



**CITY OF GARDEN GROVE
BUILDING SERVICES**

General Info : 714-741-5307
Inspection Requests : 855-380-8758

12641 HAZEL AVE
PERMIT#:16-1746
ISSUED:6/9/16

Owner NGUYEN, TRANG T			Telephone (818) 620-3220	Zip 92683	Building Address 12641 HAZEL AVE																													
Address 8731 EMERALD AVE			City WESTMINSTER	State CA	Suite/Unit/Building																													
Applicant NGUYEN, TRANG T			Telephone (818) 620-3220	Zip 92683	TYPE Reroof		ISSUED BY Aaron Hodson																											
Address 8731 EMERALD AVE			City WESTMINSTER	State CA	Inspector Dist. L11	Parcel Number 13328212	LOT TRACT																											
Floor Area(sq. ft.)			Residential/Commercial Residential		Valuation \$6,000.00																													
Job Description T/O (E) 2 LAYERS ROOF/ INSTALL 1 LAYER #30 FELT/ INSTALL 30 YR COMP SHINGLES (4:12 PITCH) DETACHED GARAGE					Final Inspector's Signature <u>TFH</u> Date <u>6/17/16</u>																													
<p align="center">DECLARATION</p> <p>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.</p>																																		
<p>X Applicant's Signature <u>[Signature]</u></p> <p>Print Name <u>Trang Nguyen</u> Date <u>6/9/16</u></p>					<p>F E E S</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Description</th> <th>Quantity</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Building Permit Document Retention Fee</td> <td align="center">1</td> <td align="right">\$5.00</td> </tr> <tr> <td>Building Technology Fee</td> <td align="center">1</td> <td align="right">\$10.00</td> </tr> <tr> <td>BSASRF State Fee</td> <td></td> <td align="right">\$1.00</td> </tr> <tr> <td>Issuance Fee</td> <td align="center">1</td> <td align="right">\$35.00</td> </tr> <tr> <td>Reroof Permit Fee</td> <td></td> <td align="right">\$145.00</td> </tr> <tr> <td>One-Stop Construction Services Center Surcharge</td> <td></td> <td align="right">\$2.90</td> </tr> <tr> <td>Reroof Valuation</td> <td align="center">6000</td> <td align="right">\$6,000.00</td> </tr> <tr> <td>TOTAL</td> <td></td> <td align="right">\$198.90</td> </tr> </tbody> </table>			Description	Quantity	Amount	Building Permit Document Retention Fee	1	\$5.00	Building Technology Fee	1	\$10.00	BSASRF State Fee		\$1.00	Issuance Fee	1	\$35.00	Reroof Permit Fee		\$145.00	One-Stop Construction Services Center Surcharge		\$2.90	Reroof Valuation	6000	\$6,000.00	TOTAL		\$198.90
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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.

Permit Type: BLDG

ORIGINAL

BUILDING PERMIT

Public Works & Development - Garden Grove, Ca.
 Inspection 638-6771 Information 638-6661

INSTRUCTION: FILL IN AREA WITHIN HEAVY LINES
 USE TYPEWRITER OR BALL POINT PEN. PRESS FIRMLY. BE SURE ALL COPIES ARE
 LEGIBLE. NO ERASURES PERMITTED. A DOUBLE FEE WILL BE CHARGED IF WORK
 IS STARTED BEFORE PERMIT IS ISSUED.

FIRE ZONE III	OCCU. PANCY I	TYPE V	OCC. LOAD	FIRE SPRINK.
USE ZONE R-1	FRONT	LEFT	RIGHT	REAR
PARK SPACES REQUIRED	EAVE PROJ.	SETBACKS	-	2
			32	55

ADDRESS **12641 HAZEL** PERMIT NO. **094990A**

LOT NO. **30** TRACT NO. **1355** BLK. NO.

OWNER **RAM SIORDIA** TEL. NO. **657 7760**

MAILING ADDRESS **24441 Hwy 74 PERCIS CALIF.** CITY ZIP

ARCH ENGR. STATE LIC. NO. TEL. NO. CITY ZIP

PLANNING ACTION **Existing structure**

LAND USE APPROVED BY **[Signature]** DATE **9-1-77**

MAILING ADDRESS CITY ZIP

FEES AND BONDS			
	AMOUNT	REQ'D	PROVIDED
PARCEL MAP			
R/W DEDICATION			
STREET BOND			
WATER BOND			
WATER ASSMT. FEE			
FIRE HYDRANT FEE			
PARKWAY T/FEE FEE			
PARK & RLC. FEE (DIST.)			
DRAIN ASSMT. FEE (DIST.)			

CONTRACTOR **owner** LIC. NO. TEL. NO. CITY ZIP

MAILING ADDRESS CITY ZIP

VALIDATION

PRESENT BLDG. USE **S.F.D.** PROPOSED BLDG. USE

DESCRIBE WORK TO BE DONE **EXISTING OPEN COVERED PORCH**

NEW ADD'N. ALTER. REPAIR DEMOLISH

REMARKS:

G.G. SANT. DIS. FEE REQ'D	O.C. SANT. DIS. FEE REQ'D	DATE	INITIAL
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FLOOR AREA (SQ. FT.) **72 of** NO. OF STORIES NO. OF DWELLING UNITS

I certify that I have read this application and state that the above information is correct. I agree to comply to all City Ordinances and State laws relating to building construction. I certify that in the performance of the above work I shall not employ any person in violation of the Labor Code of California relating to Workman's Compensation Insurance. 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.

INSPECTION RECORD		
APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
REINFORCING		
ROOF SHTG.		
ROUGH FRAME	OPEN	
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL	9-1-77	[Signature]
UTILITY RELEASE		

CONTRACTORS SIGN BELOW

I certify that I am a licensed contractor and that my license is in full force and effect.

Contractor _____ By _____ Authorized Agent _____ Date _____

OWNER-BUILDER SIGN BELOW

I certify that I am exempt from the provisions of Ch. 9, Div. 3, B and P. Code (Contractor's License Law) because (check one):

I am the owner of the above property and will personally perform the above work.

I am the owner of the above property and I will contract to have all of the above work performed by licensed contractors.

I am the owner of the above property and will employ persons to perform the above work with wages as their sole compensation. I will furnish insurance for my employees as required by the Labor Code of California.

[Signature] By **[Signature]** Authorized Agent _____ Date _____

VALUATION	FEES
\$300.00	
REC'D BY:	PLAN CHECKS \$520 3 58
AUTHORIZED BY [Signature]	PERMIT \$226 11 50
DATE 9-1-77	ISSUANCE \$85 8 00

If work is not started within 120 days from date of issue or if abandoned for more than 120 days, this permit will be null and void.

