



**CITY OF GARDEN GROVE
BUILDING SERVICES**

**8552 BARR LN
PERMIT#:10-1911
ISSUED:7/8/10**

General Info : 714-741-5307
Inspection Requests : 714-741-5332

Owner			Telephone		Zip	Building Address		
PAGKATIPUNAN, MARIA & SUSANA B					92841	8552 BARR LN		
Address			City		State	Suite/Unit/Building		
8552 BARR LN			Garden Grove		CA	TYPE Demo		ISSUED BY Yoav Shernock
Applicant			Telephone		Zip	Inspector Dist.	Parcel Number	LOT
A D CONSTRUCTION					90710	K9	21505205	TRACT
Address			City		State	Valuation		
1511 W 260TH ST			HARBOR CITY		CA	\$6,000.00		
State Licence	Expires	City Licence	Expires					
897357	N/A							
Contractor			Telephone		Zip	Final		
A D CONSTRUCTION					90710	Inspector's Signature EXPIRED		
Address			City		State	Date _____		
1511 W 260TH ST			HARBOR CITY		CA			
State Licence	Expires	City Licence	Expires					
897357	N/A							
Floor Area(sq. ft.)		Residential/Commercial						
		Residential						
Job Description								
DEMOLISH SWIMMING POOL IN REAR YARD OF RESIDENCE PER CITY POLICY								
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.								
X	Applicant's Signature							
	Print Name		Jose Diaz		Date 7/8/10			

	Description	Quantity	Amount
F E E S	General Plan Update Fee, Valuation		\$8.33
	Cultural Arts Fee, Valuation		\$4.17
	BSASRF State Fee		\$1.00
	Issuance Fee	1	\$35.00
	One-Stop Permit Center Surcharge		\$2.90
	Permit Fee		\$145.00
	TOTAL		\$196.40

This is a building permit when properly filled out, signed and validated, and is subject to expiration if work thereunder is suspended for 180 days.

EXPIRED

Permit Type: BLDG

ORIGINAL

APPLICATION FOR BUILDING PERMIT

APPLICANT TO FILL IN AREA WITHIN HEAVY LINES ONLY.

10M 11-60
COUNTY OF ORANGE 13873 1

BUILDING ADDRESS 8552 BARK LN. - Garden Grove
TOWN OR SCHOOL DISTRICT Alamitos Garden Grove
OWNER Wm K. Lane
MAILING ADDRESS 8552 BARK LN. PHONE 265-583
CITY Garden Grove
ARCHITECT OR ENGINEER DWK
ADDRESS 8552 BARK LN. G.C.
CONTRACTOR
ADDRESS

DESCRIPTION OF WORK
 NEW ADD ALTER REPAIR DEMOLISH
SIZE SQ. FT. 391
NO. OF STORIES 1
NO. OF FAMILIES 1
USE OF STRUCTURE PVT GARAGE ATTACHED
To Single Family Dwelling
LEGAL DESCRIPTION LOT BLOCK TRACT 5-108
 (PLEASE ATTACH METES AND BOUNDS)
 I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION I HAVE PROVIDED IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION.
SIGNATURE OF PERMITTEE Mrs Wm K Lane
ADDRESS 8552 BARK LN - G.C.

ZONING REGULATIONS
CHECKED BY WJ **DATE** 4-12-61 **DATE CLEARED** 4-12-61
PLOT PLAN FULLY DIMENSIONED? YES NO
ALL BUILDINGS SHOWN ON PLAN (PER APPLICANT)? YES
MAIN USE X ACC. USE **ZONE** R1 **DIST. N** 36-4-11
REQUIRED BUILDING SITE FRONTAGE? YES NO
BUILDING HEIGHT? STORIES ONE AND FEET
REQUIRED LAND AREA? YES NO
VARIANCE REQUESTED? NO APPROVED NO
STREET WIDTH 30' **CORNER LOT** **INT. LOT** X
BUILDING SETBACK CAL ST 12' **PROPERTY LINE** 9'
SIDE YARD, RIGHT 5' **EAVE PROJECTION**
SIDE YARD, LEFT 4' **EAVE PROJECTION**
REAR YARD (TO P.A.) 13' **WIDTH OF ALLEY** NONE
SEPARATION BETWEEN BUILDINGS: ATT TO DWELLING
CHIMNEY IN REQUIRED SIDE YARD PROJECTS
FENCE IN REQUIRED YARD PROJECTS
STAIRS IN REQUIRED YARD PROJECTS
PARKING AREA REQUIRED **CAPACITY, CARS** 2
REMARKS
 RP 133-022-01A
FOR OFFICE USE ONLY

VALUATION \$ 750.00

P.C. FEE	5	3
S.P.T. FEE	5	6

OCCUPANCY GROUP 5 **TYPE OF CONSTRUCTION** 5

INSPECTION RECORD

APPROVALS	DATE	INSPECTOR SIGNATURE
FOUNDATION: LOCATION FORMS AND MATERIALS	4-25-61	[Signature]
REINFORCED MASONRY OR CONCRETE		
BOND BEAM		
UNDERPINNING		
ROOF SHEATHING	6-27-61	[Signature]
ROOFING	6-27-61	[Signature]
FRAMING	6-27-61	[Signature]
LATH OR DRYWALL INTERIOR		
LATH EXTERIOR		
PLASTER BROWN COAT		
FINAL	3-6-62	[Signature]

PREPARED BY [Signature] **PLAN CHECKED BY** [Signature]

1. ROUTE IMMEDIATELY TO INSPECTOR OFFICE WORK COPY 3. STATISTICS FILE FOR COUNTER USE 4. OWNER'S COPY OF PERMIT

AS. BONHUIS - SUPERINTENDENT DEPARTMENT OF BUILDING AND SAFETY
SANTA ANA, CALIF. VALIDATION
HAROLD L. GOLDY ASSISTANT SUPERINTENDENT OF BUILDING AND SAFETY
 APR 12 1961 13873 6.00 1 3.00 7 9.00*
 PLAN CHECK TOTAL

APPLICATION FOR BUILDING PERMIT

1967-68
COUNTY OF
ORANGE

APPLICANT TO FILL IN AREA WITHIN HEAVY LINES ONLY.

ADDRESS 5552 BARR LN
CONTRACT GARDEN GROVE
OWNER Lum Lang
MAILING ADDRESS 5552 BARR LN PHONE 169661
CITY GARDEN GROVE
ARCHITECT OR ENGINEER E ESCALFE
ADDRESS 5140 CRENSHAW Blvd. L.A.
CONTRACTOR Sunset Pools
ADDRESS 1227 Brookhurst - Anaheim
ZONING REGULATIONS
CHECKED BY FODD **DATE** 7-6-61 **DATE CLEARED** 7-6-61
FLY PLAN FULLY DIMENSIONED? YES NO
ALL BUILDINGS SHOWN ON PLAN (PER APPLICANT)? YES
MAIN USE ACC USE **ZONE** R1 **DIST. N.** 36-4-11
REQUIRED BUILDING SITE FRONTAGE? YES NO
BUILDING HEIGHT? STORIES ONE AND FEET
REQUIRED LAND AREA? YES NO
VARIANCE REQUIRED? NO APPROVED NO
STREET WIDTH 60' **CORNER LOT** **INT LOT**
BUILDING SETBACK CAL. ST. 109' **PROPERTY LINE** 79'
SIDE YARD, RIGHT 5' **EAVE PROJECTION**
SIDE YARD, LEFT 5' **EAVE PROJECTION**
REAR YARD 5' **WIDTH OF ALLEY**
SEPARATION BETWEEN BUILDINGS 6' MIN.
CHIMNEY IN REQUIRED SIDE YARD PROJECTS
PORCH IN REQUIRED YARD PROJECTS
SCREENS IN REQUIRED YARD PROJECTS
PARKING AREA REQUIRED **CAPACITY** **CARS**
REMARKS: FENCES TO COMPLY WITH ORD.
 #111.
 AP133-0722 (D.M.A.)
FOR OFFICE USE ONLY

