

BUILDING PERMIT

GARDEN GROVE
Permit Services Department

Inspection Requests 638-6771
General Information 638-6661

For Applicant to Fill in

INSPECTION RECORD

INSPECTION RECORD	DATE	APPROVAL	INSPECTOR
FOUNDATION & LOCATION	8/18/87		
CONCRETE FLOOR	8/18/87		
REINFORCING			
MASONRY			
ROOF SHING			
ROOF FRAME			
INSULATION ENERGY			
BRICK			
PLUMBING			
ELECTRICAL			
MECHANICAL			
PAINT			
GLASS			
OTHER			

FEE TYPE	AMOUNT	REMARKS
PLANNING ACTION	6975	
BLDG PERMIT FEE	390304	
ISSUANCE	598601	
RELOCATION	10.00	
TOTAL FEES	1002880	

ADDRESS: 12101 WESTERN AVE
 CITY: WESTLAKE
 ZIP: 91387
 PERMIT NO: 7201

OWNER: MISSION LAND 895-0660
 CITY: WESTLAKE
 ZIP: 91387

SUBJECT: 7495 SAUCONDA G6 926041
 CITY: WESTLAKE
 ZIP: 91387

PROJECT: DE REVERE PARTNERHIP
 CITY: WESTLAKE
 ZIP: 91387

4631 TEELEX AVENUE, NEWPORT BEACH
 STATE OF CALIFORNIA
 TEL NO: 714-833-2021
 CHECK NO: 65162

VALUATION: 189892A12-16'86 CHECK 3,963.04
 B-PLANS: 963.04

CONTRACTOR: SATELLI & M...
 LICENSE NO: 744-1-21-87
 CHECK NO: 405,76

2965 E MAIN ST, WESTLAKE
 TEL NO: 714-230-2092
 B-1

PRESENT BLDG USE: NEW
 PROPOSED BLDG USE: OFFICE

DISPOSE WORK TO BE DONE: TILT-UP
 WAREHOUSE / OFFICE

NEW: ADDN ALTER REPAIR DEMOLISH
 FLOOR AREA: 115700 STORES: NO OF DWELLING: UNITS: 0

IF WORK IS NOT STARTED WITHIN 180 DAYS FROM DATE OF ISSUE OR IF ABANDONED BY OWNER WITHIN 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: _____
 NEW BLDG ADDRESS: _____
 CONTRACTOR: _____
 ADDRESS: _____

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 44C-56
 Expiration Date: 10/1/87
 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 Law of California.

NOTE: If the contractor is not a member of the State Compensation Insurance Fund, the contractor shall provide proof of coverage to the City of Garden Grove. If the contractor is not a member of the State Compensation Insurance Fund, the contractor shall provide proof of coverage to the City of Garden Grove.

I certify that I have read the application and state that the above information is correct. I hereby agree to hold the City of Garden Grove harmless for any damages or losses resulting from the work for which this permit is issued.