A \$10.00 FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

I. INSPECTOR	TOTAL	\$ 21 08
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PRESENT BLDG. ADDRESS MOVING CONTRACTOR ADDRESS

BUILDING PERMIT PLOT PLAN
Public Works & Development Dept.
CITY OF GARDEN GROVE

JOB ADDRESS: 12641 HAZEL AVE PERMIT NO. 94990A

ASSESSOR'S PARCEL NO. 133-282-12 LOT 30 BLOCK TRACT 1355

PLOT PLAN APPROVED BY

JOB DESCRIPTION (PLEASE CHECK)
 New Addition Alteration Repair Move Demolish

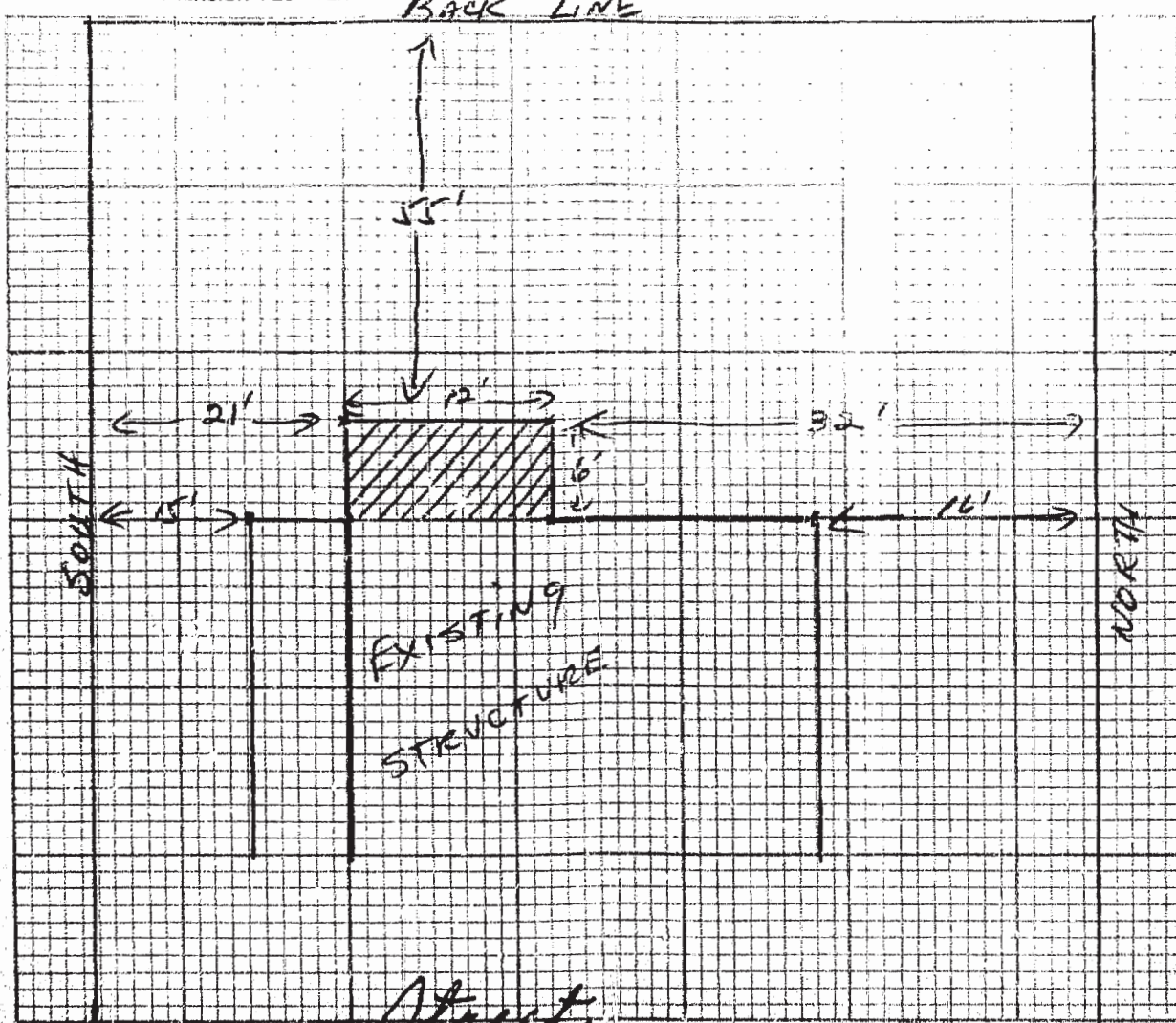
OWNER: A + M. SIORDIA

DATE: 8-22-77

USE EXISTING OPEN COVERED PORCH

PERMIT VALUE: 300⁰⁰

DIMENSION PLOT PLAN COMPLETELY SHOWING ALL STRUCTURES ON THE LOT AND THEIR USE.



#1 Building Insp. / #2 Assessor / #3 File / #4 Permitted
I certify the information herein is complete and correct. by _____

Date _____

For Applicant to Fill in

P.C. #		OCC. LOAD		FIRE SPRINK.	
USE ZONE	TYPE	FRONT	LEFT	RIGHT	REAR
FIRE ZONE	Eav Proj. Setbacks	SEE PLAN			
PLANNING ACTION	PLANS DATE	5-21-93			
LAND USE APPROVED BY	REMARKS:	5-21-93			
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.	DATE	REQ'D	PROVIDED	INITIAL
PARCEL MAP	P/W DEDICATION	FEEES AND BONDS			
ST. BOND	WATER BOND	REV. CODE	AMOUNT		
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	BLDG. PERMIT FEE				
ISSUANCE	VALUATION				
	TOTAL FEES				
	DATE				
	AUTHORIZED BY				
	1. INSPECTOR				

ADDRESS: 12641 HAZEL
 OWNER: KALL SCHLUETER
 MAILING ADDRESS: 12641 HAZEL G.G.
 PERMIT NO.: 135265A
 BLDG. NO.:
 TRACT NO.:
 CITY: HAZEL
 STATE LIC. NO. & TYPE:
 VALIDATION: B-PLAN 32.83
 B-PER 51.00
 ISS 10.00
 CHECK 93-83
 CONTRACTOR: SERVOMATIC E.O.C.
 MAILING ADDRESS: 14452 Chambers tustin
 CITY: TUSTIN
 STATE LIC. NO.: 390645
 PRESENT BLDG. USE: RES.
 DESCRIBE WORK TO BE DONE: Domestic Solar Hot H2O
 NEW ALTER REPAIR DEMOLISH
 FLOOR AREA: 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 REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.
 PRESENT BLDG. ADDRESS:
 MOVING CONTRACTOR ADDRESS:

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
CONCRETE FLOOR		
REINFORCING		
ROOF SHTG		
ROUGH FRAME		
INSULATION, ENERGY LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL		
UTILITY RELEASE		

IDENTIFICATION CODE

WORKER'S COMPENSATION REQUIREMENTS
 State Compensation Insurance Policy No. 05CK9504X Expiration Date 5-1-95
 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 not be deemed to have revoked the above information. 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.
 Signature: Shawn Dobson
 PERMIT AGENT SIGNATURE: 5-17-94
 DATE: 5-17-94
 BUSINESS TAX CERTIFICATE INFORMATION: 1993-0645
 I certify that the following Contractor's License No. is full and effect:
 License No. 51794
 CONTRACTOR: SERVOMATIC E.O.C.
 DATE: 5-17-94
 BUSINESS TAX CERTIFICATE NO.:
 I certify that I am exempt from Section 7031.5 of the Business and Professions Code, Division 3, Chapter 9, Contractors' License Law, under the following Section: Minor work under \$100; Section 7048
 Other work for wages only: Section 7035
 Signature: Kall Schlueter
 (PRINT) PROPERTY OWNER (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT
 DATE: 5-17-94

04-9007-10

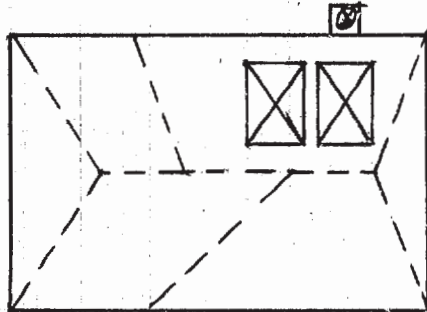
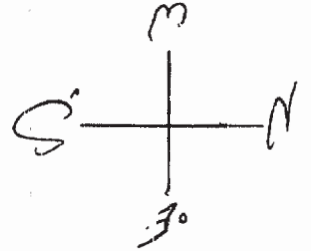
CITY OF GARDEN GROVE