DESCRIPTION OF WORK

NEW **ADD** **ALTER** **REPAIR** **DEMOLISH**
SIZE 570 sq. ft. **NO. OF STORIES** 1 **NO. OF FAMILIES** 1
USE OF STRUCTURE Det. Swim Pool
LEGAL DESCRIPTION LOT 2 of 2 C.A. # 2 C.A. # 2
I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION I HAVE PROVIDED IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION.
SIGNATURE OF PERMITTEE A. J. Neckers
ADDRESS 1237 Brookhurst
VALUATION \$2,710.00
OCCUPANCY GROUP J
TYPE OF CONSTRUCTION IV
FEES: P.C. FEE \$ 6.00, S.P.T. FEE \$ 12.00
INSPECTION RECORD

APPROVALS	DATE	INSPECTOR SIGNATURE
FOUNDATION, LOCATION, FORMS AND MATERIALS	7-20-61	W. L. ...
ENFORCED REINFORCEMENT CONCRETE		
BOND BEAM		
UNDERPINNING		
ROOF SHEATHING		
ROOFING		
FRAMING		
LATH OR CITYWALL INTERIOR		
LATH EXTERIOR		
PLASTER BROWN COAT		
FINAL	OK 10-30-61	Pattin

RECEIVED BY [Signature]
PLAN CHECKED BY ESCALFE
PLAN CHECK NO. [Blank]
ROUTE IMMEDIATELY TO INSPECTOR (H.C.)
OFFICE WORK COPY
STATISTICS FILE FOR COUNTER USE
OWNER'S COPY OF PERMIT
Plot # 3474 filter

APPLICATION FOR BUILDING PERMIT

APPLICANT TO FILL IN AREA WITHIN HEAVY LINES ONLY.

104 11-80
COUNTY OF
ORANGE

1

BUILDING ADDRESS 8552 BARR LN
TOWN OR SCHOOL DISTRICT GARDEN GROVE
OWNER Lum Hanq
MAILING ADDRESS P.S. 52 BARR LN
CITY GARDEN GROVE
ARCHITECT OR ENGINEER E ESCALLE
ADDRESS 5140 CRENSHAW Blvd. I.A.
CONTRACTOR Sunset Pools
ADDRESS 1237 Brookhurst Avenue

DESCRIPTION OF WORK
 NEW ADD ALTER REPAIR DEMOLISH
SIZE SQ. FT. 570 sq ft AND OF STORES NO. OF FAMILIES
USE OF STRUCTURE Det. Swim Pool
LEGAL DESCRIPTION REF # 2 Copy
 (PLEASE ATTACH METES AND BOUNDS)
 I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION I HAVE PROVIDED IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION.
SIGNATURE OF PERMITTEE A. Joyce Neckworte
ADDRESS 1237 Brookhurst

ZONING REGULATIONS
CHECKED BY FAD **DATE** 7-6-61 **DATE CLEARED** 7-6-61
PLOT PLAN FULLY DIMENSIONED? YES NO
ALL BUILDINGS SHOWN ON PLAN (PER APPLICANT)? YES
MAIN USE ACC USE **ZONE** R1 **DIST** W 36-4-11

VALUATION \$2,710.
OCCUPANCY GROUP J
TYPE OF CONSTRUCTION AC
PC FEE \$ 6.00
BPT FEE \$ 12.00

REQUIRED BUILDING SITE FRONTAGE YES NO
BUILDING HEIGHT STORIES ONE AND FEET
REQUIRED LAND AREA YES NO
VARIANCE REQUIRED? NO APPROVED NO
STREET WIDTH 60' **CORNER LOT** **INT LOT**
BUILDING SETBACK C/L ST 109' **PROPERTY LINE** 79'
SIDE YARD, RIGHT 29' 1" **EAVE PROJECTION**
SIDE YARD, LEFT 5' **EAVE PROJECTION**
REAR YARD (TO P/L) 31' 3" 1/2 **WIDTH OF ALLEY**
SEPARATION BETWEEN BUILDINGS 6' MIN.
CHIMNEY IN REQUIRED SIDE YARD PROJECTS
POUCH IN REQUIRED YARD PROJECTS
STAIRS IN REQUIRED YARD PROJECTS
PARKING AREA REQUIRED CAPACITY CARS
REMARKS FENCES TO COMPLY WITH ORD. #984.
 AP133-022-(D/M/A)

INSPECTION RECORD

APPROVALS	DATE	INSPECTOR SIGNATURE
FOUNDATION, LOCATION, FORMS AND MATERIALS	7-20-61	J. C. (Signature)
REINFORCED CONCRETE		
BOND BEAM		
UNDERPINNING		
ROOF SHEATHING		
ROOFING		
FRAMING		
LATH OR BRICKWALL INTERIOR		
LATH EXTERIOR		
PLASTER BROWN COAT		

RECEIVED BY J.H.
PLAN CHECKED BY EKL02
PLAN CHECK RECEIPT NO.
1. ROUTE IMMEDIATELY TO INSPECTOR (J.C.)
2. OFFICE WORK COPY
3. STATISTICS FILE FOR COUNTER USE
4. OWNER'S COPY OF PERMIT
 Plot # 3474 filter

FINAL O.K. 10-30-61 (Signature)

APPLICATION FOR ELECTRICAL PERMIT

APPLICANT TO FILL IN AREA WITHIN HEAVY LINES ONLY.

28M 5-61
COUNTY OF
ORANGE

BUILDING ADDRESS: **2552 BARR Lane**

TOWN OR SCHOOL DIST: **GARDEN GROVE**

NEAREST CROSS STREET: _____

OWNER: **Lamy**

PROPOSED USE: **Pool** PRESENT USE: _____

RESIDENTIAL (SINGLE OR MULTI-FAMILY NEW)	FEES
AREA IN SQUARE FEET	
GARAGES NEW (RESIDENTIAL OR MULTI-FAMILY USE)	
AREA IN SQUARE FEET	
COOKING APPLIANCES - NO. OF WATTAGE EACH	
HEATING APPLIANCES - NO. OF WATTAGE EACH	
HOME APPLIANCES - NAME EACH	
FIXTURES - NO. OF	20
OUTLETS - NO. OF	40
SIGNS & HP GAS TUBE LIGHTING	
POLES (PERMANENT CONSTRUCTION TEMPORARY UNDER GROUND)	
GENERATORS - NO. OF KW. EACH	
TRANSFORMERS - NO. OF KW. EACH	
MOTORS - NO. OF LIST UNDER MISCELLANEOUS	
MISCELLANEOUS AND LIST OF MOTORS	
3/4 motor	1.00
time clock	1.00
NUMBER OF SERVICES	
(IF UNITS TO BE SEPARATELY METERED - LIST AS NUMBER OF SERVICES)	
PERMIT ISSUANCE	1.00
TOTAL FEE	3.60

TRACT _____ LOT NO. _____

CONTRACTOR: **NORWALK Elect**

ADDRESS: **12348 SPY**

CITY: **NORWALK** TEL. NO.: **UNB 1100**

STATE LICENSE NO.: **210 201278** EXPIRATION DATE: _____

DATE READY FOR FIRST INSPECTION: _____

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION PROVIDED IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.

