

# BUILDING PERMIT

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

## ZONING AND BUILDING

Use Zone <b>R-1</b>	Main Use <b>Apts.</b>	Acc. Use <b>-</b>	Var. No. <b>RT102-62</b>
Front Set Back <b>20'</b>	PL	PL	
Side Yard <b>15'</b>		Projection	
Side Yard <b>18'</b>		Projection	
Rear Yard <b>15'</b>	Stories <b>2</b>	Parking Req'd. <b>6</b>	
Zoning Approved By		Date	
Group	Type	Plan Ck	
Remarks: <b>Plan # 15</b> <b>splan</b> <b>13941 Evin -</b>			

### INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location	5-23-62	<i>[Signature]</i>
Reinforcing		
Roof Shtg.	2-3-62	<i>[Signature]</i>
Rough Frame	7-17-62	<i>[Signature]</i>
Lath or Drywall	7-24-62	<i>[Signature]</i>
Plas. Brown Ct.	8-21-62	<i>[Signature]</i>
Other		
Land Use		
Final	11-6-62	<i>[Signature]</i>
Utility Release	NOV 15 1962	<i>[Signature]</i>

**PLAN 4-17-62 FEES**

Plan Check	\$49.00	Building Permit	\$98.00
Bond	\$	Expiration Date	

Permit Authorized By *[Signature]* Date **5-18-62**

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

For Applicant to Fill in (USE INK) **HC-302**

Job Address **13941** Permit No. **18789**  
**4204 Evin M-N-O-P**

Lot No. Tract No. Blk No.  
 Please Attach Meters & Bounds (2 Copies)

Owner **Calco Land & Development Co., Inc.**

Owner's Address **811 N. Broadway, Santa Ana**

Description of Work New  Add'n  Remodel  Relocate

Use of Building **Multiple Unit - 4 Units**

Area of Building **3840 sq. ft.** Valuation **\$32,500**

Validation

Arch. or Engr. **None** Address **2537 S. Main, Santa Ana**

Contractor **Calco-Ralph Koy** Phone **EL 7-7669**

Address **811 N. Broadway, Santa Ana**

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 **Robert Palmer** Date **4/16/62** Lic. No.

Address **811 N. Broadway, Santa Ana**

### RELOCATION

PRESENT BLDG. ADDRESS  
 MOVING CONTRACTOR ADDRESS

### PUBLIC WORKS

Street Address **DK** By **JLP**

	REQUIRED	PROVIDED
Record of Survey	No	
R/W Dedication	YES	yes
Bonds	YES	yes
Encroachment Permit	No	

Remarks *[Signature]*

# BUILDING PERMIT

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

## ZONING AND BUILDING

Use Zone <b>R-3</b>	Main Use	Acc. Use	Var. No.
St. Set Back -	PL	PL	
Side Yard	<b>PLAT</b>	<b>PLAT</b>	Projection
Side Yard	<b>SEE</b>	<b>18-78-93</b>	Projection
Rear Yard	<b>SEE</b>	<b>18-78-93</b>	Projection
Stories		Parking Req.	
Approved By	<b>ELM</b>	Date	<b>8-30-62</b>
Group	<b>J</b>	Type	Plan Ck. <b>ELM</b>
Remarks:	<b>G. G. STD.</b>		

## INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location	<b>8-31-62</b>	<b>RD</b>
Reinforcing		
Roof Shtg.		
Rough Frame		
Lath or Drywall		
Plas. Brown Ct.		
Other		
Land Use		
Final	<b>10-19-62</b>	<b>RD</b>
Utility Release		

### FEES

Plan Check	\$ <del>100</del>	Building Permit	<b>6.00</b>
Bond	\$	Expiration Date	
Permit Authorized By	<b>ELM</b>	Date	<b>8-30-62</b>

For Applicant to Fill in (USE INK) 1

Job Address **13941 Erin & Westminster Blvd** Permit No. **20217**

Lot No. \_\_\_\_\_ Tract No. \_\_\_\_\_ Blk No. \_\_\_\_\_

Please Attach Meters & Bounds (2 Copies)