PLOT PLAN

PUBLIC WORKS & DEVELOPMENT 1

OWNER Schlueter	JOB ADDRESS 12641 Hazel	PERMIT NO. 135265A
NAME OF CONSTRUCTION LENDER & BRANCH	ASSESSOR'S PARCEL NO. 133-282-12	LOT 12
	BLOCK	TRACT
	PLEASE CHECK ONE OR MORE	
	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Alteration	<input type="checkbox"/> Repair
	<input type="checkbox"/> Move	<input type="checkbox"/> Demolish
ADDRESS	DATE 5-17-41	PERMIT VALUE \$4380.00
CITY	JOB DESCRIPTION Domestic Solar	

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



STREET

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

By _____

PLOT PLAN APPROVED BY _____

CITY OF GARDEN GROVE
Public Works & Development

BUILDING PERMIT

Inspection Requests
638-6771

General Information
638-6671

For Applicant to Fill in

INSPECTION RECORD

<p>ADDRESS: 12641 HAZEL AVE LOT NO. 30 OWNER: SALLUETER, KARL MAILING ADDRESS: 12641 HAZEL AVE GLO GARDEN, CA 92723</p>		<p>PERMIT NO. 1355 CITY ZIP</p>	
<p>ADDRESS: 12641 HAZEL AVE GLO GARDEN, CA 92723 OWNER: OWNER MAILING ADDRESS: 12641 HAZEL AVE GLO GARDEN, CA 92723</p>		<p>STATE LIC. NO. & TYPE</p>	
<p>VALIDATION</p>		<p>CONTRACTOR: OWNER</p>	
<p>TEL. NO.</p>		<p>CITY ZIP</p>	
<p>STATE LIC. NO.</p>		<p>PROPOSED BLDG. USE: SAME</p>	
<p>PRESENT BLDG. USE: SINGLE FAMILY</p>		<p>NO. OF FLOORS: 2</p>	
<p>NO. OF UNITS: 1</p>		<p>RELOCATION</p>	
<p>PRELIMINARY DESCRIPTION OF WORK: DESCRIBE WORK TO BE DONE TO EXISTING HOME. CONSTRUCT NEW 2 STORY ADDITION</p>		<p>RELOCATION ADDRESS</p>	
<p>NEW ADDRESS: ALTHOUGH REPAIR OR DEMOLISH</p>		<p>RELOCATION ADDRESS</p>	
<p>FLOOR AREA: 1514 SQ. FT.</p>		<p>NO. OF STORIES: 2</p>	
<p>NO. OF UNITS: 1</p>		<p>RELOCATION ADDRESS</p>	
<p>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.</p>			
<p>A FEE MAY BE CHARGED FOR REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS</p>			
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<p>NEW ADDRESS: ALTHOUGH REPAIR OR DEMOLISH</p>		<p>RELOCATION ADDRESS</p>	
<p>FLOOR AREA: 1514 SQ. FT.</p>		<p>NO. OF STORIES: 2</p>	
<p>NO. OF UNITS: 1</p>		<p>RELOCATION ADDRESS</p>	
<p>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.</p>			
<p>A FEE MAY BE CHARGED FOR REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS</p>			

611

INSPECTION RECORD	DATE	INSPECTOR	APPROVAL	FOUNDATION & LOCATION
CONCRETE FLOOR				
REINFORCING				
ROUGH FRAME				
INSULATION, ENERGY				
LATH OR DRYWALL				
PLAS BROWNCT	2-1-83	LA		
SOUND INSULATION				
SMOKE DETECTOR				
PARKING				
LANDSCAPING				
LAND USE FINAL				
UTILITY RELEASE				

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 permit construction. Further, I agree to hold the City of Garden Grove free and harmless from any liability arising out of injury to persons or property resulting from work performed by me or my employees.

PERMIT APPLICANT SIGNATURE: *[Signature]* DATE: *[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: _____ 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 7034 Minor work under §100 Section 7048 Employee working for wages only: Section 7053

PROPERTY OWNER (SIGNATURE) PROPERTY OWNER: _____ DATE: *9-11-84*

OR AUTHORIZED AGENT

TYPE	OCC. LOAD	FIRE SPRINK.	FRONT	LEFT	RIGHT	REAR	DATE
PLANNING ACTION							
LAND USE APPROVED BY							
REMARKS:							
G.G. SANT. DIS. FEE REQ'D.							
G.G. SANT. DIS. FEE REQ'D.							
PARCEL MAP							
R/W DEDICATION							
ST. BOND							
WATER BOND							
WATER ASSMT. FEE (ACRG)							
WATER ASSMT. FEE (FT.)							
PARKWAY TREE FEE							
PARK & REC. FEE (DIST)							
DRAIN ASSMT. FEE (DIST. C)							
PLAN RETENTION FEE							
BLDG. PLAN CHECK							
BLDG. PERMIT FEE							
ISSUANCE							
VALUATION							
TOTAL FEES							
AUTHORIZED BY: <i>[Signature]</i>							
DATE							

