

PERMIT NO. : 20696
 Type : P
 Date Issued : 10/05/93
 Title : PLUMBING FOR ABOVE GROUND POOL
 Desc :
 Location : 8802 BLOSSOM AVE
 Suite :
 Parcel number : 21506302
 Occupancy :
 Applicant : OWNER
 8802 BLOSSOM AVE

Inspector area: K9

Owner: NGUYEN, DAT V (JT)

Phone Number :

SWIMMING POOL PIPING	1	3.00
Issuance	1	15.00
CULTURAL ARTS	1	1.00
GENERAL PLAN	1	2.00

P PER	3.00
MISC.	2.00
MISC.	1.00
ISS	15.00

DW6160A10-05'93 CASH 21.00

INSPECTION RECORD

APPROVAL DATE INSPECTOR

Soil Piping _____
~~GROUND PLUMBING~~ _____
 Rough Plumbing _____
 Gas Piping _____
 Gas Vent _____
 Sewer _____
 Main Drain _____
 Vacuum Lines _____
 Water Heater _____
 Backwash _____
 Water Lateral _____

3223 PERMITS/GENE	2.00
3224 PERMITS/CULT	1.00
3228 PLUMBING PER	3.00
3517 ISSUANCE FEE	15.00

21.00

EXPIRED

741-5332

741-5307

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.

FINAL _____

Utility Notified _____

PERMIT NO. : 20695
 Type : E
 Date Issued : 10/05/93
 Title : ELECTRIC FOR ABOVE GROUND POOL
 Desc :
 Location : 8802 BLOSSOM AVE
 Suite :
 Parcel number : 21506302
 Occupancy :
 Applicant : OWNER
 8802 BLOSSOM AVE

Inspector area:K9

Owner: NGUYEN, DAT V (JT)

Phone Number :

Outlets 1-20	1	.75
Issuance	1	15.00
CULTURAL ARTS	1	1.00
GENERAL PLAN	1	2.00
MIN PERMIT FEE	1	14.25

E PER 15.00
 MISC. 2.00
 MISC. 1.00
 ISS 15.00

DN6159A10-05'93 CASH 33.00

INSPECTION RECORD

APPROVAL DATE INSPECTOR

Underground _____
 Conduit _____
 Wiring - Rough _____
 Heater _____
 Fixtures & Trim _____
 Motors _____
 Ufer _____
 Service _____

3200		14.25
3223	PERMITS/GENE	2.00
3224	PERMITS/CULT	1.00
3227	ELECTRICAL P	0.75
3517	ISSUANCE FEE	15.00

33.00

EXPIRED
[Signature]

[Signature]

741-5332 If work is not started within
 180 days from date of issue or
 741-5307 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.

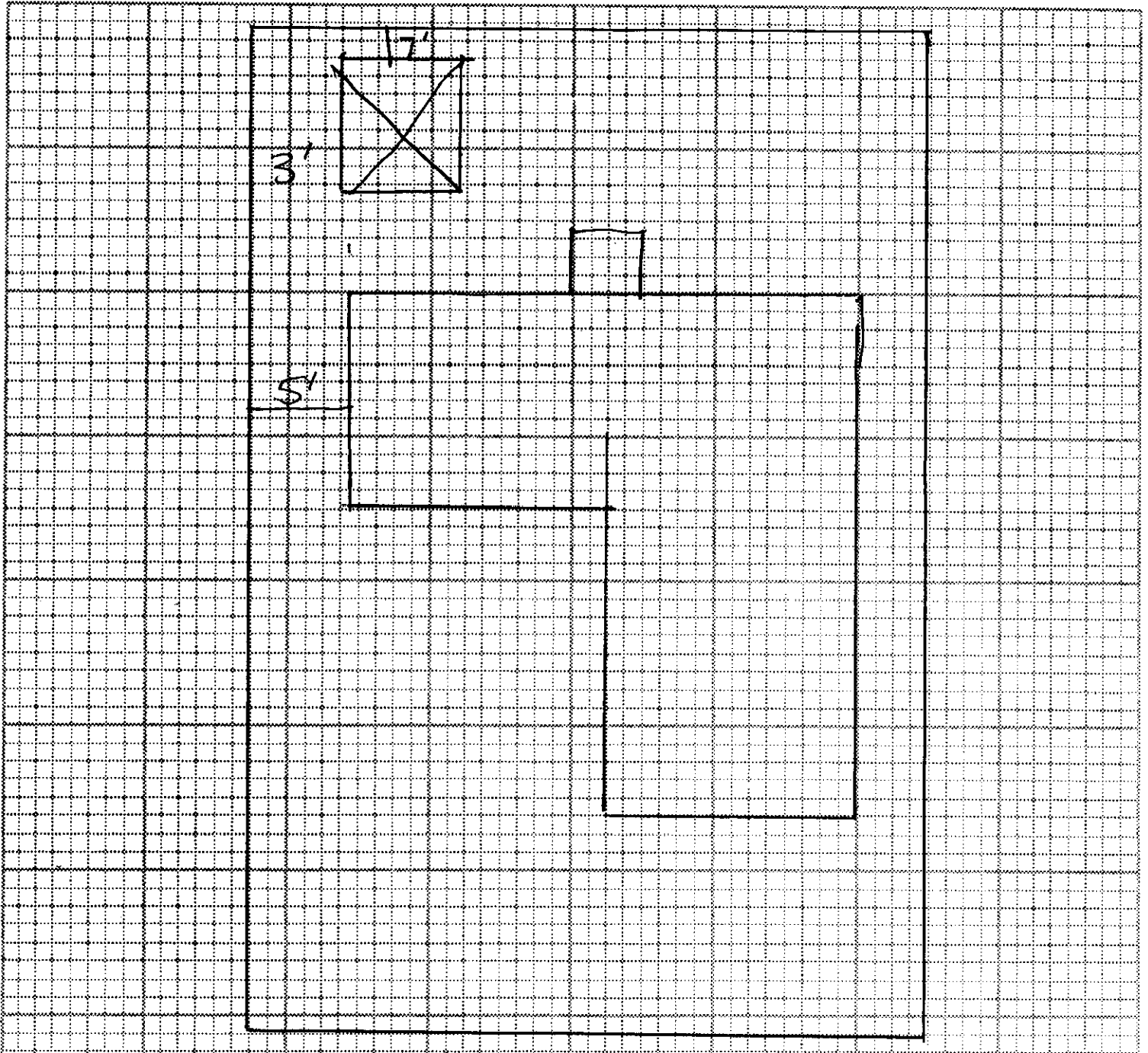
FINAL _____
 Utility Notified _____

CITY OF GARDEN GROVE - DEVELOPMENT SERVICES DEPARTMENT - PLOT PLAN FORM

Planning action:	Use zone:
Land use approved by: <i>JW</i>	Lot size:
Remarks:	Lot coverage:
Date: <i>10/5/93</i>	% increase:

Job address: <i>8802 Blossom</i>	Permit No.:		
Assessor Parcel No. <i>215-063-02</i>	Legal desc.:		
Occupancy:	Const. type:	Sprinklers:	Value:
<input type="checkbox"/> New	<input type="checkbox"/> Alter	<input type="checkbox"/> Add	<input type="checkbox"/> Repair <input type="checkbox"/> Demo

Job Description:
Above ground pool



White: Inspection
 Yellow: Assessor
 Pink: Permittee

I certify the information hereon is complete & correct.