I CERTIFY THAT I POSSESS THE ABOVE VALID STATE LICENSE OR I AM THE LEGAL OWNER OF THE RESIDENTIAL PROPERTY HEREIN DESCRIBED.

SIGNATURE OF PERMITTEE: **J. A. Staley**

METERS AND SERVICES	LIGHT	POWER	AC & RFG	VOLT	PHASE

INSPECTION RECORD

8-25-61 13A

Core gate

APPROVALS	DATE	INSPECTION SIGNATURE
CONDUIT	8-9-61	Patte
UNDERGROUND	8-9-61	
WIRING	8-9-61	
FIXTURES		
POWER		
FINAL APPROVAL	9-6-61	Patte
UTILITY NOTIFIED		

BLDG. PT. NO.: **2512**

REC. BY: **ME**

C. W. DONOHUE, SUPERINTENDENT
DEPARTMENT OF BUILDING AND SAFETY

100 W. 8TH ST. SANTA ANA, CALIF. KI 3-934

HAROLD L. GOLDBY
ASSISTANT SUPERINTENDENT OF
BUILDING AND SAFETY

OCT 8 1961

JUL 19 '61

2647

3.60 2

3.60*

DATE PERMIT NO. PERMIT FEE CODE PLAN CHECK TOTAL

APPLICATION FOR PLUMBING PERMIT

APPLICANT TO FILL IN AREA WITHIN HEAVY LINES ONLY.

COUNTY OF ORANGE

1

BUILDING ADDRESS 8552 BARR LN	TRACT	LOT NO.	BLDG. USE <i>Residential</i>
TOWN OR AREA GARDEN GROVE	PLUMBER Sunset Pools		
NEAREST CROSS STREET DATE AND CHAPMAN	ADDRESS 1237 BROOKHURST		
OWNER Wm Lang	CITY Arden	TEL. NO.	
	STATE LICENSE NUMBER 144380	EXPIRATION DATE	

PERMIT FEES

NO	TYPE OF FIXTURE OR ITEM	FEE
	WATER CLOSET (TOILET)	\$
	BATH TUB	
	SHOWER	
	LAVATORY (WASH BASIN)	
	KITCHEN SINK <input type="checkbox"/> GARBAGE DISPOSAL <input type="checkbox"/>	
	LAUNDRY TRAY <input type="checkbox"/> AUTO. WASH. MACH. <input type="checkbox"/>	
	DISHWASHER	
	AUTO. FIRE SPR. SYSTEM - VALUATION	
	SERVICE SINK	
	FLOOR SINK	
	FLOOR DRAIN	
	DRINKING FOUNTAIN	
	URINAL	
	SAND TRAPS	
1	SWIMMING POOL	150
	MISCELLANEOUS	2
	LAWN SPRINKLERS (VALUATION)	
	USED WATER HEATER TEST (\$2.00)	
	WATER SOFTENERS (\$2.00)	
	TRAILER HOOK-UPS - (\$2.50 EA.)	
	GAS OUTLETS - TRAILER SITES - (.50 EA.)	
	GAS SYSTEM (\$1.00 EA.) - NAT. <input type="checkbox"/> L.P.G. <input type="checkbox"/>	
	WATER HEATER (\$2.00)	
	HOUSE SEWER (VALUATION)	
	CESPOOL (\$2.00)	
	SEPTIC TANK (\$2.00)	
	DRAIN <input type="checkbox"/> PIT <input type="checkbox"/> (\$2.00)	

DATE READY FOR FIRST INSPECTION

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE INFORMATION I HAVE PROVIDED IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING

I CERTIFY THAT I POSSESS THE ABOVE VALID STATE LICENSE AND PRESENT HERewith MY STATE LICENSE REGISTRATION CARD AS PROOF THEREOF OR I AM THE OWNER OF THE RESIDENTIAL PROPERTY DESCRIBED HEREIN

X Sunset Pools by A. Mackworth
SIGNATURE OF PERMITTEE

INSPECTION RECORD

APPROVALS	DATE	INSPECTOR'S SIGNATURE
GROUND WORK - CONCRETE	7-20-61	<i>X. Welch</i>
GROUND WORK WITH WATER PIPE <input type="checkbox"/> GAS PIPE <input type="checkbox"/>		
ROUGH PLUMBING		
GAS PIPING TO		
USED WATER HEATER TEST		
SEPTIC TANK		
CESPOOL		
SEWER		
GAS TEST		
UTILITY CO. NOTIFIED		
FINAL	9-20-61	<i>Bessler</i>

BUILDING PERMIT NO. **2512** TOTAL FEE **\$3.50**

C. W. DONOHUE - SUPERINTENDENT DEPARTMENT OF BUILDING AND SAFETY 204 1/2 N. BROADWAY SANTA ANA, CALIF. HAROLD L. GOLDY - ASST. SUPT. DEPARTMENT OF BUILDING AND SAFETY

VALIDATION

JUL 6'61 3474 3.50 \$ 3.50 \$

REGIONAL OFFICE
22921 TRITON WAY
LAGUNA HILLS, CA 92653
(714) 472-7979

RESIDENTIAL BUILDING PERMIT
COUNTY OF ORANGE
ENVIRONMENTAL MANAGEMENT AGENCY
REGULATION

CENTRAL OFFICE
12 CIVIC CENTER PLAZA
SANTA ANA, CA 92702-4048
(714) 834-2626

PERMIT NUMBER: RS9110080007 ISSUE DATE: 11/06/91

This Permit shall become void if work is not commenced within 180 days of issuance.

JOB ADDRESS: 8552 BARR LN GARDEN GROVE COUNTY AREA: GGR
NEAREST CROSS STREETS: DALE/LAMPSON
APPLICANTS NAME: **ANDRONESI, IERONIM** PERMITTEE NAME: **ANDRONESI, IERONIM**
ADDRESS: **8552 BARR GARDEN GROVE** PHONE: **714-534-5959** RELATED PERMIT:
WORK AUTHORIZED: TYPE OF PROJECT:
PRESENT USE: **EXIST SFD W/ATT GAR** CODE YEAR: **0 PROJ/APPL: UP91039**
SCOPE OF WORK: **NEW 2ND UNIT W/ATT GARAGE ***
CT: APN: **215 052 05 SUPER. DIST.: 2 FLOOD PLAIN NO.: CLIMATE ZONE:**
ZONE: **R1 TOWN 4 RANGE 11 SECT 36**
LOT NOS.:

OWNER: **ANDRONESI, IERONIM**
ADDRESS: **13231 BENTON GARDEN GROVE**
PHONE: **714-534-5959**

ADDRESS:
LICENSE NO.: PHONE: - -

ADDRESS:
LICENSE NO.: PHONE: - -

CLASS	TYPE	OCC	CODE	USE/OCCUPANCY	SIZE
R3	05	27		2ND DWLG UNIT	640
M1	05	17		GAR	462

TOTAL VALUATION: **38,351.20**

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: LIC NO: LIC CL:

STRUC HEIGHT: **15.00** NBR OF STORIES: **0**
NBR OF FAMILIES: **1** (FOR NEW PERMITS ONLY)
GRADING PMT. REQUIRED: **N** ROUGH GRADING REL.:

ADDRESS:
PHONE: DATE: CONTRACTOR:
CONSTRUCTION LENDING AG:

ZONING INFORMATION

I hereby affirm 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: ADDRESS:

C/L STREET SETBACK:
FRONT P/L SETBACK: **20'**
SIDE YARD RIGHT: **EXIST**
SIDE YARD LEFT: **5'**
REAR YARD (TO P/L): **EXIST**
REQ'D PARKING SPACES OPEN: **0**
ZONING APPROVED BY: **LLM** DATE: **11/06/91**
EAVE PROJ: **GARAGE**
EAVE PROJ: **SFD**
COVERED: **2**

