

# CERTIFICATE of OCCUPANCY

## CITY OF GARDEN GROVE - PUBLIC WORKS & DEVELOPMENT

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

JOB ADDRESS 14291 Euclid PERMIT NO 160217A

USE OF BLDG. New Retail building GROUP B2 TYPE VII

BLDG. APPROVED BY Dave Martin DATE 11/27/89 USE ZONE FUD

ZONING REMARKS PUD-104-81

BLDG. OWNER New Frontier Enterprises ADDRESS 16444 S. Paramount Blvd, #103 Para.

Patrick P. Importuna BY  DATE 11/29/89

BLDG. OFFICIAL

POST IN A CONSPICUOUS PLACE

# BUILDING PERMIT

Inspection Requests  
741-5332

General Information  
741-5307

For Applicant to Fill in **K O N**

PC # **3250**

## INSPECTION RECORD

OCCUPANCY <b>52</b>	TYPE <b>IN</b>	OCC LOAD	FIRE SPRINK.				APPROVAL	DATE	INSPECTOR
			FRONT	LEFT	RIGHT	REAR			
USE ZONE	Eav. Proj.					PRE INSPECTION			
	Setbacks					FOUNDATION & LOCATION	<b>12/5/88</b>		
PLANNING ACTION <b>PUD-104-81</b>						CONCRETE FLOOR			
LAND USE APPROVED BY <b>Kathryn Watt 10/13/88</b>						REINFORCING			
REMARKS						MASONRY			
						ROOF SHGT			
						ROUGH FRAME			
						INSULATION, ENERGY			
						DRYWALL			
						LATH	<b>11/27/88</b>	<b>DM</b>	
						PLAS BROWN CT			
						LANDSCAPING			
G.G. S&T DIS FEE REQ'D	O.C. S&T DIS FEE REQ'D		DATE	INITIAL					
			REQ'D	PROVIDED					
PARCEL MAP									
R/W DEDICATION									
<b>FEES AND BONDS</b>									
	REV. CODE	AMOUNT							
ST BOND									
WATER BOND									
WATER ASSMT FEE (ACRG.)									
WATER ASSMT FEE (FT.)									
PARKWAY TREE FEE									
PARK & REC FEE (DIST)									
DRAIN ASSMT FEE (DIST)									
PLAN RETENTION FEE									
BLDG PLAN CHECK	*	<b>1,639.82</b>							
BLDG PERMIT FEE		<b>2,455.18</b>							
SSLANCE		<b>10.00</b>							
VALIDATION									
	<b>\$ 624,000.-</b>	<b>TOTAL FEES 4,105.00</b>							
AUTHORIZED BY		DATE							
		<b>10-13-88</b>							
INSPECTOR									

### 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 related to this permit.

PERMIT APPLICANT SIGNATURE: \_\_\_\_\_ DATE: **10/13/88**

### BUSINESS TAX CERTIFICATE INFORMATION

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

(PRINT) CONTRACTOR \_\_\_\_\_ (SIG, NATURE) 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 7045  Employee working for wages only: Section 7053

Other: \_\_\_\_\_

(PRINT) PROPERTY OWNER \_\_\_\_\_ (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT \_\_\_\_\_ DATE **10/13/88**

ADDRESS: **14291 EUCLID AVE ST.**

LOT/BLK/TRACT: \_\_\_\_\_

PARCEL: **0991224**

OWNER: **NEW FRONTIER DEVELOPERS**

MAILING ADDRESS: **1213 6331 AVE PADAMOUNT #0123**

TELEPHONE: **1644 S. PADAMOUNT BLVD # 203 VANNUYS 91401**

ENGR: **T.H. LAYMAN ASSOCIATES**

MAILING ADDRESS: **6515 Van Nuys Blvd VANNUYS 91401**

TELEPHONE: **218-997-THELA**

CONTRACTOR: **OWNER**

MAILING ADDRESS: \_\_\_\_\_

TEL NO: \_\_\_\_\_ STATE LIC NO & TYPE: **312547-B1**

PRESENT BLDG USE: \_\_\_\_\_ PROPOSED BLDG USE: **RETAIL**

DESCRIBE WORK TO BE DONE: **NEW TYPE V.N 1STORY WOOD/STEEL CENTER**

NEW  ADD  ALTER  REPAIR  DEMOLISH

FLOOR AREA: **18,650 ±** NO. OF STORIES: **1** NO. OF DWELLING UNITS: \_\_\_\_\_

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

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

**RELOCATION**

PRESENT BLDG ADDRESS: \_\_\_\_\_

MOVING CONTRACTOR: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

NAME <b>New Frontier Enterprises Inc.</b>		JOB ADDRESS <b>14291 EUCLID STREET</b>		PERMIT NO. <b>160217A</b>	
ADDRESS <b>16444 S. PARAMOUNT, PARAMOUNT</b>		ASSESSOR'S PARCEL NO. <b>23</b>	LOT 	BLOCK 	TRACT <b>Parcel Map 18-720</b>
PLEASE CHECK ONE OR MORE					
<input checked="" type="checkbox"/> New		<input checked="" type="checkbox"/> Addition		<input type="checkbox"/> Alteration	
<input type="checkbox"/> Repair		<input type="checkbox"/> Move		<input type="checkbox"/> Demolish	
DATE <b>7-28-88</b>		JOB DESCRIPTION <b>NEW 1 STORY TYRE VN</b>		PERMIT VALUE <b>624,000</b>	

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.