Owner's name (print) Signature (owner/agent) Date



General Information: 714-741-5307

CITY OF GARDEN GROVE - DEVELOPMENT SERVICES DEPARTMENT

Inspection Requests: 714-741-5332

PERMIT (PAGE 2 of 2)

PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 8802 BLOSSOM AVE
 Suite :
 PERMIT NO. : 85969
 Permit Type : BUILDING
 Type : B10
 MASONRY FENCES
 Owner : CHRIS T NGUYEN & NINI HOANG
 Applicant : NINI HOANG
 Phone : 837-3946

Contractor : OWNER
 Address : 8802 BLOSSOM AVE
 CityStZip :
 Phone :

Insp Dist : K9
 Date : 07/05/06
 Parcel No : 21506302

Value : 4000
 Floor area : 540

PROPOSED WORK:

02 - BLOCKWALL

6' X 90' BLOCKWALL ON P.L. BETWEEN 8802 & 8792 BLOSSOM AVE

FEEES

111 32410 Permit	1	120.87
111 32401 issuance	1	35.00
942 22130 General Plan	1	6.03
080 32550 Cultural Arts	1	2.97
TOTAL		164.87

APPROVAL DATE INSPECTOR

Pre Inspect _____
 Foundation _____
 Concrete Floor 7/14/06 TCH
 Reinforcing _____
 Masonry _____
 Roof Shtg _____
 Rough Frame _____
 Insul / Energy _____
 Drywall _____
 Lath _____
 Plas. Brown Ct. _____
 Landscaping _____
 Pre Gunitite _____
 Pre Deck _____
 Pre Plaster _____
Pre final 7/25/06 TCH
 Planning Final _____
 Bldg Final 7/28/06 TCH
 Utility Notified _____

AUTHORIZATION

Issued By: janetw Date _____

DECLARATION

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

Applicant's Signature Nini Hoang
 Print Name Nini Hoang Date 7/5/06

***** VALIDATION *****

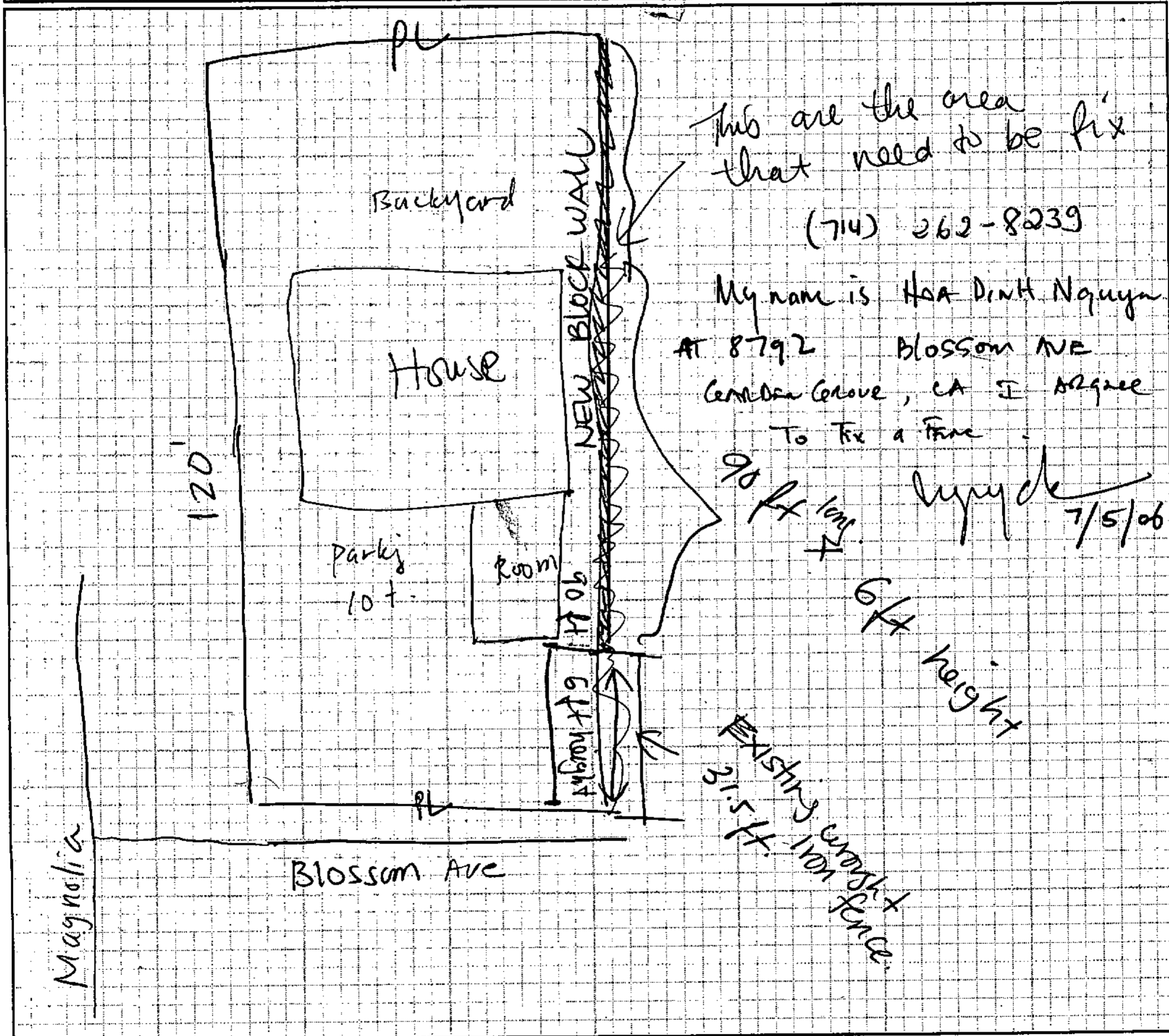
PAID ON 05 Jul 2006 AT 10:31
 RECEIVED BY KATRENAS 198.245.206.215/2 TRANS# 46
 CASH PAID = \$170.00 CASH RETURNED = \$5.13
 TOTAL PAID = \$164.87