OWNER-BUILDER DECLARATION
I hereby affirm that I am exempt from the Contractor's License Law for the following reason:
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.
I, as owner of the property, am exclusively contracting with licensed contractors to construct this project.
I am exempt under Sec. **B&PC** for this reason

FEE INFORMATION

DATE: Owner: *Andronesi*

DESCRIPTION	QUANTITY	AMOUNT
RESIDENTIAL PLAN CK	30035.20	414.04
RESID BUILDING PERMT	30035.20	487.10
TOTAL FEES:		901.14
CRTA:		281447
REVISION 01 - 11/06/91		
RESIDENTIAL PLAN CK	38351.20	472.52
RESID BUILDING PERMT	38351.20	68.80
PRIOR PLN CK ADJUST	30035	414.04
TOTAL FEES:		127.28
CRTA:		281454

WORKERS-COMPENSATION DECLARATION
I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof.
COMPANY: POL NO: DATE EXP: / /
DATE: APPL/PERMT: VER BY:

REMARKS: **NEW 2ND UNIT 640SQFT W/ATT 462SQFT. GAR. ACCESS TO EXIST SFD W/ATT GAR**

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE
(This section need to be completed if permit for \$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 Workers' Compensation Laws of CA.
DATE: APPL/PERMT:

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Comp. provisions of the Labor Code, you must forthwith comply with such provisions or this 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 COUNTY ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS COUNTY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES.
DATE: APPL/PERMT:
APPL/PERMT AGENTS NAME:

SEP 17 1992

TYPE INSPECTION

INSPECTION RECORDS

PLUMBING	DATE	APRV./INSPR'S SIG.	REMARKS
GROUND SOIL	2-9-92	W. H. H. H.	
GROUND WATER			
TOP OUT	2-25-92	W. H. H. H.	
SEWER			
GAS TEST			
SANI.-DIST. CERT. REQ'D.			

MECHANICAL	DATE	APRV./INSPR'S SIG.	REMARKS
FINAL PLUMBING	9-16-92	W. H. H. H.	
UNDERGROUND			
ROUGH	6-25-92	W. H. H. H.	
COMB VENT			
AIR COND			

ELECTRICAL	DATE	APRV./INSPR'S SIG.	REMARKS
FINAL MECHANICAL	9-16-92	W. H. H. H.	
TEMP CONSTN POWER			
UNDERGROUND			
WIRING - D.E.C.			
ROUTING RECEIPT	8-25-92	W. H. H. H.	
SPACING-SERVICE-CIRCUIT			
FIXTURES-TRIM-BONDINGS			
POOL LIGHT			
REQ'D FENCE/WALL			

STRUCTURAL	DATE	APRV./INSPR'S SIG.	REMARKS
FINAL ELECTRICAL	8-26-92	W. H. H. H.	
FOUNDATION LOCATION			
REINFORCED			
SLAB: REINFORCED	1-26-92	W. H. H. H.	
SLAB: MEMBRANE			
UNDERPINNING			
MASONRY BOND BEAM			
FIREPLACE			

ROOF FRAMING	1-11-92	W. H. H. H.	Shoe off to W. H. H.
ROOF SHEATHING			
FRAMING	8-25-92	W. H. H. H.	Needs to Review Plans
INSULATION SOUND/ENERGY	8-25-92	W. H. H. H.	
LATH EXTERIOR			
LATH INTERIOR	1-15-92	W. H. H. H.	
RYMALL			
PLASTER BROWN COAT	8-11-92	W. H. H. H.	

BUILDING FINAL	9-15-92	W. H. H. H.	
DRIVING FINAL			

REGIONAL OFFICE
22921 BRITON WAY
LAGUNA HILLS, CA 92633
(714) 472-7979

RESIDENTIAL BUILDING PERMIT
COUNTY OF ORANGE
ENVIRONMENTAL MANAGEMENT AGENCY
REGULATION

CENTRAL OFFICE
12 CIVIC CENTER PLAZA
SANTA ANA, CA 92702-4048
(714) 834-2626

PERMIT NUMBER: RS9104030018 ISSUE DATE: 04/03/91

This Permit shall become void if work is not commenced within 180 days of issuance.

JOB ADDRESS: 8552 BARR LN GARDEN GROVE COUNTY AREA:

NEAREST CROSS STREETS: LAMPSON/DALE
APPLICANTS NAME: IERONIM ANDRONESI
ADDRESS:

PERMITEE NAME:
RELATED PERMIT:
TYPE OF PROJECT:
CODE YEAR: 1988 PROJ/APPL:

WORK AUTHORIZED:
PRESENT USE: SED W/ATT GARAGE
SCOPE OF WORK: NEW ROOF
CT: APN: 215 052 05 SUPER. DIST.: 2 FLOOD PLAIN NO.: CLIMATE ZONE:
ZONE: R1 TOWN 4 RANGE 11 SECT 36
LOT NOS.:

OWNER: IERONIM ANDRONESI
ADDRESS: 8552 BARR LN.
GARDEN GROVE 92640
PHONE: 714-534-5959

ADDRESS:
LICENSE NO.: PHONE: - -

ADDRESS:
LICENSE NO.: PHONE: - -

OCC CLASS	TYPE CONST	OCC CODE	USE/OCCUPANCY	SIZE SQ. FT.
R3	05	27	ROOF & ROOF STR	1900

TOTAL VALUATION: 20,000.00

STRUC HEIGHT: 15.00 NBR OF STORIES: 0
NBR OF FAMILIES: 0 (FOR NEW PERMITS ONLY)
GRADING PMT. REQUIRED: N ROUGH GRADING REL.:

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: _____ LIC NO: _____ LIC CL: _____
ADDRESS: _____
PHONE: _____ DATE: _____ CONTRACTOR: _____

ZONING INFORMATION
C/L STREET SETBACK:
FRONT P/L SETBACK: _____ EAVE PROJ:
SIDE YARD RIGHT: _____ EAVE PROJ:
SIDE YARD LEFT: _____ EAVE PROJ:
REAR YARD (TO P/L): _____ EAVE PROJ:
REQ'D PARKING SPACES: _____ COVERED: 0
ZONING APPROVED BY: _____ DATE: 04/03/91

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. 3097, Civ. C)
LENDERS NAME: _____ ADDRESS: _____

PERMIT INFORMATION

DESCRIPTION	QUANTITY	AMOUNT
RESIDENTIAL PLAN CK	20000.00	135.90
RESID BUILDING PERMT	20000.00	226.50

OWNER-BUILDER DECLARATION
I hereby affirm that I am exempt from the Contractor's License Law for the following reason:
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.
I, as owner of the property, am exclusively contracting with licensed contractors to construct this project.
I am exempt under Sec. _____, B&PC for this reason
DATE: _____ Owner: _____

REMARKS:

WORKERS COMPENSATION DECLARATION
I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof.
COMPANY: _____ POL NO: _____ DATE EXP: / /
DATE: _____ APPL/PERMT: _____ VER BY: _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE
(This section need to be completed if permit for \$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 Workers' Compensation Laws of CA.
DATE: _____ APPL/PERMT: _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Comp. provisions of the Labor Code, you must forthwith comply with such provisions or this 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 COUNTY ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS COUNTY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION/PURPOSES.
DATE: _____ APPL/PERMT: _____
APPL/PERMT AGENTS NAME: _____

