES- SUPP. TO  
 PERMIT 92349

## FEES

111 32410 Permit	1	134.39
111 32401 issuance	1	35.00
942 22130 General Plan	1	7.20
080 32550 Cultural Arts	1	3.55
<b>TOTAL</b>		<b>180.14</b>

APPROVAL      DATE      INSPECTOR

Pre Inspect \_\_\_\_\_  
 Foundation \_\_\_\_\_  
 Concrete Floor \_\_\_\_\_  
 Reinforcing \_\_\_\_\_  
 Masonry \_\_\_\_\_  
 Roof Shtg \_\_\_\_\_  
 Rough Frame \_\_\_\_\_  
 Insul / Energy \_\_\_\_\_  
 Drywall \_\_\_\_\_  
 Lath \_\_\_\_\_  
 Plas. Brown Ct. \_\_\_\_\_  
 Landscaping \_\_\_\_\_  
 Pre Gunitite \_\_\_\_\_  
 Pre Deck \_\_\_\_\_  
 Pre Plaster \_\_\_\_\_

Planning Final \_\_\_\_\_

Bldg Final 3/3/09 [Signature]

Utility Notified \_\_\_\_\_

## AUTHORIZATION

Issued By: yoavs      Date \_\_\_\_\_

## DECLARATION

I certify that I have read this application/permit and state that the information on all pages of this document is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this City and County to enter upon the above mentioned property for inspection purposes.

Applicant's Signature [Signature]

Print Name LASON. P. Attorney Date 9-3-08

\*\*\*\*\* VALIDATION \*\*\*\*\*  
 PAID ON 03 Sep 2008 AT 10:56  
 RECEIVED BY EDWARDM 198.245.206.215/2 TRANS# 99  
 AMOUNT PAID \$180.14 BY CHECK#5285  
 TOTAL PAID = \$180.14

\*\*\*\*\*



General Information: 714-741-5307

CITY OF GARDEN GROVE - DEVELOPMENT SERVICES DEPARTMENT

Inspection Requests: 714-741-5332

### PERMIT (PAGE 2 of 2)

#### PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 12640 WESTMINSTER AVE  
 Suite :  
 PERMIT NO. : 94349  
 Permit Type : BUILDING  
 Type : B7  
 ALTERATIONS TO OTHER BUILDINGS  
 Owner : TWOMEY HOLDINGS  
 Applicant : JASON TWOMEY  
 Phone : 562-331-9900

#### PROPOSED WORK:

O43 - T.I. COMMERCIAL  
 7,225 SF OF T. I. TO REDUCE NUMBER OF OFFICES

Contractor : OWNER  
 Address : 12640 WESTMINSTER AVE  
 CityStZip :  
 Phone :

#### FEES

Insp Dist : ZB	111 32410 Permit	1	1533.21
Date : 04/30/08	111 32401 issuance	1	35.00
Parcel No : 19811127	942 22130 General Plan	1	213.12
	080 32550 Cultural Arts	1	104.97
Value : 180625			
Floor area : 0	TOTAL		1886.30

APPROVAL      DATE      INSPECTOR

Pre Inspect \_\_\_\_\_  
 Foundation \_\_\_\_\_  
 Concrete Floor \_\_\_\_\_  
 Reinforcing \_\_\_\_\_  
 Masonry \_\_\_\_\_  
 Roof Shtg \_\_\_\_\_  
 Rough Frame 5.29.08 Anton  
 Insul / Energy \_\_\_\_\_  
 Drywall \_\_\_\_\_  
 Lath \_\_\_\_\_  
 Plas. Brown Ct. \_\_\_\_\_  
 Landscaping \_\_\_\_\_  
 Pre Gunitite \_\_\_\_\_  
 Pre Deck \_\_\_\_\_  
 Pre Plaster \_\_\_\_\_  
To BAK 7.13.08 CB  
 Planning Final \_\_\_\_\_  
 Bldg Final 6/27/10 ASMA  
 Utility Notified \_\_\_\_\_

#### AUTHORIZATION

Issued By: joannec      Date \_\_\_\_\_

#### DECLARATION

I certify that I have read this application/permit and state that the information on all pages of this document is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this City and County to enter upon the above mentioned property for inspection purposes.

Applicant's Signature [Signature]  
 Print Name Jason Twomey      Date 4-30-08

\*\*\*\*\* VALIDATION \*\*\*\*\*  
 PAID ON 30 Apr 2008 AT 12:20  
 RECEIVED BY JEFFKU 198.245.206.215/2 TRANS# 118  
 AMOUNT PAID \$2187.30 BY CHECK#5164  
 TOTAL PAID = \$2187.30

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