Plot Plan Form

Planning Action:	Zone: <u>R-1</u>	Coverage:	Job Address: <u>8802 Blossom Ave</u>	Permit No.: <u>85969</u>
Approved By: <u>[Signature]</u>	Date: <u>7/5/06</u>	Increase:	Assessor Parcel No.: <u>21507302</u>	Tract & Lot #:
Remarks:			Occupancy:	Const. Type:
			<input type="checkbox"/> New	<input type="checkbox"/> Alter <input type="checkbox"/> Add <input type="checkbox"/> Repair <input type="checkbox"/> Demo
			Value: <u>4000</u>	

Job Description:

Brick Block wall for fence
6' x 90'



I certify the information hereon is complete & correct.

Nmi Hoang
Owner's Name (print)

[Signature]
Signature (owner/agent)

7/5/06
Date



**CITY OF GARDEN GROVE
BUILDING SERVICES**

8802 BLOSSOM AVE
PERMIT#:14-2385
ISSUED:10/10/14

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

Owner HOANG,NINI NGUYEN,CHRIS THANH		Telephone	Zip 92841	Building Address 8802 BLOSSOM AVE																																					
Address 8802 BLOSSOM AVE		City Garden Grove	State CA	Suite/Unit/Building																																					
Applicant HOANG,NINI NGUYEN,CHRIS THANH		Telephone	Zip 92841	TYPE Reroof	ISSUED BY Joanne Chung																																				
Address 8802 BLOSSOM AVE		City Garden Grove	State CA	Inspector Dist. K9	Parcel Number 21506302																																				
Floor Area(sq. ft.)		Residential/Commercial Residential		LOT	TRACT																																				
Job Description TEAR OFF EXIST/INSTALL 1 LYR 30# FELT & 35 YR SHINGLE				Valuation \$5,120.00																																					
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.				Final Inspector's Signature <i>TCH For DW</i> Date <u>11/13/14</u>																																					
<input checked="" type="checkbox"/> Applicant's Signature <i>[Signature]</i>				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="writing-mode: vertical-rl; transform: rotate(180deg);">F E E S</th> <th>Description</th> <th>Quantity</th> <th>Amount</th> </tr> <tr> <td></td> <td>Building Permit Document Retention Fee</td> <td>1</td> <td>\$5.00</td> </tr> <tr> <td></td> <td>Building Technology Fee</td> <td>1</td> <td>\$10.00</td> </tr> <tr> <td></td> <td>BSASRF State Fee</td> <td></td> <td>\$1.00</td> </tr> <tr> <td></td> <td>Issuance Fee</td> <td>1</td> <td>\$35.00</td> </tr> <tr> <td></td> <td>Reroof Permit Fee</td> <td></td> <td>\$145.00</td> </tr> <tr> <td></td> <td>One-Stop Construction Services Center Surcharge</td> <td></td> <td>\$2.90</td> </tr> <tr> <td></td> <td>Reroof Valuation</td> <td>5120</td> <td>\$5,120.00</td> </tr> <tr> <td></td> <td>TOTAL</td> <td></td> <td>\$198.90</td> </tr> </table>		F E E S	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	5120	\$5,120.00		TOTAL		\$198.90
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	Reroof Valuation	5120	\$5,120.00																																						
	TOTAL		\$198.90																																						
Print Name <u>CHRIS NGUYEN</u> Date <u>10/10/14</u>																																									

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

Department of Building

CITY OF

BERNARD C. ADAMS, Director

GARDEN GROVE

ZONING AND BUILDING

Use Zone <u>R-1</u>	Main Use	Acc. Use	Var. No.
St. Set Back - <u>6' HSE</u>			PL
Side Yard <u>C</u>			Projection
Side Yard <u>4 1/2</u>			Projection
Rear Yard <u>4 1/2</u> Stories			Parking Req'd.
Zoning Approved By <u>ELM</u>		Date <u>1-7-63</u>	
Group <u>J</u>	Type <u>II</u>	Plan Ck. <u>ELM</u>	
Remarks: <u>STD. GAR. PLAN</u>			

For Applicant to Fill in

(USE INK)

1

Job Address	Permit No.
<u>8802 Blossom Av.</u>	<u>21515</u>
Lot No. <u>60</u>	Tract No. <u>2146</u>
Blk No.	
Please Attach Maps & Bounds (2 Copies)	
Owner <u>LORRAINE H. (ORZCO) HAMBRIC</u>	
Address <u>882 BLOSSOM AV. G.6.</u>	
Description of Work	
New <input type="checkbox"/>	Add <input checked="" type="checkbox"/>
Remodel <input checked="" type="checkbox"/>	Restore <input type="checkbox"/>
Use of Building <u>Hobby Room Wk-shop</u>	
Area of Building <u>426</u>	Valuation <u>\$8500</u>

Validation	<u>JAN-7-63</u>	<u>11 090 U***26.00</u>
Arch. or Engr.	<u>OWNER</u>	Address <u>Blossom Av.</u>
Contractor <u>OWNER</u>		Phone <u>LE-9-3787</u>

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location	<u>1/18/63</u>	<u>J.W.W.</u>
Reinforcing		
Roof Shig.		
Rough Frame		
Lath or Drywall	<u>2/15/63</u>	<u>Jun</u>
Plas. Brown Ct.	<u>2/15/63</u>	<u>Jun</u>
Other		
Land Use		
Final	<u>11-15-63</u>	<u>R.P.P.</u>
Utility Release		

FEES

Plan Check	\$ <u>None</u>	Building Permit	\$ <u>6.00</u>
Bond	\$	Expiration Date	
Permit Authorized By <u>ELM</u>		Date <u>1-7-63</u>	

I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all ordinances and State laws regulating building construction. I hereby certify that I am properly registered with and/or licensed as required by the City of Garden Grove and/or State of California, or that I am the legal owner of the above described property, and I certify that in the performance of the work for which this permit is issued I shall not employ any person in violation of the workmen's compensation laws of the State of California.

Signature of Permittee Lorraine Hambric Date 1-7-63
 Address 8802 Blossom Av. Lic. No.