INSPECTION RECORDS

TYPE INSPECTION	DATE	APRV./INSPR'S SIG.	REMARKS
PLUMBING			
GROUND SOIL			
GROUND WATER			
TOP OUT			
SEWER			
GAS TEST			
SANI.-DIST. CERT. REQ'D.			
FINAL PLUMBING			
MECHANICAL			
UNDERGROUND			
ROUGH			
COMB VENT			
AIR COND			
FINAL MECHANICAL			
ELECTRICAL			
TEMP CONSTN POWER			
UNDERGROUND PVC - METAL - D.B.C.			
ROUGH WIRING RECEIPT	7-9-91	<i>W. Ireland</i>	
SPACING-SERVICE-CIRCUIT			
FIXTURES-TRIM-BONDINGS			
POOL LIGHT			
REQ'D FENCE/WALL			
FINAL ELECTRICAL	7-26-92	<i>W. Ireland</i>	
STRUCTURAL			
FOUNDATION LOCATION			
REINFORCED			
SLAB: REINFORCED			
SLAB: MEMBRANE			
UNDERPINNING			
MASONRY BOND BEAM			
FIREPLACE			
ROOF FRAMING	5-9-91	<i>W. Ireland</i>	
ROOF SHEATHING	5-9-91	<i>W. Ireland</i>	
FRAMING	7-9-91	<i>W. Ireland</i>	
INSULATION SOUND/ENERGY	7-23-91	<i>W. Ireland</i>	
LATH EXTERIOR			
LATH INTERIOR	7-11-91	<i>W. Ireland</i>	
DRYWALL			Shed Drywall Complete
PLASTER BROWN COAT			
BUILDING FINAL	2/26/92	<i>W. Ireland</i>	
ZONING FINAL			

REGIONAL OFFICE
22921 TRITON WAY
LAGUNA HILLS, CA 92633
(714) 472-7979

RESIDENTIAL BUILDING PERMIT
COUNTY OF ORANGE
ENVIRONMENTAL MANAGEMENT AGENCY
REGULATION

CENTRAL OFFICE
12 CIVIC CENTER PLAZA
SANTA ANA, CA 92702-4048
(714) 834-2626

PERMIT NUMBER: RS9102210019 ISSUE DATE: 02/21/91

This Permit shall become void if work is not commenced within 180 days of issuance.

JOB ADDRESS: 8552 BARR LN GARDEN GROVE COUNTY AREA:

NEAREST CROSS STREETS: DALE/LAMPSON
APPLICANTS NAME: IERONIM ANDRONESE
ADDRESS:

PHONE: - -

PERMITTEE NAME:
RELATED PERMIT:
TYPE OF PROJECT:
CODE YEAR: 1988 PROJ/APPL:

WORK AUTHORIZED:

PRESENT USE: SFD

SCOPE OF WORK: ROOM ADDITION AND NEW TWO CAR GARAGE

CT: APN: 215 052 05 SUPER. DIST.: 2 FLOOD PLAIN NO.: CLIMATE ZONE:
ZONE: R1 TOWN 4 RANGE 11 SECT 36
LOT NOS.:

OWNER: IERONIM ANDRONESE

ADDRESS:

PHONE: - -

ADDRESS:

LICENSE NO.: PHONE: - -

ADDRESS:

LICENSE NO.: PHONE: - -

OCC CLASS	TYPE CONST	OCC CODE	USE/OCCUPANCY	SIZE SQ. FT.
M1	05	17	GARAGE	440
R3	05	27	ROOM ADDITION	216
M1	05	27	PATIO COVER	300

TOTAL VALUATION: 20,480.88

STRUC HEIGHT: 12.00 NBR OF STORIES: 0
NBR OF FAMILIES: 0 (FOR NEW PERMITS ONLY)
GRADING PMT. REQUIRED: N ROUGH GRADING REL.:

ZONING INFORMATION

C/L STREET SETBACK:
FRONT P/L SETBACK: 73 EAVE PROJ:
SIDE YARD RIGHT: 5 EAVE PROJ:
SIDE YARD LEFT: 5.5 EAVE PROJ:
REAR YARD (TO P/L): 12.5 EAVE PROJ:
REQ'D PARKING SPACES OPEN: 0 COVERED: 2
ZONING APPROVED BY: LLM DATE: 02/21/91

FE INFORMATION

DESCRIPTION	QUANTITY	AMOUNT
RESIDENTIAL PLAN CK	20480.88	142.20
RESID BUILDING PERM	20480.88	237.00
TOTAL FEES:		379.20
CRTA:		264102
REVISION 01 - 05/07/91		
ELECTRIC SVCS MET	1	11.44
TEMP WORK WITH SVCS		33.28
TOTAL FEES:		44.72
CRTA:		269389

REMARKS: ADDITION OF NEW MASTER BEDROOM AND BATH AND NEW TWO CAR GARAGE (ATTACHED) AND PATIO COVER ACC TO SFD 5-9-91 ADD METER CHANGE OUT

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: _____ LIC NO: _____ LIC CL: _____

ADDRESS: _____
PHONE: _____ DATE: _____ CONTRACTOR: _____
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. 3097, Civ. C.)

LENDERS NAME: _____ ADDRESS: _____

OWNER-BUILDER DECLARATION
I hereby affirm that I am exempt from the Contractor's License Law for the following reason:

- 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.
- I, as owner of the property, am exclusively contracting with licensed contractors to construct this project.
- I am exempt under Sec. _____ B&PC for this reason

DATE: 02-09-91 Owner: *I. Androne*

WORKERS COMPENSATION DECLARATION
I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof.

COMPANY: _____ POL NO: _____ DATE EXP: 1/1
DATE: _____ APPL/PERMT: _____ VER BY: _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE
(This section need to be completed if permit for \$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 Workers' Compensation Laws of CA.
DATE: 02-09-91 APPL/PERMT: _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Comp. provisions of the Labor Code, you must forthwith comply with such provisions or this 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 COUNTY ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS COUNTY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES.

DATE: 02-09-91 APPL/PERMT: _____
APPL/PERMT AGENTS NAME: _____

FEB 21 1991

TYPE INSPECTION		INSPECTION RECORDS		
PLUMBING	DATE	APRV./INSPR'S SIG.	REMARKS	
GROUND SOIL				
GROUND WATER				
TOP OUT				
SEWER				
GAS TEST				
SANI.-DIST. CERT. REQ'D.				
FINAL PLUMBING	7-26-92	<i>[Signature]</i>		
MECHANICAL	DATE	APRV./INSPR'S SIG.	REMARKS	
UNDERGROUND				
ROUGH				
COMB VENT				
AIR COND				
FINAL MECHANICAL	2-26-92	<i>[Signature]</i>		
ELECTRICAL	DATE	APRV./INSPR'S SIG.	REMARKS	
TEMP CONSTN POWER				
UNDERGROUND				
PVC - METAL - D B C				
ROUGH WIRING RECEIPT				
SPACING-SERVICE-CIRCUIT				
FIXTURES-TRIM-BONDINGS				
POOL LIGHT				
REQ'D FENCE/WALL				
FINAL ELECTRICAL	2-26-92	<i>[Signature]</i>		
STRUCTURAL	DATE	APRV./INSPR'S SIG.	REMARKS	
FOUNDATION LOCATION				
REINFORCED				
SLAB: REINFORCED				
SLAB: MEMBRANE				
UNDERPINNING				
MASONRY BOND BEAM				
FIREPLACE				
ROOF FRAMING				
ROOF SHEATHING				
FRAMING				
INSULATION SOUND/ENERGY				
LATH EXTERIOR				
LATH INTERIOR				
DRYWALL				
PLASTER BROWN COAT				
BUILDING FINAL	7-26-92	<i>[Signature]</i>		
ZONING FINAL				

REGIONAL OFFICE
22921 TRITON WAY
LAGUNA HILLS, CA 92633
(714) 472-7979

RESIDENTIAL BUILDING PERMIT
COUNTY OF ORANGE
ENVIRONMENTAL MANAGEMENT AGENCY
REGULATION

CENTRAL OFFICE
12 CIVIC CENTER PLAZA
SANTA ANA, CA 92702-4048
(714) 834-2626

PERMIT NUMBER: RS9102210019 ISSUE DATE: 02/21/91

This Permit shall become void if work is not commenced within 180 days of issuance.