Owner **Calco Land & Development Co.**

Owner's Address **SAME**

Description of Work New  Add'n  Remodel  Relocate

Use of Building **Blockwall 5 FT.**

Area of Building **1.4 FT. 300** Valuation **9500.00**

Validation **AUG 30-62 11 065 M\*\*\*\*\*6.00**

Arch. or Engr. \_\_\_\_\_ Address \_\_\_\_\_

Contractor **Ray R. Shelton** Phone **JE 7-1957**

Address **11201 Cynthia Ave. Garden Grove**

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 **Ray R. Shelton** Date **Aug 30, 1962** Lis. No. \_\_\_\_\_

Address **11201 Cynthia Ave. Garden Grove**

### RELOCATION

PRESENT BLDG. ADDRESS \_\_\_\_\_

MOVING CONTRACTOR ADDRESS \_\_\_\_\_

### PUBLIC WORKS

Street Address	By	REQUIRED	PROVIDED
Record of Survey		<b>not required</b>	
R/W Dedication		<b>not required</b>	
Bonds		<b>not required</b>	
Encroachment Permit		<b>not required</b>	
Remarks			

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

# PLUMBING PERMIT

Department of Building  
B. C. Adams  
Director JE 7-4200

CITY OF  
GARDEN GROVE

For Applicant to Fill in (Use Ink)

Job 1374 Permit No. 15  
Address 1374 ERIN MNOP 25788

## PERMIT FEES

No.	TYPE OF FIXTURE OR ITEM	EACH	\$	PER
8	Water Closet (Toilet)	\$1.00	8	-
4	Bath Tub	1.00	4	-
	Shower	1.00		
8	Lavatory (Wash Basin)	1.00	8	-
4	Kitchen Sink	1.00	4	-
4	Garbage Disposal	1.00	4	-
	Laundry Tub or Tray	1.00		
4	Water Heater	1.50	6	-
	Stop Sink	1.00		
	Floor Sink	1.00		
	Floor Drain	1.00		
	Dish Washer	1.00		
	Drinking Fountain	1.00		
	Urinal	1.00		
1	Gas System <u>1</u> Outlets	1.00	2	40
	House Sewer	1.00		
	Lawn Sprinklers	2.00		
	Swimming Pool Piping	1.00		
	Sand Traps	1.00		
	Automatic Washing Machs.	1.00		
	Water Softeners	1.50		
	Backwash	1.50		

Lot No. \_\_\_\_\_ Tract No. \_\_\_\_\_ Blk. No. \_\_\_\_\_

Owner Calco Development

Owner's Address 811 No. Broadway, S.A.

Plumbing Contractor 20th Century Plbg.

Contractor's Address 11546 So. L.A., Orange

Phone KE 89601 City Lic. No. \_\_\_\_\_

Use of Bldg. DWELLING

New Bldg.  Old Bldg.

Validation MAY 21-62 11 030 M\*\*\*39.40

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 plumbing.  
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 [Signature] Date MAY 18, 1962

Address \_\_\_\_\_

APPROVALS	DATE	INSPECTOR
SOIL PIPING		
GROUND PLUMBING	<u>5-21-62</u>	<u>[Signature]</u>
ROUGH PLUMBING	<u>7-10-62</u>	<u>[Signature]</u>
GAS PIPING		
GAS VENT		
SEPTIC TANK or Cesspool		
SEWER		
GAS TEST		
MAIN DRAIN AND VACUUM LINES		
WATER HEATER		
BACKWASH		
FINAL	<u>1/9 tax</u>	<u>[Signature]</u>
UTILITY CO. NOTIFIED	<u>NOV 15 1962 CC</u>	

Issuance of Permit 2 00

TOTAL FEE \$ 35.40

Permit Authorized By CR Date 5-27-62

Routing: #1 Plumbing Inspector #2 Office File #3 Owner [Signature] Bldg. Permit # 18789

**HEATING, VENTILATION, REFRIGERATION & AIR CONDITIONING PERMIT**

15

1

DEPARTMENT OF BUILDING  
B. C. ADAMS - DIRECTOR  
JEfferson 7-4200

CITY OF  
GARDEN GROVE

FOR APPLICANT TO FILL IN (USE INK)