61105
189
207.35
323.31
10
540.66
9-11-84

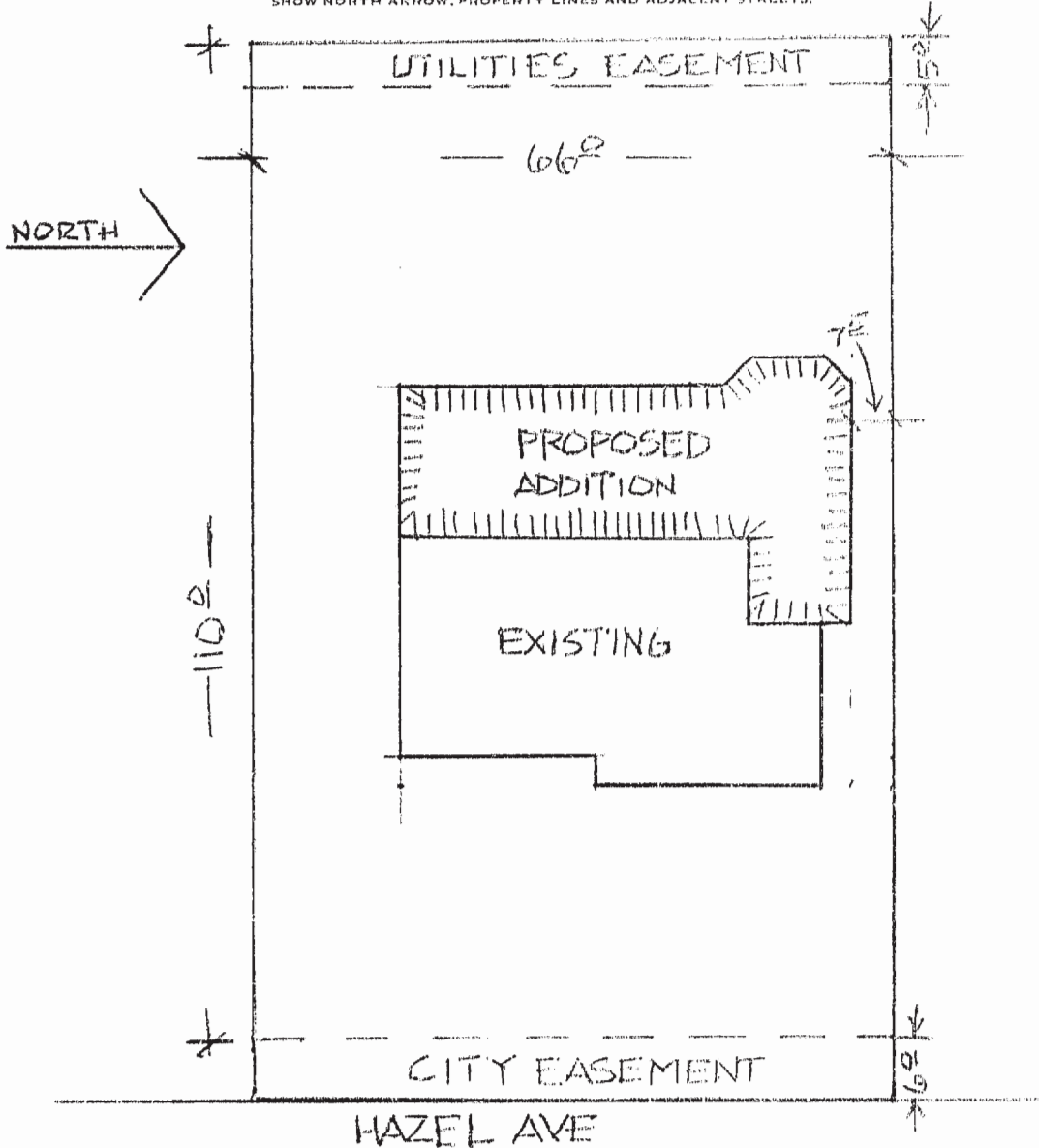
CITY OF GARDEN GROVE

PLOT PLAN

PUBLIC WORKS & DEVELOPMENT

OWNER KARL SCHLUETER	JOB ADDRESS 12641 HAZEL AVE	PERMIT NO. 136938A
NAME OF CONSTRUCTION LENDER & BRANCH OWNER	ASSESSORS PARCEL NO. 133-282-1230	LOT 30
	BLOCK 1355	TRACT
PLEASE CHECK ONE OR MORE		
	<input type="checkbox"/> New	<input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Alteration	<input type="checkbox"/> Repair
	<input type="checkbox"/> Move	<input type="checkbox"/> Demolish
ADDRESS	CITY	DATE 7-11-84
		JOB DESCRIPTION <i>alter existing, add 2nd story</i>
		PERMIT VALUE 61,105

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 _____

General Information
638-6661

Inspection Requests
638-6771

ELECTRICAL PERMIT

CITY OF GARDEN GROVE
Public Works & Development

For Applicant to Fill in

FEES

IF NOT LISTED BELOW	NO.	EA.	FEE
SEE CODE			
Residential (R-1 & R-3) sq. ft.	1514		4144
Garage, Resid. (M) sq. ft.			
Service Meter, Single Phase	1		14
Service Meter, Three Phase			
Add'l Meter, Three Phase			
Temporary Power Pole			
Pole, Power, Light, etc.			
Sub-Panels 1 φ			
Sub-Panels 3 φ			
Outlets	28		14
Fixtures	5		250
Fixtures, Merc. Quartz, etc.			
Heater—Not Over 1650 W			
Washer			
Dryer			
Hot Water Heaters			
Dishwasher			
Domestic Range or Oven			
Disposal			
Power Apparatus—H.P., K.W. or K.V.A. Motors, Transformers, etc.			
Not Over 1 each			
Over 1, Not Over 10 each			
Over 10, Not Over 30 each			
Indv. Circuits			
Time Clock			
Sign			
Sign Hookup			
ITEM	CODE	FEES	
Plan Retention Fee			
Plan Check			
Permit			
Issuance			
TOTAL FEES			8214

INSPECTION RECORD	INSPECTION DATE	INSPECTOR
Underground		
Conduit		
Wiring - Rough		
Master		
Fixtures & Trim		
Labels		
Other		
Service		
FINAL		
Unity Notified		
IDENTIFICATION CODE	1-1785	
136932A		

ADDRESS	12641 HAZEL AVE
LOT NO., BLK NO., TRACT NO.	3D 1355
ELECTRIC PERMIT NO.	1369333A
OWNER	SCHWABER, KARL
OWNER'S ADDRESS	12641 HAZEL AVE
NEW BUILDING OR EXISTING BUILDING	NEW BUILDING
ADDITION - AREA	1514
99. FT.	840
99. FT.	12
VALIDATION	1HE563A 9-11-84
ISS	10.00
CHECK	82.14
ELECTRICAL CONTRACTOR	OWNER
STATE LIC. NO. & TYPE	
ADDRESS	
CITY	
PHONE	

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 and loss or damage, or by bodily damage resulting from work performed in violation of the provisions of this code.

THREAT APPLICANT SIGNATURE: *[Signature]* DATE: 8-6-84

BUSINESS TAX CERTIFICATE INFORMATION

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

(PRINT) CONTRACTOR: _____ EXPIRATION DATE: _____

(PRINT) CONTRACTOR OR AUTHORIZED AGENT: _____ EXPIRATION DATE: _____

I certify that I am exempt from Section 7031.5 of the Business and Professions Code, Division 3, Chapter 9, Contractors' License Law, under the following section: _____

Employer working for wages only: Section 7064 _____

Minor work under §100: Section 7048 _____

(PRINT) PROPERTY OWNER (SOLE AND SEVERAL OWNERS) OR AUTHORIZED AGENT: *[Signature]* DATE: 8-6-84

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

For Applicant to Fill in

ADDRESS: 12641 HAZEL AVE. (LOT NO. 30, TRACT NO. 1355, PERMIT NO. 136934A)
 OWNER: SCHLUETER, KARL (PHONE 714, 636-7719)
 NEW BUILDING OR ADDITION AREA: 840 SQ. FT. (REGULATORY GROUP R, SINGLE-FAMILY)
 VALIDATION: 1514.50 FT. (PERMITS 158, 10.00, CHECK 79.50)
 PLUMBING CONTRACTOR: 140564A 9-11-84 (STAT. LIC. NO. & TYPE)

PLUMBING CONTRACTOR: OWNER
 ADDRESS: _____ CITY: _____ PHONE: _____

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 Golden Grove free and harmless from any liability arising out of this permit.
 (PRINT) APPLICANT SIGNATURE: _____ DATE: 8-16-84

BUSINESS TAX CERTIFICATE INFORMATION
 I certify that the following Contractor's License No. _____ and Classification _____ is in full force and effect.
 (PRINT) CONTRACTOR: _____ CONTRACTOR'S SIGNATURE: _____ 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: _____
 Employer work only for wages only: Section 7048
 Minor work under \$100: Section 7049
 (PRINT) PROPERTY OWNER SIGNATURE: _____ DATE: 8-16-84
 (PRINT) PROPERTY OWNER OR AUTHORIZED AGENT

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

FEES

TYPE OF FIXTURE OR ITEM	NO.	EACH	\$ FEE
Water Closet (toilet)	2		9
Bath Tub	1		9
Shower	1		13.50
Lavatory (Wash Basin)	1		4.50
Kitchen Sink	1		4.50
Garbage Disposal	1		5.50
Laundry Tub or Tray	1		5.50
Water Heater	1		5.50
Floor Sink	1		5.50
Floor Drain	1		4.50
Dish Washer	1		4.50
Drinking Fountain	1		5.50
Urinal	1		5.50
Gas System - Outlets	5		4.50
Building Sewer (First 100 ft.)	1		3
Building Sewer (Add'l 100 ft.)	1		6
Building Sewer (es. add'l drain)	1		6
Rainwater Drain	1		6
Swimming Pool Piping	1		6
Sand Traps/Receptors	1		6
Automatic Washing Machine	1		6
Water Softeners	1		6
Backwash - Trap	1		6
Water Lateral	1		6
Backflow/Protective Devices	1		6
Water Piping (es. 100 ft.)	2		6
Lawn Sprinklers (S.F.D. Only)	1		6
Lawn Sprinklers (other)	1		6

ITEM	CODE	FEES
Plan Retention Fee		
Plan Check		69.50
Permit		20
Issuance		79.50
TOTAL FEES		169.50

DATE: 9/1/84
 INSPECTOR: [Signature]
 IDENTIFICATION CODE: [Signature]
 ELECTRICAL PERMITS: [Signature]
 BUILDING AUTHORIZED BY: [Signature]
 DATE: 8/16/84

RECEIVED WITHIN 120 DAYS FROM DATE OF ISSUE OR IF MORE THAN 120 DAYS, THIS PERMIT WILL BE NULL AND VOID.