JOB ADDRESS: 8552 BARR LN
NEAREST CROSS STREETS: DALE/LAMPSON
APPLICANTS NAME: IERONIM ANDRONESI
ADDRESS:

GARDEN GROVE

COUNTY AREA:

WORK AUTHORIZED:
PRESENT USE: SFD

SCOPE OF WORK: ROOM ADDITION AND NEW TWO CAR GARAGE
APN: 215 052 05 SUPER. DIST.: 2 FLOOD PLAIN NO.:
ZONE: R1 TOWN 4 RANGE 11 SECT 36
LOT NOS.:

PERMITTEE NAME:
RELATED PERMIT:
TYPE OF PROJECT:
CODE YEAR: 1988 PROJ/APPL:

CLIMATE ZONE:

OWNER: IERONIM ANDRONESI
ADDRESS:

ADDRESS:

PHONE: - -

LICENSE NO.: PHONE: - -

ADDRESS:
LICENSE NO.: PHONE: - -

OCC CLASS	TYPE CONST	OCC CODE	USE/OCCUPANCY	SIZE SQ. FT.
M1	05	17	GARAGE	440
R3	05	27	ROOM ADDITION	216
M1	05	27	PATIO COVER	300

TOTAL VALUATION: 20,480.88

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 Profession Code and my license is in full force and effect.
CONTRACTOR: LIC NO: LIC CL:

STRUC HEIGHT: 12.00 NBR OF STORIES: 0
NBR OF FAMILIES: 0 (FOR NEW PERMITS ONLY)
GRADING PMT. REQUIRED: N ROUGH GRADING REL.:

ADDRESS:
PHONE: DATE: CONTRACTOR:
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. 3097, Civ. C)
LENDERS NAME: ADDRESS:

ZONING INFORMATION

C/L STREET SETBACK: FRONT P/L SETBACK: 73
SIDE YARD RIGHT: 5 EAVE PROJ:
SIDE YARD LEFT: 5.5 EAVE PROJ:
REAR YARD (TO P/L): 12.5 EAVE PROJ:
REQ'D PARKING SPACES OPEN: 0 COVERED: 2
ZONING APPROVED BY: LLM DATE: 02/21/91

OWNER-BUILDER DECLARATION
I hereby affirm that I am exempt from the Contractor's License Law for the following reason:
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.
I, as owner of the property, am exclusively contracting with licensed contractors to construct this project.
I am exempt under Sec. B&PC for this reason

FEE INFORMATION

DESCRIPTION	QUANTITY	AMOUNT
RESIDENTIAL PLAN CK	20480.88	142.20
RESID BUILDING PERMT	20480	237.00

DATE: 02-21-91 Owner: I. Andronesi

WORKERS COMPENSATION DECLARATION
I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof.

COMPANY: POL NO: DATE EXP: / /
DATE: APPL/PERMT: VER BY:

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE
(This section need to be completed if permit for \$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 Workers' Compensation Laws of CA.
DATE: APPL/PERMT:

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Comp. provisions of the Labor Code, you must forthwith comply with such provisions or this 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 COUNTY ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS COUNTY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES.

DATE: 02-21-91 APPL/PERMT: I. Andronesi
APPL/PERMT AGENT NAME:

REMARKS: ADDITION OF NEW MASTER BEDROOM AND BATH AND NEW TWO CAR GARAGE (ATTACHED) AND PATIO COVER ACC TO SFD

FEB 21 1991

REGIONAL OFFICE
22921 TRITON WAY
LAGUNA HILLS, CA 92633
(714) 472-7979

RESIDENTIAL BUILDING PERMIT
COUNTY OF ORANGE
ENVIRONMENTAL MANAGEMENT AGENCY
REGULATION

CENTRAL OFFICE
12 CIVIC CENTER PLAZA
SANTA ANA, CA 92702-6048
(714) 834-2626

PERMIT NUMBER: RS9102150004 ISSUE DATE: 02/15/91

This Permit shall become void if work is not commenced within 180 days of issuance.

JOB ADDRESS: 8552 BARR LN GARDEN GROVE COUNTY AREA:
NEAREST CROSS STREETS: DALE/LAMPSON
APPLICANTS NAME: IERONIM ANDRONESI PERMITTEE NAME:
ADDRESS: PHONE: - - RELATED PERMIT:
TYPE OF PROJECT:
CODE YEAR: 1988 PROJ/APPL:

WORK AUTHORIZED:
PRESENT USE: SFD
SCOPE OF WORK: ADDITION OF MASTER BDRM, DEN, BEDROOM
CT: APN: 215 052 05 SUPER. DIST.: 2 FLOOD PLAIN NO.: CLIMATE ZONE:
ZONE: R1 TOWN 4 RANGE 11 SECT 36
LOT NOS.:

OWNER: IERONIM ANDRONESI
ADDRESS:
PHONE: - -

ADDRESS:
LICENSE NO.: PHONE: - -

ADDRESS:
LICENSE NO.: PHONE: - -

OCC CLASS	TYPE CONST	OCC CODE	USE/OCCUPANCY	SIZE SQ. FT.
R3	05	27	ROOM ADDITION(SPECIAL INVESTI)	490

Special Services

TOTAL VALUATION: 22,995.70

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: LIC NO: LIC CL:
ADDRESS:
PHONE: DATE: CONTRACTOR:
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. 3097, Civ. C)
LENDERS NAME: ADDRESS:
OWNER-BUILDER DECLARATION
I hereby affirm that I am exempt from the Contractor's License Law for the following reason:
X 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.
I, as owner of the property, am exclusively contracting with licensed contractors to construct this project.
I am exempt under Sec. B&PC for this reason

STRUC HEIGHT: .00 NBR OF STORIES: 0
NBR OF FAMILIES: 0 (FOR NEW PERMITS ONLY)
GRADING PMT. REQUIRED: N ROUGH GRADING REL.:

DATE: 02-15-91 Owner: *I. Andronesi*
WORKERS COMPENSATION DECLARATION
I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof.
COMPANY: POL NO: DATE EXP: 11
DATE: APPL/PERMT: VER BY:

ZONING INFORMATION
C/L STREET SETBACK: FRONT P/L SETBACK: 50 EAVE PROJ:
SIDE YARD RIGHT: EAVE PROJ:
SIDE YARD LEFT: 5 EAVE PROJ:
REAR YARD (TO P/L): 17 COVERED: 0
REQ'D PARKING SPACES OPEN: DATE: 02/15/91
ZONING APPROVED BY: LLM

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE
(This section need to be completed if permit for \$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 Workers' Compensation Laws of CA.
DATE: 02-15-91 APPL/PERMT: *I. Andronesi*

FEE INFORMATION

DESCRIPTION	QUANTITY	AMOUNT
RESIDENTIAL PLAN CK	22995.70	154.80
RESID BUILDING PERMT	22995.70	258.00

Interview
Final
3/28/91

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Comp. provisions of the Labor Code, you must forthwith comply with such provisions or this 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 COUNTY ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS COUNTY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES.
DATE: 02-15-91 APPL/PERMT: *I. Andronesi*
APPL/PERMT AGENT NAME: IERONIM ANDRONESI

REMARKS: LEGAL NON-CONFORMING BUILT IN 50'S
SPECIAL INVESTIGATION INVOLVED SEE HANK ONTEVAROS. STANDARD PLAN & INSPECTION FEES USED PER CONV. W/ NORMA.
SUBJECT TO FIELD APP ROVAL.