JOB ADDRESS 13941 PERMIT NO. 1519  
13961 Erin MNOP

PERMIT FEES \$168

NUMBER	TYPE OF FIXTURE OR ITEM	EACH	FFE
8	FURNACE	\$1.00	8 -
8	WARM AIR OUTLET	.25	2 -
8	FURNACE VENTS	1.00	8 -
	GAS PIPING _____ OUTLETS	1.00	
	MISC. APPLIANCES	1.00	
	COMMERCIAL HEATING	2.00	
	COMMERCIAL WARM AIR OUTLETS	.50	
	COMMERCIAL FURNACE VENTS	2.00	
	EXHAUST OUTLETS	1.00	
	REPAIR, ALTERATION OR ADDITION TO HEATING SYSTEM	1.00	
	VENTILATION SYSTEM	3.00	
	RESTAURANT KITCHEN HOOD	3.00	
	CONDENSING UNIT 20 H.P. OR LESS	2.00	
	CONDENSING UNIT TO 50 H.P.	5.00	
	CONDENSING UNIT OVER 50 H.P.	10.00	
	REPAIR OR ALTERATION TO REFRIGERATION SYSTEM	3.00	
	EVAPORATIVE COOLERS	1.00	

LOT NO. \_\_\_\_\_ TRACT NO. \_\_\_\_\_  
OWNER Calco Development  
OWNER'S ADDRESS 311 N. Broadway, Santa Ana  
CONTRACTOR 20th Century Plbg. Co., Inc.  
CONTRACTOR'S ADDRESS 11546 S. Los Angeles, Orange  
PHONE KE8-9601 CITY LIC. NO. \_\_\_\_\_  
USE OF BUILDING Res.  
NEW BUILDING  OLD BUILDING   
VALIDATION JUN 22-62 11 090 M\*\*\*19.00

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 plumbing.  
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 John F. Boyd DATE 6-22-62

APPROVALS	DATE	INSPECTOR
FURNACE		
REGISTER OUTLETS		
FURNACE VENTS		
GAS PIPING		
MISC. APPLIANCES		
EXHAUST OUTLETS		
RESTAURANT KITCHEN HOOD		
VENTILATION SYSTEM		
CONDENSING UNIT 20 H.P. OR LESS		
CONDENSING UNIT 50 H.P.		
CONDENSING UNIT OVER 50 H.P.		
FINAL	<u>11/16/62</u>	<u>John F. Boyd</u>
UTILITY CO. NOTIFIED	<u>NOV 13 1962</u>	

ISSUANCE OF PERMIT 1 00  
TOTAL FEE \$ 191-  
PERMIT AUTHORIZED BY OP DATE 6-22-62  
ROUTING: BUILDING PERMIT NO. \_\_\_\_\_  
#1 INSPECTOR #2 OFFICE FILE #3 OWNER

# ELECTRIC PERMIT

Department of Building  
B. C. Adams  
Director

CITY OF  
GARDEN GROVE  
JE 7-4200

Applicant Fill in (use ink)

Electric Permit No.

Job Address

13947  
13961 EWIN-15

19651

Owner *Calco*

Owner's Address

New Bldg.  Old Bldg.  Use

Electrical Contr.

*Virgil S. Landsdale*  
Address *12918 Shoemaker Whittier*

Phone *OX-37594*

State License No. *163786*

Validation

*JUN 12-62 11 228 M\*\*\*\*41.00*

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

*Virgil S. Landsdale* Date *6-6-62*

## 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	<i>7-9-62</i>	<i>RDP</i>
Fixtures		
U. G.		
Sign Footing		
Final	<i>11-3-62</i>	<i>RDP</i>
Utility Notified	<i>NOV 15 1962</i>	<i>CC</i>

Service Size Amp.

Wire

Conduit

Building Permit No.

LOT NO.

TRACT NO.