Signature: _____ Date: 1-28-87

BUSINESS TAX CERTIFICATE INFORMATION

County: Orange
 License No: _____
 Classification: _____

Signature: _____ Date: 1-28-87

Business Tax Certificate No: _____

County: Orange
 License No: _____
 Classification: _____

Signature: _____ Date: 1-28-87

Business Tax Certificate No: _____

County: Orange
 License No: _____
 Classification: _____

Signature: _____ Date: 1-28-87

Business Tax Certificate No: _____

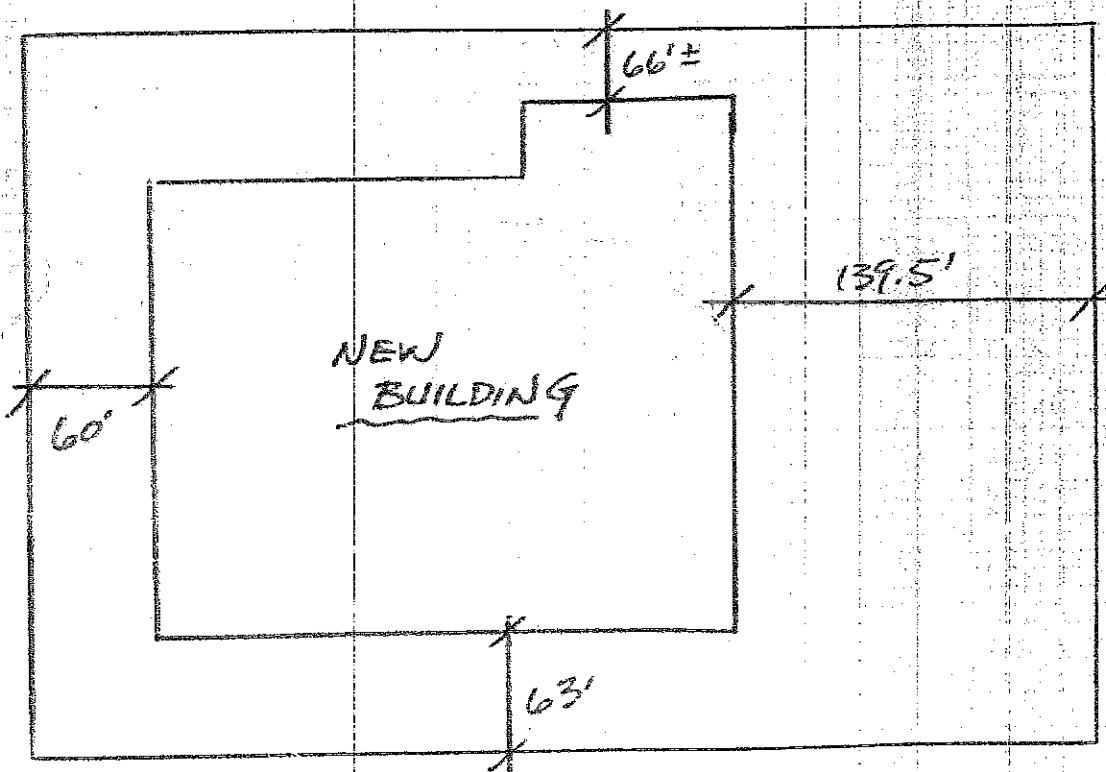
INSPECTOR: _____ DATE: 1-22-87

TOTAL FEES: \$ 2257300.00

AUTHORIZED BY: _____

OWNER MISSION LAND		JOB ADDRESS 12101 WESTERN		PERMIT NO. 149726A
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSOR'S PARCEL NO. 131-661-10	LOT	BLOCK
		TRACT		
		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	CITY	DATE 1-28-87	JOB DESCRIPTION NEW INDUSTRIAL BUILDING	PERMIT VALUE 2257300

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



#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

CITY OF GARDEN GROVE
Development Services Department

Inspection Requests
638-6771

General Information
638-6661

For Applicant to Fill in

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR	REMARKS
FREE INSPECTION	1/11/88		
FOUNDATION & LOCATION			
CONCRETE FLOOR			
REINFORCING			
MASONRY			
ROOF SITS			
ROOF FRAME	2/1/88		
INSULATION ENERGY			
DRYWALL			
LATH			
PLAS. BROWN CT	3/16/88		
LANDSCAPING			
PRE GRANTE			
PRE CHECK			
PRE PLANS			
PLANNING			
FINAL	4/29/88		

ADDRESS: 12101 WESTERN AVE. 155166A

LOT NO. 12101 TRACT NO. 155166A

OWNER: SSANGYONG U.S.A.

MAILING ADDRESS: 2570 E. DEL AMO CAMPTON 90221

ARCHITECT: KOWALSKI - HARDING ASSOC.

MAILING ADDRESS: 550 E. DEL AMO BLVD. CARSON 90746

TEL NO. (213) 532-3870

CONTRACTOR: Hamilton Contractors Inc. 23482 Birchler Dr. El Toro 92630

TEL NO. 714 770 0493

PROPOSED BLDG USE: B-2

DESCRIPTIVE WORK: TENANT IMPROVEMENTS

FLOOR AREA: 18,581 SQ FT

NO. OF STORES: 1

NO. OF DWELLING UNITS: 0

REMARKS: A FEE MAY BE CHARGED FOR REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. WCP 1681B, Expiration Date 9/10/88

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: In making such statement, 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 1100 or 1-5 permit shall be obtained.

I certify that I have read this publication 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 pursuant to this permit.