FEB 15 1991

REGIONAL OFFICE
22921 TRITON WAY
LAGUNA HILLS, CA 92633
(714) 472-7979

CERTIFICATE OF USE AND OCCUPANCY
COUNTY OF ORANGE
ENVIRONMENTAL MANAGEMENT AGENCY
REGULATION

CENTRAL OFFICE
12 CIVIC CENTER PLAZA
SANTA ANA, CA 92702-4048
(714) 834-2626

JOB ADDRESS: 8552 BARR LN GARDEN GROVE
BUILDING PERMIT NUMBER: RS9102150004 ISSUE DATE: 03/27/91
ADDRESS: TOWN 4 RANGE 11 SECT 36
USE: ADDITION OF MASTER BDRM, DEN, BEDROOM
ISSUED TO OWNER: IERONIM ANDRONESI PHONE: - -

The building described herein has been inspected and found to comply with provisions of all County of Orange Ordinances applicable thereto.

THIS IS A LEGAL DOCUMENT AND MUST BE GIVEN TO THE LEGAL OWNER OR PURCHASER.
MAIL TO:

IERONIM ANDRONESI

Floyd G. McLellan

County Building Official

CERTIFICATE OF USE AND OCCUPANCY

Environmental Management Agency

P.O. Box 4048

12 Civic Center Plaza

Santa Ana, California 92702-4048

REGIONAL OFFICE
22921 TRITON WAY
LAGUNA HILLS, CA 92633
(714) 472-7979

RESIDENTIAL BUILDING PERMIT
COUNTY OF ORANGE
ENVIRONMENTAL MANAGEMENT AGENCY
REGULATION

CENTRAL OFFICE
12 CIVIC CENTER PLAZA
SANTA ANA, CA 92702-404B
(714) 834-2626

PERMIT NUMBER: RS9102150004 ISSUE DATE: 02/15/91

This Permit shall become void if work is not commenced within 180 days of issuance.

JOB ADDRESS: 8552 BARR LN GARDEN GROVE COUNTY AREA:

NEAREST CROSS STREETS: DALE/LAMPSON
APPLICANT'S NAME: IERONIM ANDRONESI
ADDRESS:

PERMITTEE NAME:
RELATED PERMIT:
TYPE OF PROJECT:
CODE YEAR: 1988 PROJ/APPL:

WORK AUTHORIZED:
PRESENT USE: SFD

PHONE: - -

SCOPE OF WORK: ADDITION OF MASTER BDRM, DEN, BEDROOM
CT: APN: 215 052 05 SUPER. DIST.: 2 FLOOD PLAIN NO.:
ZONE: R1 TOWN 4 RANGE 11 SECT 36
LOT NOS.:

CLIMATE ZONE:

OWNER: IERONIM ANDRONESI
ADDRESS:

ADDRESS:

PHONE: - -

LICENSE NO.: PHONE: - -

ADDRESS:

OCC CLASS	TYPE CONST	OCC CODE	USE/OCCUPANCY	SIZE SQ. FT.
R3	05	27	ROOM ADDITION(SPECIAL INVESTI)	490

LICENSE NO.: PHONE: - -

TOTAL VALUATION: 22,995.70

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: LIC NO: LIC CL:

STRUC HEIGHT: .00 NBR OF STORIES: 0
NBR OF FAMILIES: 0 (FOR NEW PERMITS ONLY)
GRADING PMT. REQUIRED: N ROUGH GRADING REL.:

ADDRESS:
PHONE: DATE: CONTRACTOR:

ZONING INFORMATION

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. 3097, Civ. C)
LENDERS NAME: ADDRESS:

C/D STREET SETBACK:
FRONT E/L SETBACK: 50
SIDE YARD RIGHT:
SIDE YARD LEFT: 5
REAR YARD (TO R/L): 17
REQ'D PARKING SPACES OPEN: 0 COVERED: 0
ZONING APPROVED BY: LLM DATE: 02/15/91

OWNER-BUILDER DECLARATION

FEE INFORMATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reasons:
X 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.
I, as owner of the property, am exclusively contracting with licensed contractors to construct this project.
I am exempt under Sec. B&PC for this reason

DESCRIPTION	QUANTITY	AMOUNT
RESIDENTIAL PLAN CK	22995.70	154.80
RESID BUILDING PERMT	22995.70	258.00

DATE: 02-15-91 Owner: Ieronim Andronesi

WORKERS COMPENSATION DECLARATION
I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof.

COMPANY: POL NO: DATE EXP: / /
DATE: APPL/PERMT: VER BY:

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE (This section need to be completed if permit for \$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 Workers' Compensation Laws of CA.
DATE: 02-15-91 APPL/PERMT:

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Comp. provisions of the Labor Code, you must forthwith comply with such provisions or this 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 COUNTY ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS COUNTY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES.

DATE: 02-15-91 APPL/PERMT:

APPL/PERMT AGENTS NAME: IERONIM ANDRONESI

REMARKS: LEGAL NON-CONFORMING BUILT IN 50'S
SPECIAL INVESTIGATION INVOLVED SEE HANK ONTEVAROS. STANDARD PLAN & INSPECTION FEES USED PER CONV. W/ NORMA.
SUBJECT TO FIELD APP ROVAL.

263844
FINAL = 3-28-91

REGIONAL OFFICE
22921 TRITON WAY
LAGUNA HILLS, CA 92633
(714) 472-7979

FEE RECEIPT FORM
COUNTY OF ORANGE
ENVIRONMENTAL MANAGEMENT AGENCY
REGULATION

CENTRAL OFFICE
12 CIVIC CENTER PLAZA
SANTA ANA, CA 92702-4048
(714) 834-2626

ISSUE DATE: 02/15/91 PERMIT NBR: RS9102150004 RELATED PERMIT NBR:

REC'D OF
PAYER: IERONIM ANDRONESI

JOB OWNER: IERONIM ANDRONESI

ADDRESS:

ADDRESS:

PHONE: - - EXT:

PHONE: - - EXT:

LEGAL ADDRESS AND DESCRIPTION OF PRIMARY PROPERTY

JOB ADDRESS: 8552 BARR LN GARDEN GROVE

TOWN 4 RANGE 11 SECT 36

MULTIPLE PROPERTIES:

CENSUS TRACT: APN: 215 052 05

CAA NBR: 00024

ZONING INFORMATION

C/L STREET SETBACK:

FRONT P/L SETBACK: 50

EAVE PROJ:

REQ'D PARKING SPACES OPEN: 0

REAR YARD TO P/L: 17

EAVE PROJ:

COVERED: 0

SIDE YARD RIGHT:

EAVE PROJ:

SIDE YARD LEFT: 5

EAVE PROJ:

ZONING APPROVAL: LLM

<u>REFERENCE</u>	<u>DESCRIPTION</u>	<u>PERVIS CODE</u>	<u>AMOUNT</u>
	RESIDENTIAL - PLAN CHECK	RSA240	154.80
	RESIDENTIAL PERMIT	RSB250	258.00

CASH REC#: 263844
CASHIER: 6

TOTAL FEE \$ 412.80

"ACCOUNTING"

REGIONAL OFFICE
22921 TRITON WAY
LAGUNA HILLS, CA 92633
(714) 472-7979

CERTIFICATE OF USE AND OCCUPANCY
COUNTY OF ORANGE
ENVIRONMENTAL MANAGEMENT AGENCY
REGULATION

CENTRAL OFFICE
12 CIVIC CENTER PLAZA
SANTA ANA, CA 92702-4048
(714) 834-2626

JOB ADDRESS: 8556 BARR LN GARDEN GROVE
BUILDING PERMIT NUMBER: RS9110080007 ISSUE DATE: 09/17/92
ADDRESS: TOWN 4 RANGE 11 SECT 36
OCC TYPE
CLASS CONST USE/OCCUPANCY
R3 05 ROOM ADDIT 2ND DWLG UNIT
M1 05 WOOD FRAME GAR

USE: NEW 2ND UNIT W/ATT GARAGE * W GAS MTR
ISSUED TO OWNER: ANDRONESI, IERONIM PHONE: 714-534-5959

The building described herein has been inspected and found to comply with provisions of all County of Orange Ordinances applicable thereto.