PLUMBING PERMIT

Inspection Requests
638-6771

General Information
638-6661

For Applicant to Fill in

FEES

INSPECTION RECORD

ADDRESS
 LOT NO. 12604 | TRAPERS HAZEL AVE
 BACK NO. 1315 | PERRY NO. 136934A
 OWNER SCHWIETER, KAPL
 PHONE 714 661114
 CITY
 OWNER'S ADDRESS
 12604 HAZEL AVE
 CITY
 1594E
 VALIDATION 1514 53FT

PLUMBING CONTRACTOR
 OWNER
 ADDRESS
 CITY
 STATE ZIP CITY PHONE

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 this permit should become subject to the Worker's Compensation laws of this state, 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 trenching construction. I further agree to hold the City of Garden Grove free and harmless from any liability on the part of any employee or contractor for any injury or property damage resulting from work performed pursuant to this permit.
 CONTRACTOR SIGNATURE: _____ DATE: 8/6/84

BUSINESS TAX CERTIFICATE INFORMATION
 I certify that the following Contractor's License No. _____ and Classification _____ is in full force and effect.
 (PRINT) CONTRACTOR: _____ (PRINT) PROPERTY OWNER (INDICATE PROPERTY OWNER OR AUTHORIZED SIGNER): _____
 BUSINESS TAX CERTIFICATE NO. _____ EXPIRATION DATE _____
 I certify that I am exempt from Section 7021.5 of the Business and Professions Code, Division 3, Chapter 9, Contractors' License Law under the following Section: _____
 Owner: Section 7044 _____ Minors work under Section 7043 _____
 Employee working for wages only Section 7053 _____
 ORDER NO. _____ DATE: 8/6/84
 (PRINT) PROPERTY OWNER (INDICATE PROPERTY OWNER OR AUTHORIZED SIGNER): _____
 MEALANCE: _____
 CONNECTIONS:

TYPE OF FIXTURE OR ITEM	NO.	EACH	\$ FEE
Water Closet (toilet)	2		9--
Bath Tub	1		9--
Shower	1		13.50
Lavatory (Wash Basin)	1		4.50
Kitchen Sink	1		4.50
Garbage Disposal	1		5.50
Laundry Tub or Tray	1		4.50
Water Heater	1		5.50
Floor Sink	1		4.50
Floor Drain	1		5.50
Dish Washer	1		4.50
Drinking Fountain	1		5.50
Urinal	1		4.50
Gas System - Outlets	5		5.50
Building Sewer (First 100 ft.)	1		4.50
Building Sewer (Add'l 100 ft.)	1		5.50
Building Sewer (ea. add'l drain)	1		4.50
Rainwater Drain	1		5.50
Swimming Pool Piping	1		4.50
Sand Traps/Receptors	1		5.50
Automatic Washing Machine	1		4.50
Water Softeners	1		5.50
Backwash - Trap	1		4.50
Water Lateral	1		5.50
Backflow Protective Devices	2		6
Water Piping (ea. 100 ft.)	1		4.50
Lawn Sprinklers (S.F.D. Only)	1		5.50
Lawn Sprinklers (other)	1		4.50

ITEM CODE FEES

Plan Retention Fee			
Plan Check			69.50
Permit			10--
Issuance			79.50
TOTAL FEES			159.50

LAND USE AUTHORIZED BY: _____ DATE: 8/6/84

RECORDS	DATE	INSPECTOR
Soil Piping	10/3/84	[Signature]
Ground Plumbing	12/20/84	[Signature]
Rough Plumbing	1-3-85	[Signature]
Gas Piping		
Gas Vent		
Grease		
Man Drain and Vacuum Lines		
Water Heater		
Backwash		
Water Lateral		
Water Piping		
Water Softeners		
Backwash - Trap		
Water Lateral		
Backflow Protective Devices		
Water Piping (ea. 100 ft.)		
Lawn Sprinklers (S.F.D. Only)		
Lawn Sprinklers (other)		

FINAL UTILITY CO. NOTIFIED

IDENTIFICATION CODE

PERMITTING PERMIT NO. 136932A

ELECTRICAL PERMIT NO.

DATE OF ISSUE OR IF DISCONTINUED FOR MORE THAN 120 DAYS, THIS PERMIT WILL BE NULL AND VOID.

General Information
638-6661

Inspection Requests
638-6771

For Applicant to Fill in

HEATING, VENTILATING, REFRIGERATION & AIR COND. PERMIT

FEES

INSPECTION RECORD

APPROVALS	DATE	INSPECTOR	NO. EA.	S FEE
FURNACE			1	6.50
FURNACE VENTS	1-3-85	600m		
GAS PIPING				
DUCTS			1	3.50
SINGLE DUCT FAN VENT				
KITCHEN HOOD			1	3.50
AIR HANDLING UNIT			1	3.50
EVAPORATIVE COOLER				
BOILER OR COMPRESSOR				
DECORATIVE APPLIANCE				
FINAL				
UTILITY CO. NOTIFIED				
IDENTIFICATION CODE			TOTAL FEES	27
ELECTRIC PERMIT NO.			LAND USE	DATE
136932A			LB	8/6/84

ADDRESS: 126041 HAZEL AVE
 LOT NO.: 30
 BLK NO.: 1355
 TRACT NO.: 136935A
 OWNER: SCHLUETER, KARL
 PHONE: 714 6367719
 CITY: GARDEN GROVE
 NEW BUILDING OR REMODEL AREA: 1544 SQ. FT.
 EXISTING BUILDING AREA: 840 SQ. FT.
 OCCUPANCY GROUP: R
 USE OF BUILDING AND GROUP OR NUMBER OF UNITS: SINGLE
 VALIDATION: 1545A FT
 155 10.00
 145565A 9-11-84 CHECK 27.00
 HEATING CONTRACTOR: OWNER
 STATE LIC. NO. & TYPE: _____
 ADDRESS: _____
 CITY: _____
 PHONE: _____

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. _____
 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 property damage resulting from work performed pursuant to this permit.
 PERMIT APPLICANT SIGNATURE: _____ DATE: 8-6-84
BUSINESS TAX CERTIFICATE INFORMATION
 I certify that the following Contractor's License No. _____ and Classification _____ is in full force and effect.
 (PRINT) CONTRACTOR: _____ DATE: _____
 (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 Professions Code, Division 3, Chapter 9, Contractors' License Law, under the following Section:
 Owner: Section 7044 Minor work under §100. Section 7048
 Employee working for wages only: Section 7053
 Other: _____
 (AGENT) PROPERTY OWNER (SIGNATURE) AUTHORIZED AGENT: _____ DATE: _____