RELOCATION

PRESENT BLDG. ADDRESS	
MOVING CONTRACTOR	ADDRESS

PUBLIC WORKS

Street Address <u>O.K.</u>	By <u>J.W.W.</u>
Record of Survey	REQUIRED
R/W Dedication	PROVIDED
Bonds	
Encroachment Permit	
Remarks	

Routing: #1 Bldg. Inspector #2 Office File #3 Statistics #4 Owner

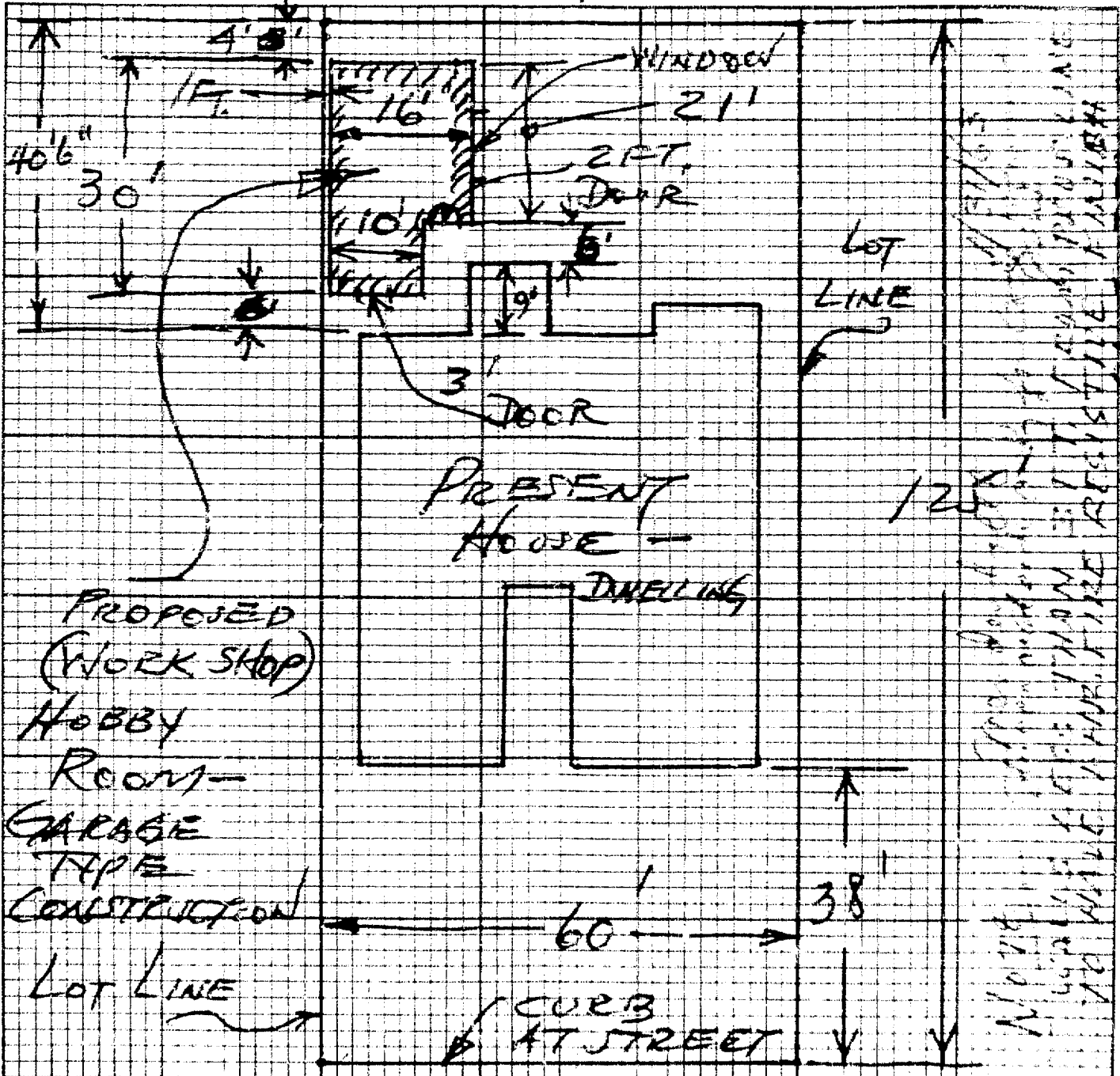
PLOT PLAN

Department of Building
 Bernard C. Adams
 Director

CITY OF
 GARDEN GROVE

Job Address	8802 Blossom Ave	Permit Number	2115
Lot	60	Tract	2146

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



Note: The proposed workshop is to be constructed on the existing driveway and garage area. The existing house is to remain. The lot is 60 feet wide and 40 feet 6 inches deep. The proposed workshop is 30 feet wide and 40 feet 6 inches deep. The existing house is 21 feet wide and 38 feet deep. The driveway is 16 feet wide. The garage is 5 feet wide. The door to the house is 2 feet wide. The door to the workshop is 3 feet wide. The lot line is on the right side. The curb is at the street.

I certify the information hereon is complete and correct.
 Routing: #1 Building Inspector #2 Office File #3 Owner

By _____ Date _____

ELECTRIC PERMIT

Department of Building
Adams
Director
Permit No.

CITY OF
GARDEN GROVE
JE 1-4200

TRACT NO.

Applicant Fill in (use ink)
Job Address

Electric Permit No.

8802 Blossom Ave, 92553

Owner MRS. LERRAINE (CREZEE) HAMERIC

Owner's Address 8802 Blossom Ave

New Bldg. Old Bldg. Use Wired, etc

Electrical Contr. OWNER

Address SAME

Phone LE 9-3787 State License No. FCB 13-63 11 085 H***2430

Validation

I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all ordinances and State laws regulating electrical wiring.

I hereby certify that I am properly registered with and/or licensed as required by the City of Garden Grove and/or State of California, or that I am the legal owner of the above described property, and I certify that in the performance of the work for which this permit is issued I shall not employ any person in violation of the workmen's compensation laws of the State of California.

Signature of Permittee Asst. Dir. [Signature] Date 2-13-63

SIGNS

One Sign—1 Transformer	2.00
Additional Sign, Same Location	1.00
Additional Transf. or flashers, Time Clock	1.00
Lamp Holding Devices, 1st 20	.05
Lamp Holding Devices, Next 100	.03
Sign and 1 Transformer, Moved	
Altering or Changing Lettering	
For Connecting (Hook-up)	
Permit Fee	2 00

Total Fee

	Date	Inspector
Conduit		
Wiring		
Fixtures		
U. G.		
Sign Footing		
Final	<u>11-15-63</u>	<u>[Signature]</u>
Utility Notified		

Service Size Amp. Wire Conduit

Building Permit No.