And *Robert J. [Signature]* 1/11/88

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 71242-5 and Classification is in full force and effect.

Hamilton Contractors Inc. Robert J. [Signature] 1/18/88

885424

8/31/88

I certify that I am exempt from Section 70315 of the Business and Professional Code, Division 3, Chapter 9, Contractors License Law under the following Section: Chapter Section 70314

Employer working for wages only Section 7033

REV. CODE	AMOUNT
PLANNING FEE	30.00
BLDG PLAN CHECK	719.44
BLDG PERMIT FEE	1,082.50
ISSUANCE	10.00
TOTAL FEES	1,841.94

PAID BY: [Signature] 1-19-88

INSPECTOR: [Signature]

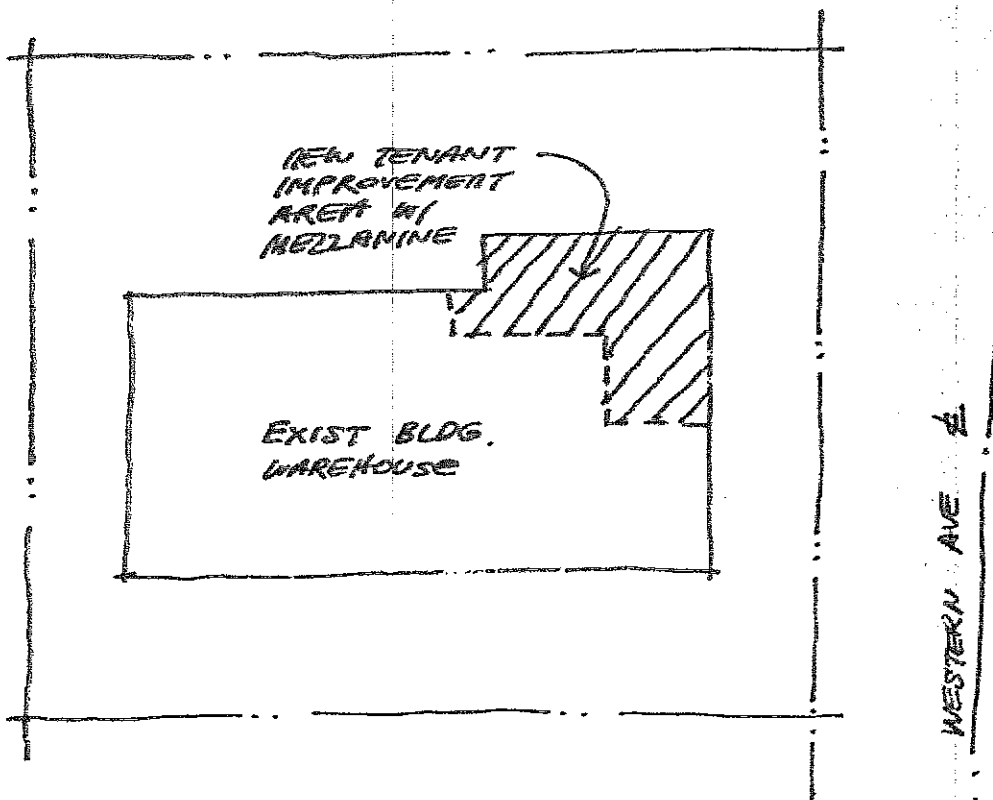
CITY OF GARDEN GROVE

PLOT PLAN

DEVELOPMENT SERVICES DEPARTMENT

OWNER SSANGYONG U.S.A.	LOT ADDRESS 12101 12101 WESTERN AVE	PERMIT NO. 155166A
ADDRESS 2570 E. DEL ANO BLVD. COMPTON	ASSESSOR'S PARCEL NO. 13166101	LOT BLOCK TRACT
PLEASE CHECK ONE OR MORE		
<input type="checkbox"/> New <input checked="" type="checkbox"/> Addition <input checked="" type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish		
DATE 1-18-88	JOB DESCRIPTION TENANT IMPROVEMENT	PERMIT VALUE 350,000