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

BUILDING PERMIT

Inspection Requests 741-5332
General Information 741-5307
For Applicant to Fill In

INSPECTION RECORD

OCCUPANCY	TYPE	OCC LOAD			FIRE SPRINK	APPROVAL	DATE	INSPECTOR
		FRONT	LEFT	RIGHT				
USE ZONE	Em. Proj. Setbacks							
PLANNING ACTION								
LAND USE APPROVED BY	Plans DATE							
REMARKS:	<i>John G. Lee 9/21/81</i>							
G.G.SANITATION FEE REQ'D								
PARCEL MAP								
R/W DEDICATION								
FEES AND BONDS		REV. CODE	AMOUNT	DATE	INITIAL	REQ'D	PROVIDED	DATE
ST. BOND								
WATER BOND								
WATER ASSMT. FEE (ACRG.)								
WATER ASSMT. FEE (FT.)								
PARKWAY TREE FEE								
PARK & REC FEE (DIST.)								
DRAIN ASSMT. FEE (DIST.)								
• 172 X 1100			189.07					
PLAN RETENTION FEE								
BLDG. PLAN CHECK			64.35					
BLDG. PERMIT FEE			99.56					
ISSUANCE			10.00					
VALUATION								
\$ 7,986								
TOTAL FEES								17391
DATE								9/21/81

ADDER SS. 12641 HAZEL AVE 6-6-9201
 (LOT NO. BLK NO. TRACT NO.) 6 16848 3A
 OWNER THAI TRAN 686-1719
 MAILING ADDRESS 12641 HAZEL AVE 6-6-9201
 ARCH CITY ALEXANDRIA
 ENGR CITY ALEXANDRIA
 TEL. NO. 757-3627
 STATE LIC. NO. & TYPE 184-337A 9-21-89 CHECK 173.91
 VALIDATION
 CONTRACTOR Barney Builder
 MAILING ADDRESS 12641 HAZEL AVE 6-6-9201
 TEL. NO. 757-3627
 STATE LIC. NO. & TYPE
 PRESENT BLDG. USE PROPOSED BLDG. USE College
 DESCRIBE WORK TO BE DONE INSTALL CONCRETE FOUNDATION
 INSTALL SEWER LINE WATER SUPPLY
 FRAME, CONST., FINISH WORK, GRADE
 EXTERIOR, INSTANT GARGE POOR.
 NEW ADDN ALTER REPAIR DEMOLISH
 FLOOR AREA 484 NO. OF STORIES 1 NO. OF DWELLING UNITS 1
 (SQ. FT.)
 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 in compliance with this permit.
 SIGNATURE OF CONTRACTOR ON AUTHORIZED PERMIT DATE
 SIGNATURE OF CONTRACTOR ON AUTHORIZED PERMIT DATE
 BUSINESS TAX CERTIFICATE INFORMATION
 I certify that the following Contractor's License No. _____ is in full force and effect.
 (PRINTER CONTRACTOR) (SIGNATURE) (CONTRACTOR) (DATE)
 (SIGNATURE) (PROPERTY OWNER) (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 7044.5 Employer working for wages only, Section 7044.6
 SIGNATURE OF CONTRACTOR ON AUTHORIZED PERMIT DATE
 (SIGNATURE) (PROPERTY OWNER) (DATE)
 I. INSPECTOR

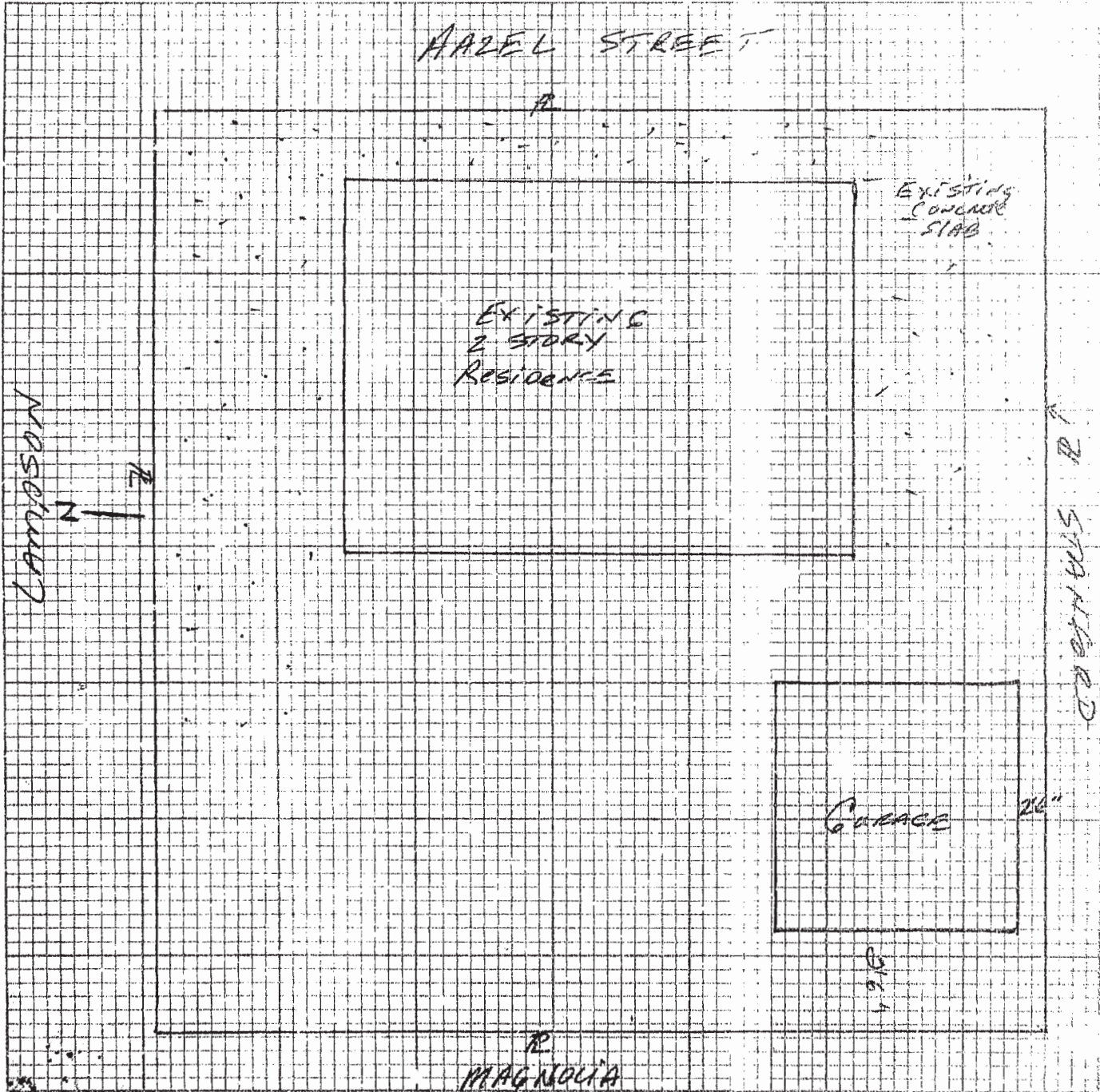
CITY OF GARDEN GROVE

PLOT PLAN

DEVELOPMENT SERVICES DEPARTMENT

FRONT	LEFT	RIGHT	REAR	USE ZONE	LOT SIZE	JOB ADDRESS			PERMIT NO.
Eav. Proj.					7487	12641 AAZEL GARDEN GROVE			114414
Setbacks					LOT COVERAGE	ASSESSORS PARCEL NO.	LOT	BLOCK	TRACT
PLANNING ACTION						13328212			
LAND USE APPROVED BY					% INCREASE	PLEASE CHECK ONE OR MORE			
REMARKS:						<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			
					DATE	JOB DESCRIPTION		PERMIT VALUE	
					9/21/89	2 CAR GARAGE		7,980	