	NUMBER	EA.	FEE
Residence Sq. Ft.			.01
Residential Garage Sq. Ft.	<u>459</u>		<u>.005</u>
Services			<u>1.00</u>
Meters			1.00
Fixtures 1st 20			.20
Fixtures, Additional			.10
Fixtures, Mercury Vapor			1.00
Outlets, 1st 20			.20
Outlets, Additional			.10
Any Pole			2.00
Dryer			1.00
Dishwasher			1.00
Furnace			1.00
Garbage Disposal			1.00
Fan			1.00
Heater Inc. 1650 W			.50
Domestic Range			1.00
Domestic Oven			1.00
Motors—Not Over 1 H.P.			1.00
Motors Over 1 Not Over 3 H.P.			1.50
Motors Over 3 Not Over 8			2.00
Motors Over 8 Not Over 15			2.50
If Not Listed Above, See Code			
Permit Fee			2 00
Total Fee			<u>4 30</u>

Inspected By

OK

Date

2/13/63

CITY OF GARDEN GROVE, CALIFORNIA

Development Services Department

11391 ACACIA PARKWAY, P.O. BOX 3070, GARDEN GROVE, CALIFORNIA 92642

Address : 8802 BLOSSOM AVE
 Parcel No: 21506302 Type: B33

Owner : NGUYEN, HIEN DINH (UM)
 Address: _____
 Phone: _____

Architect: _____
 Address : _____

LIC: _____ EXP: _____ PH: _____

Suite: _____ PERMIT NO.: 12855
 Date : 04/23/92 Insp Dist: K9

Applicant: PERFECT CONSTRUCTION
 Address : 10512 BOLSA AVE, #105
 WESTMINSTER CA 92683
 Phone: 714-554-4696

Engineer: _____
 Address : _____

LIC: _____ EXP: _____ PH: _____

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. _____ Expiration Date _____

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.

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

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

[Signature] 4/23/92
APPLICANT SIGNATURE DATE

BUSINESS TAX CERTIFICATE INFORMATION

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

CONTRACTOR'S LICENSE NO. DATE

[Signature] 4/23/92
(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 \$200; Section 7045 Employee working for wages only; Section 7053

(SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT DATE

Proposed Work: REROOF. T O OLD ROCK, NEW COMP SHINGLES 0 VER 2 LAYERS OF 15 LB FELT

Value : 1700
 Floor Area: 1300

Permit Issuance	1	39.70
PRE INSPECTION	1	15.00
GENL PLAN/CULT ART	1	5.50

B PER	39.70
INSPCT	15.00
MISC.	5.50
ISS	10.00

0H7337A 4-23-92 CASH 70.20

3200	20.50
3226 BLDG PERM &	39.70
3517 ISSUANCE FEE	10.00

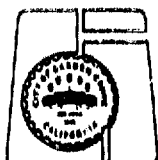
INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Inspection	7-12-92	TH by [Signature]
Foundation		
1st Floor		
Roofing		
Exterior		
Lightg		
Interior Frame		
Energy		
Foundation Ct.		
Excavating		
Foundation		
Deck		
Plaster		
Finishing Final		
Occupancy Final	expired	
Utility Notified	12-2-93	[Signature]

Authorized by: *[Signature]* TOTAL FEES 70.20

Inspection Requests 741-5332
 General Information 741-5307

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.



BUILDING PERMIT

Department of Building CITY OF
B. C. ADAMS, Director GARDEN GROVE

ZONING AND BUILDING

Zone	Main Use	Acc. Use	Var. No.
St. Set Back	PL	FL	
Side Yard	CHANGE Projection		
Side Yard	NO Projection		
Rear Yard	3	No Parking Sp. Req'd.	
Zoning Approved By	ELM	Date	8-11-60
Group	I-1	Type	V-1
Plan Ct.	ELM		
Remarks:	Plans		

SEE BACK

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location	8-5-60	B. C. Adams
Reinforcing		
Roof Shdg.	8-31-60	
Rough Frame	8-31-60	
Lat. or Dry	8-31-60	
Plas. Brown Cr.	8-29-60	
Other		
Land Use		
Final	12-31-62	
Utility Release		

FEES

Plan Check	1	6.00	Building Permit	12.00
Board	1		Expiration Date	
Permit Authorized By	ELM 8-11-60			

Routings: #1 Bldg. Inspector #2 Office File #3 Statistician #4 Owner

K-9 1. bill letter of explanation with Magnolia

For Applicant to Fill in (Use Ink)

Job Address: 8802 Blossom Ave. 12123 Permit No. 12123

Lot No. 60 Tract No. 2146 Blk No.
 Please Attach Metes & Bounds (2 Copies)

Owner: LORRAINE H. OROZCO (new)
Owner's Address: 8802 Blossom Ave. G.G.

Description of Work:
 New Add'n Remodel Relocate

Use of Building: DWLG. Valuation: \$4000.00

Area of Building: REAR 216, ADD. 638, GAR. 324

Validation:
 Arch. or Engr. OWNER Address: 8802 Blossom Ave.
 Contractor OWNER Phone: LE-9-3787

Address: 8802 Blossom Ave. RELOCATION

I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all ordinances and State laws regulating building construction. I hereby certify that I am properly registered with and/or licensed or required by the City of Garden Grove and/or State of California, or that I am the legal owner of the above described property, and I certify that in the performance of the work for which this permit is issued I shall not employ any person in violation of the workmen's compensation law of the State of California.

Signature: Lorraine H. Orozco Date: 8-11-60
Permitted Address: 8802 Blossom Ave. Lic. No.