THIS IS A LEGAL DOCUMENT AND MUST BE GIVEN TO THE LEGAL OWNER OR PURCHASER.
MAIL TO:

ANDRONESI, IERONIM
13231 BENTON
GARDEN GROVE

Floyd G. McLellan

County Building Official

CERTIFICATE OF USE AND OCCUPANCY

Environmental Management Agency

P.O. Box 4048

12 Civic Center Plaza

Santa Ana, California 92702-4048

Front Garage & 2 Bed

REGIONAL OFFICE
22921 TRITON WAY
LAGUNA HILLS, CA 92633
(714) 472-7979

RESIDENTIAL BUILDING PERMIT
COUNTY OF ORANGE
ENVIRONMENTAL MANAGEMENT AGENCY
REGULATION

CENTRAL OFFICE
12 CIVIC CENTER PLAZA
SANTA ANA, CA 92702-4048
(714) 834-2626

8556

PERMIT NUMBER: RS9110080007 ISSUE DATE: 11/06/91

This Permit shall become void if work is not commenced within 180 days of issuance.

JOB ADDRESS: 8552 BARR LN GARDEN GROVE COUNTY AREA: GGR
NEAREST CROSS STREETS: DALE/LAMPSON
APPLICANTS NAME: ANDRONESI, IERONIM PERMITTEE NAME: ANDRONESI, IERONIM
ADDRESS: 8552 BARR RELATED PERMIT:
GARDEN GROVE PHONE: 714-534-5959 TYPE OF PROJECT:
WORK AUTHORIZED: ELECTRICAL MECHANICAL PLUMBING CODE YEAR: 0 PROJ/APPL: UP91039
PRESENT USE: EXIST SFD W/ATT GAR
SCOPE OF WORK: NEW 2ND UNIT W/ATT GARAGE * W GAS MTR
CT: APN: 215 052 05 SUPER. DIST.: 2 FLOOD PLAIN NO.: CLIMATE ZONE:
ZONE: R1 TOWN 4 RANGE 11 SECT 36
LOT NOS.:

OWNER: ANDRONESI, IERONIM
ADDRESS: 13231 BENTON
GARDEN GROVE
PHONE: 714-534-5959

ADDRESS:

LICENSE NO.:

PHONE: - -

ADDRESS:

LICENSE NO.:

PHONE: - -

CLASS	TYPE	OCC	CODE	USE/OCCUPANCY	SIZE SQ. FT.
R3	05	27		2ND DWLG UNIT	640
M1	05	17		GAR	462

TOTAL VALUATION: 39,351.20

STRUC HEIGHT: 15.00 NBR OF STORIES: 0
NBR OF FAMILIES: 1 (FOR NEW PERMITS ONLY)
GRADING PMT. REQUIRED: N ROUGH GRADING REL.:

ZONING INFORMATION

C/L STREET SETBACK:
FRONT P/L SETBACK: 20' EAVE PROJ:
SIDE YARD RIGHT: EXIST EAVE PROJ: GARAGE
SIDE YARD LEFT: 5' EAVE PROJ:
REAR YARD (TO P/L): EXIST EAVE PROJ: SFD
REQ'D PARKING SPACES OPEN: 0 COVERED:
ZONING APPROVED BY: LLM DATE: 11/06/91

FEE INFORMATION

DESCRIPTION	QUANTITY	AMOUNT
RESIDENTIAL PLAN CK	30035.20	414.04
RESID BUILDING PERMT	30035.20	487.10
TOTAL FEES:		901.14
CRTA:		281447
REVISION 01 - 11/06/91		
RESIDENTIAL PLAN CK	38351.20	472.52
RESID BUILDING PERMT	38351.20	68.80
PRIOR PLN CK ADJUST	30035	414.04-
TOTAL FEES:		127.28
CRTA:		281454
REVISION 02 - 11/06/91		
ELECTRIC SVCS METER	1	11.44
TOTAL FEES:		11.44
CRTA:		281461

REMARKS: NEW 2ND UNIT 640SQFT W/ATT 462SQFT. GAR.
ACCESS TO EXIST SFD W/ATT GAR

UTIL. REL.

SEP 17 1992

INITIALS

SEP 17 1992

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: _____ LIC NO: _____ LIC CL: _____

ADDRESS: _____
PHONE: _____ DATE: _____ CONTRACTOR: _____
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. 3097, Civ. C)

LENDERS NAME: _____ ADDRESS: _____
OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason:

- ___ 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.
- ___ I, as owner of the property, am exclusively contracting with licensed contractors to construct this project.
- ___ I am exempt under Sec. _____, B&PC for this reason

DATE: _____ Owner: *[Signature]*

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof.

COMPANY: _____ POL NO: _____ DATE EXP: / /
DATE: _____ APPL/PERMT: _____ VER BY: _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE (This section need to be completed if permit for \$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 Workers' Compensation Laws of CA.

DATE: _____ APPL/PERMT: _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Comp. provisions of the Labor Code, you must forthwith comply with such provisions or this 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 COUNTY ORDINANCES AND STATE LAWS RELATING TO BUILDING CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS COUNTY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES.

DATE: _____ APPL/PERMT: _____
APPL/PERMT AGENTS NAME: _____

INSPECTION RECORDS

TYPE INSPECTION

PLUMBING

DATE

APRV./INSPR'S SIG.

REMARKS

GROUND SOIL

GROUND WATER

TOP OUT

SEWER

GAS TEST

* 1-28-

1-28-92 - Under ground from meter
1" line - OK - (Signature)

SANIT. DIST. CERT. REQ'D.

FINAL PLUMBING

9-16-92 (Signature)

MECHANICAL

DATE

APRV./INSPR'S SIG.

REMARKS

UNDERGROUND

ROUGH

COMB VENT

AIR COND

FINAL MECHANICAL

9-16-92 (Signature)

ELECTRICAL

DATE

APRV./INSPR'S SIG.

REMARKS

TEMP CONSTN POWER

UNDERGROUND

PVC - METAL - D.B.C

ROUGH WIRING RECEIPT

SPACING-SERVICE-CIRCUIT

9-16-92 (Signature)

FIXTURES-TRIM-BONDINGS

POOL LIGHT

REQ'D FENCE/WALL

FINAL ELECTRICAL

9-16-92 (Signature)

STRUCTURAL

DATE

APRV./INSPR'S SIG.

REMARKS

FOUNDATION LOCATION

REINFORCED

SLAB: REINFORCED

SLAB: MEMBRANE

1-28-92 (Signature)

UNDERPINNING

MASONRY BOND BEAM

FIREPLACE

ROOF FRAMING

ROOF SHEATHING

FRAMING

INSULATION SOUND/ENERGY

LATH EXTERIOR

LATH INTERIOR

DRYWALL

PLASTER BROWN COAT

BUILDING FINAL

9-16-92 (Signature)

ZONING FINAL