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



PLOT PLAN APPROVED BY _____

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

By _____

PLUMBING PERMIT

GARDEN GROVE
Permit Services Department

Inspection Requests
623-6771

General Information
623-6563

For Applicant to Fill In

INSPECTION RECORD

REVISIONS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EACH	FEES	S FEE
Soil Piping	1-26-88	Arora	Water Closets (Toilet)	3			27.00
Ground Piping			Rash Tub				
			Shower				
Ground Piping	3/3/88	Arora	Laboratory (Wash Basin)	6			27.00
Flange Piping			Kit, an Sink	2			27.00
Cus Piping			Waste Disposal	1			4.50
Gas Vent			Flue Tub or Tray	2			9.00
Sewer			Water Heater				
Flue Drain and Vacuum Lines			Flange Sink				
Water Heater			Floor Drain				
Backwash			Dish Washer				
Water Lateral			Drinking Fountain				
			Urinal	2			9.00
			Gas System - Outlets	15			17.50
			Building Sewer (First 100 ft.)				
			Building Sewer (Add'l 100 ft.)				
			Building Sewer (ea. add'l drain)				
			Rainwater Drain				
			Swimming Pool Piping				
			Sand Traps/Receptors				
			Automatic Washing Machine				
			Water Softeners				
			Backwash - Trap				
			Water Lateral				
			Backflow Protective Devices				
			Water Piping (ea. 100 ft.)				
			Water Stopper, 5" (1 Drain)				
			Water Stopper, 3" (1 Drain)				
			Backflow Protective Device	1			7.50
FINAL	5-27-88	Arora	Backflow Protective Device	1			7.50
OFFICE							
NO. FEES							
IDENTIFICATION CODE							
TOTAL FEES							204.88

APPROVED BY: *[Signature]*
 AUTHORIZED BY: *[Signature]*
 DATE: 5-27-88
 TOTAL FEES: 204.88
 INSPECTOR: *[Signature]*

ADDRESS: 12101 Western Av, WESTLYN, CA 90045
 OWNER: SSANGYOUNG Corp, 12101 Western Garden Grove, GARDEN GROVE, CA 92646
 PHONE: 1552404
 PLUMBING CONTRACTOR: Dependable Plumbing, 2 McIver Ste 6, Irvine, CA 92618
 P-FEE: 114.00
 EXPIRATION DATE: 1/4/88
 BUSINESS TAX CERTIFICATE INFORMATION: License No. 219446
 I certify that I am exempt from Section 7001.5 of the Revenue and Professional Code, Chapter 9, Contractors' License Law, under the following Section: Other

WORKER'S COMPENSATION REQUIREMENTS
 State Compensation Insurance Policy No. 680876, Expiration Date 1/4/88
 I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner as to be described 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 of his permit shall be deemed to have been so notified.
 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 building construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or property damage resulting from work performed relevant to this permit.
 DATE: 12/1/88

INSPECTION RECORD
 I certify that the plumbing contractor's License No. 219446 and Certification is in full force and effect.
 I certify that I am exempt from Section 7001.5 of the Revenue and Professional Code, Chapter 9, Contractors' License Law, under the following Section: Other
 Employer Working for: [Blank]
 Other: [Blank]

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 12101 WESTERN AVE. PERMIT NO 155160A

USE OF BLDG TENANT IMPROVEMENTS W/ MESSAGING GROUP B2 TYPE VN

BLDG APPROVED BY TED ROBINSON DATE 4/29/88 USE ZONE PUD 105-71

ZONING REMARKS NONE

BLDG. OWNER SSANGYONG U.S.A. ADDRESS 2570 E. DEL AVO, COMPTON, 90221

STEWART O. MILLER BY [Signature] DATE 5/3/88

BLOG OFFICIAL

JOHN R. GUSTAFSON

POST IN A CONSPICUOUS PLACE

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 12101 WESTERN PERMIT NO 149766A

USE OF BLDG. TILT-UP WALL HOUSE/OFFICE GROUP 06 TYPE 01

BLDG. APPROVED BY TED ROBINSON DATE 8/11/77 USE ZONE M1D

ZONING REMARKS PUD 105-71

BLDG. OWNER MISSION LAWN ADDRESS 7495 ANACONDA, GARDEN GROVE

STEWART O. MILLER BY John Gustafson DATE 3/24/87
BLDG. OFFICIAL JOHN GUSTAFSON

POST IN A CONSPICUOUS PLACE

PWD-0012-11/75