PRESENT BLDG. ADDRESS: 8802 Blossom Ave. RELOCATION

MOVING CONTRACTOR ADDRESS:
 PUBLIC WORKS

Street Address: OK by T. S. W. 8740

Record of Survey
 R/W Dedication
 Bonds
 Encroachment Permit
 Remarks

PLOT PLAN

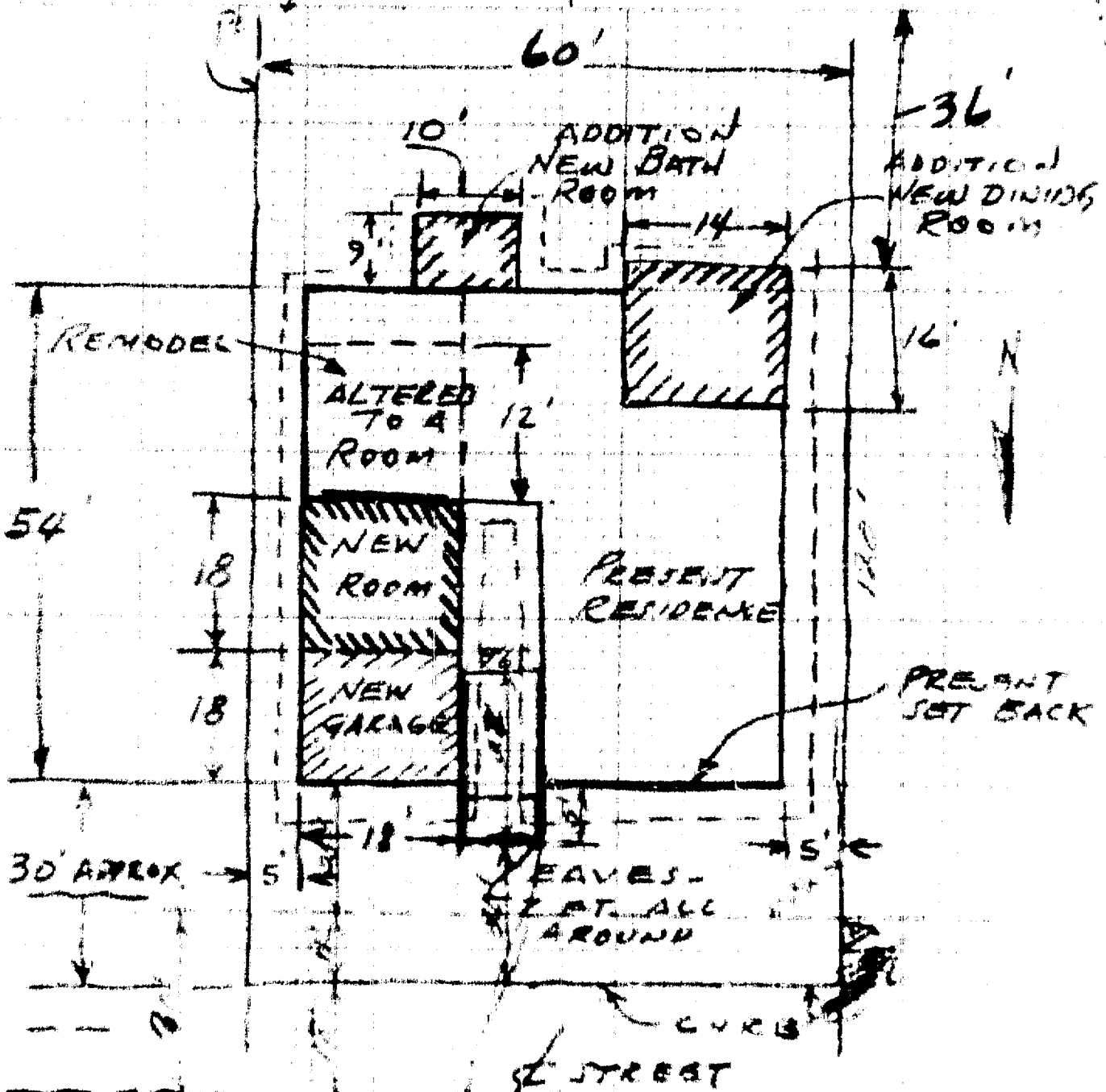
Department of Building
 E. C. Adams

CITY OF
 GARDEN GROVE

Job Address 4852 BLOSSOM AVENUE Permit Number 12173

THIS DIMENSION PLOT PLAN COMPLETELY SHOWING ALL BLDGS ON THE LOT AND THEIR USE

Lot 60 Tract 2146 Blk.



Verify the information furnished herein is complete and correct.

City of Garden Grove Building Department 12000 S. Orange Avenue, Garden Grove, California 92647

BUILDING PERMIT

DEVELOPER SERVICES DEPT., GARDEN GROVE 537-4200

FIGURE 7 OR 8 OCCUPANCY I TYPE V OCC. LOAD

USE ZONE R-1 FRONT LEFT RIGHT REAR

EAVE PROJ. SETBACKS

PARK SPACES REQUIRED

PLANNING COMMISSION

Law Use Approved By *[Signature]* Date 10-4-71

FEES AND BONDS

AMOUNT	REQ'D	PROVIDED
PERM. MAP		
STREET BOND		
WATER BOND		
WATER ASSMT. FEE		
FIRE HYDRANT FEE		
PAVEMENT FEE		
PARK & REC. FEE DIST.		
DRAIN ASSMT. FEE DIST.		

Not required

Remarks: *Double Fee*
Stop work order issued

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location		
Reinforcing		
Roof Shtg.		
Rough Frame		
Lath or Drywall		
Plas. Brown Ct.		
Other		
Final	5-1-72	<i>[Signature]</i>
Utility Release		

VALUATION (NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT., ETC.) \$ 400

FEES
Plan Check \$ Building Permit \$1000

Permit Authorized By *[Signature]* Date 10-4-71
1 Original

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.

Job Address *2802 Blossom* Permit **048240 A**
48240 A

Lot No. *60* Tract No. *2146*

Owner _____ Tel. No. _____

Mailing Address _____ City _____ Zip No. _____

Arch. Engr. State Lic. No. _____ Tel. No. _____ Zip No. _____

Mailing Address _____ City _____ Zip No. _____

Contractor *SAC Roofing* Lic. No. _____ Tel. No. *213057* Zip No. _____

Mailing Address _____ City _____ Zip No. _____

PRESENT BLDG. USE _____ PROPOSED BLDG. USE _____

Validation 10-4-71 11 184 U***10.00

DESCRIBE WORK TO BE DONE *Roof*

NEW ADD'N ALTER REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) *20 59* 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 the performance of the above work I shall not employ any person in violation of the Labor Code of California relating to Worker's Compensation. In addition, 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 not contained relevant to this permit.

CONTRACTORS SIGN BELOW

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

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

OWNER-BUILDER SIGN BELOW

I certify that I am exempt from the provisions of Chapter 3, Division 3, Code of the 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 with 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.

Owner's Signature _____ By _____ Authorized Agent _____ Date _____

If work is not started within 60 days from date of issue or if abandoned for more than 120 days, this permit will be null and void.