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 _____
(PRINT) PROPERTY OWNER
(SIGNATURE) PROPERTY OWNER
OR AUTHORIZED AGENT
 DATE _____

BUILDING PERMIT

Inspection Requests 741-5332
General Information 741-5307

For Applicant to Fill In

INSPECTION RECORD

<p>APPROVAL</p> <p>PT. INSPECTION</p> <p>FOUNDATION & LOCATION</p> <p>CONCRETE FLOOR</p> <p>REINFORCING</p> <p>MASONRY</p> <p>ROOF SHTG</p> <p>ROUGH FRAME</p> <p>INSULATION, ENERGY</p> <p>DRYWALL</p> <p>LATH</p> <p>PLAS. BROWN CT</p> <p>LANDSCAPING</p> <p>PRE GUNITE</p> <p>PRE DECK</p> <p>PRE PLASTER</p> <p>PLANNING</p> <p>FINAL</p> <p><i>Expired</i></p>	<p>DATE</p> <p>INSPECTOR</p>																												
<p>WORKER'S COMPENSATION REQUIREMENTS</p> <p>State Compensation Insurance Policy No. _____ Expiration Date _____</p> <p><input type="checkbox"/> I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.</p> <p>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.</p> <p><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 pursuant to this permit.</p> <p><i>[Signature]</i></p>																													
<p>BUSINESS TAX CERTIFICATE INFORMATION</p> <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 70315 of the Busin. and Professional Code, Division 3, Chapter 9, Contractors License Law under the following Section: Owner, Section 70447 Minor work under \$300; Section 70448 <input type="checkbox"/> Employee working for wages only; Section 70449 <input checked="" type="checkbox"/> Other: <i>[Signature]</i></p> <p>(PRINT) PROPERTY OWNER OR AUTHORIZED AGENT _____ DATE _____</p>																													
<p>FEES AND BONDS</p> <table border="1"> <thead> <tr> <th>REV. CODE</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td>ST. BOND</td> <td></td> </tr> <tr> <td>WATER BOND</td> <td></td> </tr> <tr> <td>WATER ASSMT. FEE (ACRG.)</td> <td></td> </tr> <tr> <td>WATER ASSMT. FEE (FT.)</td> <td></td> </tr> <tr> <td>PARKWAY TREE FEE</td> <td></td> </tr> <tr> <td>PARK & REC. FEE (DIST)</td> <td></td> </tr> <tr> <td>DRAIN ASSMT. FEE (DIST)</td> <td></td> </tr> <tr> <td>PLAN RETENTION FEE</td> <td></td> </tr> <tr> <td>BLDG. PLAN CHECK</td> <td><i>pre imp</i></td> </tr> <tr> <td>BLDG. PERMIT FEE</td> <td>15 --</td> </tr> <tr> <td>ISSUANCE</td> <td>41.50</td> </tr> <tr> <td>VALUATION</td> <td>10 --</td> </tr> <tr> <td>TOTAL FEES</td> <td>66.00</td> </tr> </tbody> </table> <p>DATE: 10/25/89</p>		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	<i>pre imp</i>	BLDG. PERMIT FEE	15 --	ISSUANCE	41.50	VALUATION	10 --	TOTAL FEES	66.00
REV. CODE	AMOUNT																												
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VALUATION	10 --																												
TOTAL FEES	66.00																												
<p>AUTHORIZED BY: <i>[Signature]</i></p>																													

<p>ADDRESS</p> <p>12641 HAZEL Ave</p> <p>PERMIT NO.</p> <p>167152A</p> <p>OWNER</p> <p>THAI & TRAN 636-1A19</p> <p>MAILING ADDRESS</p> <p>12641 HAZEL Ave 92641</p> <p>ARCH</p> <p>ENGR</p> <p>MAILING ADDRESS</p> <p>12641 HAZEL Ave 636-1A19 CA 92641</p> <p>STATE LIC. NO. & TYPE</p> <p>INSPECT</p> <p>15.00</p> <p>B-PER</p> <p>41.50</p> <p>ISS</p> <p>10.00</p> <p>CASH</p> <p>66.50</p> <p>VALIDATION</p> <p>1#B626A10-25'89</p> <p>CONTRACTOR</p> <p>OWNER</p> <p>MAILING ADDRESS</p> <p>BUILDER</p> <p>CITY</p> <p>ZIP</p> <p>TEL NO.</p> <p>STATE LIC. NO. & TYPE</p> <p>PRESENT BLDG. USE</p> <p>PROPOSED BLDG. USE</p> <p>DESCRIBE WORK TO BE DONE</p> <p>Asphalt Shingles over asphalt shingles Re Roofing</p> <p>NEW <input type="checkbox"/> ADD'N <input type="checkbox"/> ALTER <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/></p> <p>FLOOR AREA (SQ. FT.)</p> <p>1800</p> <p>NO. OF STORIES</p> <p>NO. OF DWELLING UNITS</p> <p>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.</p> <p>A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.</p> <p>RELOCATION</p> <p>PRESENT BLDG. ADDRESS</p> <p>MOVING CONTRACTOR</p> <p>ADDRESS</p>
--

CITY OF GARDEN GROVE
Development Services Department

ELECTRICAL PERMIT

Inspection Requests
741-5332

General Information
741-5307

INSPECTION RECORD

For Applicant to Fill in

APPROVAL	DATE	RIG. CONDUIT	
		UG	OH
Underground			
Conduit			
Wiring - Rough	11 2 87		
Heater			
Fixtures & Trim			
Motors			
Other			
Service			
FINAL	Approved 4-29-91		
Utility Notified			
IDENTIFICATION CODE			
BUILDING PERMIT NO. SIGN PERMIT NO. VENT. HEAT. AIR COND. PERMIT NO.			

IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE
Residential (R-1 & R-2) sq. ft.	484		7.25
Garage, Resid. (M) sq. ft.			
Service Meter, Single Phase			
Service Meter, Three Phase			
Add'l Meter, Three Phase			
Temporary Power Pole			
Pole, Power, Light, etc.			
Sub-Panels 1 φ			
Sub-Panels 3 φ			
Outlets			
Fixtures			
Fixtures, Merc. Quartz, etc.			
Heater—Not Over 1650 W			
Washer			
Dryer			
Hot Water Heaters			
Dishwasher			
Domestic Range or Oven			
Disposal			
Power Apparatus—H.P., K.W. or K.V.A. Motors, Transformers, etc.			
Not Over 1 each			
Over 1, Not Over 10 each			
Over 10, Not Over 30 each			
Indv. Circuits			
Time Clock			
Sign			
Sign Hookup			
Plan Retention Fee			
Plan Check			
Permit	Min.		10.00
Issuance			10.00
TOTAL FEES			20.00

LAND USE		DATE	10/1/89
AUTHORIZED BY	<i>[Signature]</i>		

ADDRESS
126A1 HAZEL AVE
TRACT NO. BLK NO. TRACT NO. ELECTRIC PERMIT NO.