RELOCATION

PRESENT BLDG. ADDRESS _____

MOVING CONTRACTOR ADDRESS _____

INSPECTION RECORD

For Applicant to Fill in

P.C. #

OCCUPANCY	I	TYPE	VN	OCC. LOAD	FIRE SPRINK.	
USF. ZONE	R-1	FRONT	LEFT	RIGHT	REAR	
FIRE ZONE	3	Eav Proj.	SEE PLOT PLAN			
PLANNING ACTION	STDS B-507		DATE 12-14-79			
LAND USE APPROVED BY	<i>[Signature]</i>					
REMARKS						

G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.	DATE	INITIAL

REQ'D	PROVIDED

FEES AND BONDS	
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	
BLDG. PERMIT FEE	
ISSUANCE	
VALUATION	
\$ 3500.00	

TOTAL FEES CITY PROJECT NO CHARGE
DATE 12-14-79

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	2-11-80	<i>[Signature]</i>
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 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] PERMIT APPLICANT SIGNATURE DATE 12/14/79

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 \$100: Section 7048
Employee working for wages only: Section 7053

Other: _____

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

ADDRESS 8802 BLOSSOM

LOT NO. 60 BLK. NO. 2146 TRACT NO. 113075A PERMIT NO. 113075A

OWNER CITY OF GARDEN GROVE TEL. NO. 638-6851

MAILING ADDRESS 11391 ACACIA PKWY G.G. 92640

ARCH ENGR.

MAILING ADDRESS CITY ZIP

TEL. NO. STATE LIC. NO. & TYPE

VALIDATION

CONTRACTOR CITY CETA FORCES CITY ZIP

MAILING ADDRESS CITY ZIP

TEL. NO. STATE LIC. NO.

PRESENT BLDG. USE SFD PROPOSED BLDG. USE SFD

DESCRIBE WORK TO BE DONE Demo (see plot plan), two patio covers, bedroom, return garage to orig. state, re-roof.

NEW ADD ALTER REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) 408 NO. OF STORIES 1 NO. OF DWELLING UNITS 1

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

RELOCATION

PRESENT BLDG. ADDRESS

MOVING CONTRACTOR

ADDRESS

INSPECTION RECORD

FEES

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EACH	\$ FEE
Soil Piping			Water Closet (toilet)			
			Bath Tub			
Ground Plumbing			Shower			
			Lavatory (Wash Basin)			
Rough Plumbing			Kitchen Sink			
			Garbage Disposal			
Gas Piping			Laundry Tub or Tray			
			Water Heater			
Gas Vent			Floor Sink			
			Floor Drain			
Shower			Dish Washer			
			Drinking Fountain			
Main Drain and Vacuum Lines			Urinal			
			Gas System - Outlets			
Water Heater			Building Sewer (First 100 ft.)			
			Building Sewer (Add'l 100 ft.)			
Backwash			Building Sewer (ea. add'l drain)			
			Rainwater Drain			
Water Laterals			Swimming Pool Piping			
			Sand Traps/Receptors			
			Automatic Washing Machine			
			Water Softeners			
			Backwash - Trap			
			Water Laterals			
			Backflow Protective Devices			
			Water Piping (ea. 100 ft.)			
			Lawn Sprinklers (S.F.D. Only)			
			Lawn Sprinklers (other)			
FINAL	2-11-80	<i>WJK</i>				
UTILITY CO NOTIFIED						
IDENTIFICATION CODE			ITEM	CODE	FEES	
			Plan Retention Fee			
			Plan Check			
			Permit Issuance			
			TOTAL FEES CITY PROJECT			
			NO CHARGE			
			LAND USE	AUTHORIZED BY	DATE	
				<i>[Signature]</i>	12-14-79	
BUILDING PERMIT NO.	ELECTRICAL PERMIT NO.					
113075A	113077A					
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.						

ADDRESS: 8802 BLOSSOM

LOT NO.: 60 BLK NO.: 2146 TRACT NO.: PERMIT NO.: 113076A

OWNER: CITY OF GARDEN GROVE 638-6851

OWNER'S ADDRESS: 11391 ACACIA PKWY G.G.

NEW BUILDING OR ADDITION - AREA: SQ. FT. EXISTING BUILDING REMODEL AREA: SQ. FT. OCCUPANCY GROUP: I USE OF BUILDING AND OR NUMBER OF UNITS: SFD

VALIDATION:

PLUMBING CONTRACTOR: CITY CETA FORCES 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 8700 of his permit shall be deemed revoked.