OWNER
THAI TRAYN
PHONE 167258A
636-1419

OWNER'S ADDRESS
126A1 HAZEL AVE
CITY GARDEN GROVE CA 92641

NEW BUILDING OR EXISTING BUILDING ADDITION - AREA
REMODEL AREA

VALIDATION
SQ. FT. E-PER ISS 10.00
ISS 10.00
WILD 10.00

ELECTRICAL CONTRACTOR
OWNER
CITY PHONE 636-1419

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 2700 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 pursuant to this permit.

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 7063

Other: *[Signature]*

(PRINT) PROPERTY OWNER (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT DATE

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

BUILDING PERMIT

Inspection Requests 741-5332
General Information 741-5307

For Applicant to Fill in

INSPECTION RECORD

OCCUPANCY TYPE M FIRE SPRINK. PLANS FRONT LEFT RIGHT REAR 201 R R R 8905	APPROVAL PRE INSPECTION FOUNDATION & LOCATION CONCRETE FLOOR REINFORCING MASONRY R. P. SHIT ROUGH FRAME INSULATION, ENERGY DRYWALL PLAS. BROWN CT. LANDSCAPING	DATE 5-26-89 4-6-89	INSPECTOR [Signature] [Signature]
ADDRESS 12641 HAZEL Ave 6692641 LOT NO. CLK NO. TRACT NO. PERMIT NO. 164322A	OWNER THAI TRAN Q TEL. NO. 636-1419 MAILING ADDRESS 12641 HAZEL Ave 6692641 CITY STATE LIC NO. & TYPE	CITY ZIP	PRESENT BLDG. USE SFD DESCRIBE WORK TO BE DONE Build Block wall around house 6" thick.
G.C. & M.T.D.S. FEE REC'D. PARCEL MAP R/W DEDICATION ST. BOND WATER BOND WATER ASSMT. FEE (ACRG.) WATER ASSMT. FEE (FT.) PARKWAY TREE FEE PARK & REC. FEE (DIST.) DRAIN ASSMT. FEE (DIST.)	FEE'S AND BONDS REV. CODE AMOUNT 40 95 63 50 10 00	TOTAL FEES 114 45	EXPIRATION DATE 5/24/89
PLANNING ACTION LAND USE APPROVED BY REMARKS [Signature]	WORKER'S COMPENSATION REQUIREMENTS State Compensation Insurance Policy No. _____ 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 whatsoever of injury or bodily damage resulting from work performed relevant to this permit.	BUSINESS TAX CERTIFICATE INFORMATION I certify that the following Contractor's License No. and Classification _____ is in full force and effect.	A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.
G.C. & M.T.D.S. FEE REC'D. PARCEL MAP R/W DEDICATION ST. BOND WATER BOND WATER ASSMT. FEE (ACRG.) WATER ASSMT. FEE (FT.) PARKWAY TREE FEE PARK & REC. FEE (DIST.) DRAIN ASSMT. FEE (DIST.)	FEE'S AND BONDS REV. CODE AMOUNT 40 95 63 50 10 00	TOTAL FEES 114 45	EXPIRATION DATE 5/24/89
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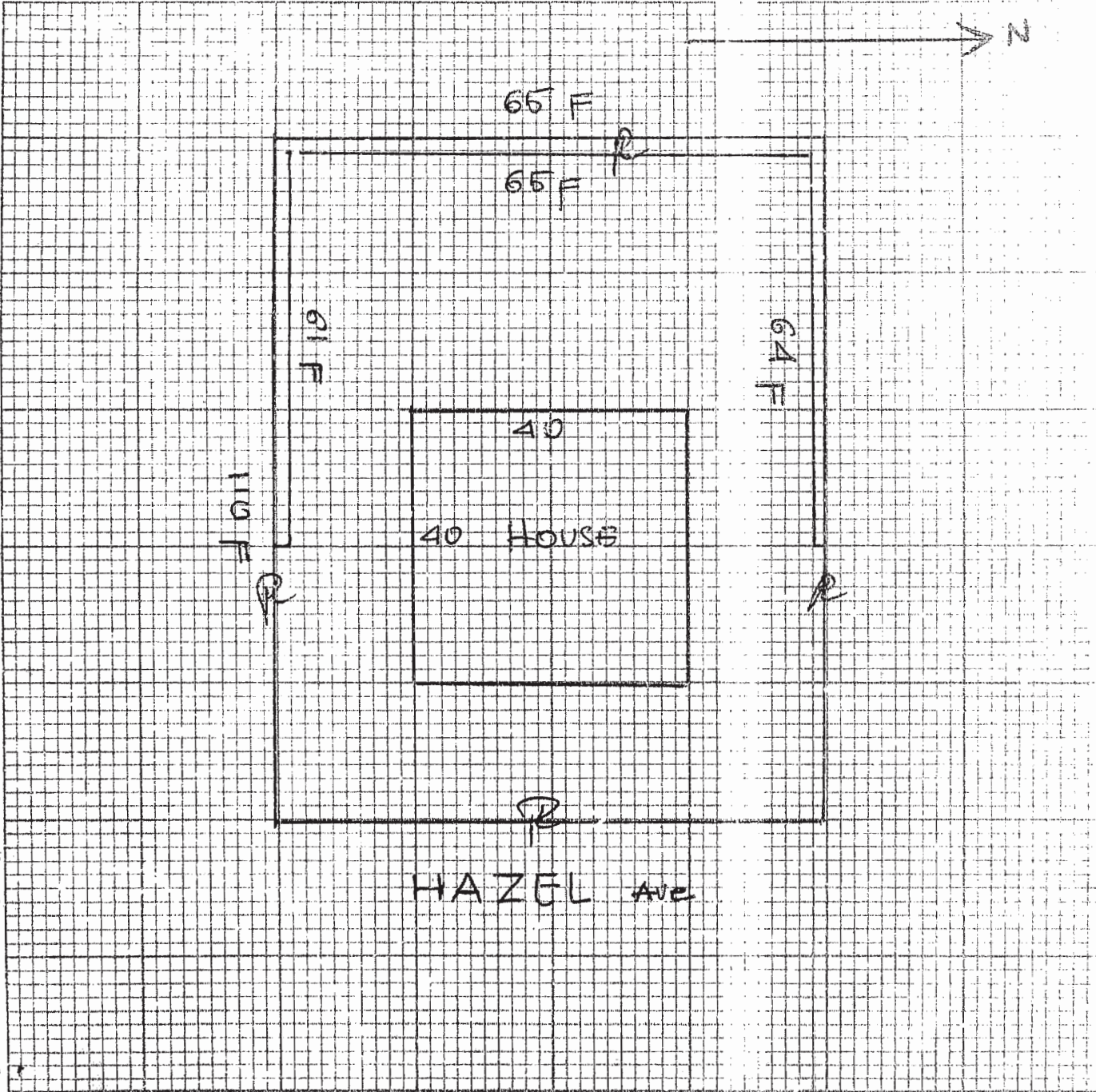
CITY OF GARDEN GROVE

PLOT PLAN

DEVELOPMENT SERVICES DEPARTMENT

FRONT	LEFT	RIGHT	REAR	USE ZONE	LOT SIZE	JOB ADDRESS	PERMIT NO.
						12641 HAZEL Ave GG 92641	114322 A
					LOT COVERAGE	ASSESSORS PARCEL NO.	LOT
						133282 12	
					% INCREASE	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	
					DATE	JOB DESCRIPTION	PERMIT VALUE
					5-24-89	BLOCK WALL	3534-

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 THAI TRAN
(PRINT) PROPERTY OWNER

Thai Tran
REGISTERED PROFESSIONAL ENGINEER
CALIFORNIA LICENSED AGENT

5-24-89
DATE