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

[Signature] 12/14/79
PERMIT APPLICANT SIGNATURE DATE

BUSINESS TAX CERTIFICATE INFORMATION

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

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

BUSINESS TAX CERTIFICATE NO. _____ EXPIRATION DATE _____

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

Owner Section 7044 Minor work under \$100; Section 7048

Employee working for wages only; Section 7053

Other: _____

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

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

INSPECTION RECORD

FEES

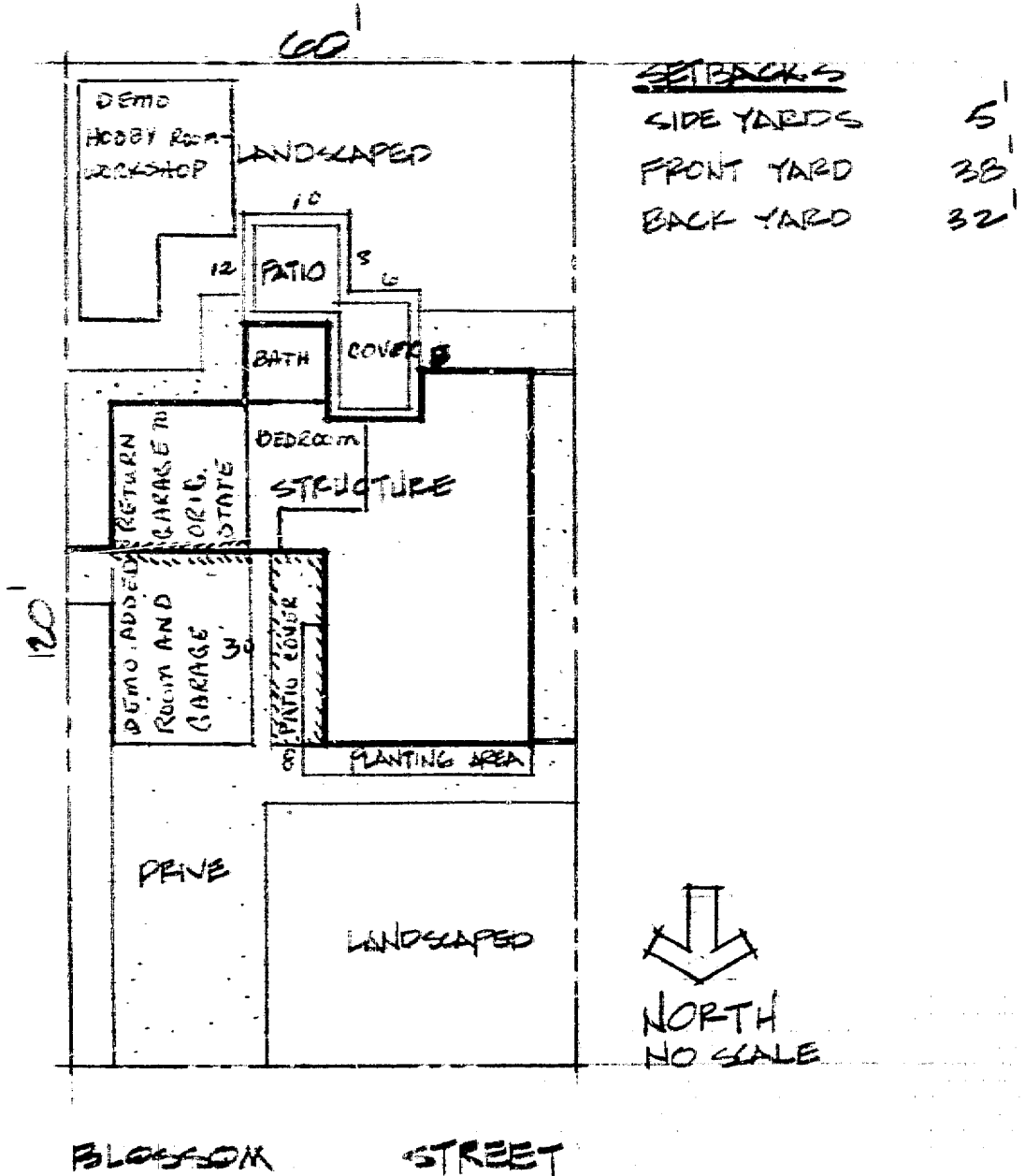
For Applicant to Fill in

<p>SINGLE PHASE SERVICE SIZE 1UG 1OH AMPS VOLTS RIG. CONDUIT</p> <p>THREE PHASE SERVICE SIZE 3 Wire 4 Wire 1UG 1OH AMPS VOLTS RIG. CONDUIT</p> <p>APPROVAL DATE INSPECTOR</p> <p>Underground</p> <p>Conduit</p> <p>Wiring Rough</p> <p>Heater</p> <p>Fixtures & Trim</p> <p>Motors</p> <p>Other</p> <p>Service</p>	<p>IF NOT LISTED BELOW SEE CODE</p> <p>Residential (R-1 & R-3) sq. ft.</p> <p>Garage, Resid. (M) sq. ft.</p> <p>Service Meter, Single Phase</p> <p>Service Meter, Three Phase</p> <p>Add'l Meter, Three Phase</p> <p>Temporary Power Pole</p> <p>Pole, Power, Light, etc.</p> <p>Sub-Panels 1 0</p> <p>Sub-Panels 3 0</p> <p>Outlets</p> <p>Fixtures</p> <p>Fixtures, Meta. Quarts, etc.</p> <p>Heater - Not Over 1800 W</p> <p>Washer</p> <p>Dryer</p> <p>Hot Water Heaters</p> <p>Dishwasher</p> <p>Domestic Range or Oven</p> <p>Disposal</p> <p>Power Apparatus - H.P., K.W. or K.V.A. Motors, Transformers, etc.</p> <p>Not Over 1 each</p> <p>Over 1, Not Over 10 each</p> <p>Over 10, Not Over 30 each</p> <p>Indv. Circuits</p> <p>Time Clock</p> <p>Sign</p> <p>Sign Hoop</p>	<p>NO.</p> <p>EA.</p> <p>FEE</p>	<p>ADDRESS</p> <p>8802 BLOSSOM</p> <p>LOT NO. BLK NO. TRACT NO. ELECTRIC PERMIT NO.</p> <p>60 2146 113077A</p> <p>OWNER PHONE</p> <p>CITY OF GARDEN GROVE 638-6851</p> <p>OWNER'S ADDRESS CITY</p> <p>11391 ACACIA PKWY G.G.</p> <p>NEW BUILDING OR ADDITION AREA EXISTING BUILDING REMOVAL AREA OCCUPANCY (SFD) USE OF BUILDING AND FOR NUMBER OF UNITS</p> <p>50 FT 50 FT I SFD</p> <p>VALIDATION</p> <p>ELECTRICAL CONTRACTOR STATE LIC. NO. & TYPE</p> <p>CITY CETA FORCES</p> <p>ADDRESS CITY PHONE</p>
<p>FINAL 2-11-80 WF</p>			<p>ITEM CODE FEES</p> <p>Plan Retention Fee</p> <p>Plan Check</p> <p>Permit</p> <p>Issuance</p>
<p>IDENTIFICATION CODE</p>			<p>TOTAL FEES CITY PROJECT</p> <p>NO CHARGE</p> <p>12-14-79</p>
<p>CUILDING PERMIT NO. SIGN PERMIT NO. 113075A</p> <p>VENT. HEAT. AIR COND. PERMIT NO.</p>	<p>LAND USE</p> <p>AUTHORIZED BY BUILDING DATE</p>	<p>DATE</p>	<p>WORKER'S COMPENSATION REQUIREMENTS</p> <p>State Compensation Insurance Policy No. _____ Expiration Date _____</p> <p>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 7700 or his permit shall be deemed revoked.</p> <p>I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed relevant to this permit.</p> <p><i>Debra A. Jensen</i> 12/14/79</p> <p>PERMIT APPLICANT SIGNATURE DATE</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 7031.5 of the Business and Professional Code, Division 3, Chapter 9, Contractors' License Law, under the following Section:</p> <p>Owner Section 7044 <input checked="" type="checkbox"/> Minor work under \$100: Section 7048 <input type="checkbox"/> Employee working for wages only: Section 7053 <input type="checkbox"/></p> <p>Other: _____</p> <p>(PRINT) PROPERTY OWNER (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT DATE</p> <p>A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.</p>

OWNER <i>City of Garden Grove</i>		JOB ADDRESS <i>8802 Blossom</i>		PERMIT NO. <i>113075A</i>
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSORS PARCEL NO. <i>133-023-02</i>	LOT <i>60</i>	BLOCK <i>214</i>
		TRACT <i>6</i>		
		PLEASE CHECK ONE OR MORE <input type="checkbox"/> New <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input checked="" type="checkbox"/> Demolish		
ADDRESS		CITY	DATE <i>12/14/79</i>	JOB DESCRIPTION 1. Demo (see plot plan) 2. Two patio covers 3. Bedroom
				PERMIT VALUE <i>\$3500.00</i>

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.

4. Return garage to orig. state
5. Reroof



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

Dexter D. [Signature]