	NUMBER	EA.	FEE
New Residence Sq. Ft. <i>3018</i>		.01	<i>30</i>
Residential Garage Sq. Ft.		.005	
Services	<i>1</i>	1.00	<i>1</i>
Meters		1.00	
Fixtures, 1st 20		.20	
Fixtures, Additional		.10	
Fixtures, Mercury Vapor		1.00	
Outlets, 1st		.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

*41*

Authorized By

Date

*7/2/62*

# CERTIFICATE OF OCCUPANCY

# 2

DEPARTMENT OF BUILDING

B. C. ADAMS, Director

CITY OF GARDEN GROVE

11391 ACACIA

JOB ADDRESS 13941 BRIN PERMIT NO. 18789

USE OF BUILDING 1 Unit Apt. GROUP H TYPE V

USE ZONE R-3 APPROVED BY H. Doteon DATE 11-6-62

ZONING REMARKS 6 Parking Spaces required

Floor load sign installed per Section 2308 Yes  No

Room capacity sign installed per section 3301 (1) Yes  No

The above described building has been inspected and found to comply with the provisions of the Uniform Building Code.

ISSUED TO Calico Land & Development ADDRESS 811 N. Broadway, S.A.

Authorized By \_\_\_\_\_ DATE November 30, 1962

E. L. MENDENHALL PLAN CHECK ENGINEER

**Notice! Post in a Conspicuous Place on the Premises**



# ELECTRICAL PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

SINGLE PHASE SERVICE SIZE <input type="checkbox"/> UG <input type="checkbox"/> OH			IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEES
AMPS	VOLTS	RIG. CONDUIT	Residential (R-1 & R-3) sq. ft.			
THREE PHASE SERVICE SIZE <input type="checkbox"/> 3 Wire <input type="checkbox"/> 4 Wire <input type="checkbox"/> UG <input type="checkbox"/> OH			Garage, Resid. (M) sq. ft.			
AMPS	VOLTS	RIG. CONDUIT	Service Meter, Single Phase			
APPROVAL	DATE	INSPECTOR	Service Meter, Three Phase			
Underground			Add'l. Meter, Three Phase			
Conduit			Temporary Power Pole			
Wiring - Rough	5/25/78		Pole, Power, Light, etc.			
Heater			Sub-Panels 1 $\phi$			
Fixtures & Trim			Sub-Panels 3 $\phi$			
Motors			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			
User			Sign Hookup			
Service			REPAIR FIRE DAMAGE			10 -
FINAL	6-27-78					
Utility Notified						
IDENTIFICATION CODE			ITEM	CODE		FEES
			Plan Retention Fee			
			Plan Check			
			Permit	227.		10 -
			Issuance	535		6 -
			TOTAL FEES			16 -
BUILDING PERMIT NO.	SIGN PERMIT NO.	GENY. HEAT. AIR COND. PERMIT NO.	AUTHORIZED BY		DATE	
			DM		5-22-78	

ADDRESS  
13941 FERIN ST GARDEN GROVE CA 92545

LOT NO. BLK NO. TRACTY NO. ELECTRIC SERVICE NO.  
08-473-3 101204

OWNER PHONE  
FERIN MANOR APTS.

OWNER'S ADDRESS CITY  
13923 FERIN ST GB GARDEN GROVE

NEW BUILDING OR ADDITION - AREA EXISTING BUILDING OR MODEL AREA OCCUPANCY GROUP USE OF BUILDING AND OR NUMBER OF UNITS  
SQ. FT. SQ. FT. LOT

VALIDATION  
5-22-78 004 M 10:00  
003 M 6:00

ELECTRICAL CONTRACTOR STATE LIC. NO. & TYPE  
M J MULQUEEN 01 302860

ADDRESS CITY PHONE  
7484 MCKINLEY CIR BUNN PARK AR 71535

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.

CONTRACTORS SIGN BELOW  
I certify that I am a licensed contractor and that my license is in full force and effect.  
W.C. # \_\_\_\_\_ STATE \_\_\_\_\_  
M J MULQUEEN 5/22/78

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 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 workmen's compensation laws of the State of California.  
 I am the owner of the above property and I will contract to have all of the above work performed by licensed contractors.

W.C. # \_\_\_\_\_ EXP. DATE \_\_\_\_\_  
 I am the owner of the above property and will employ persons to perform the above work with wages at their sole compensation. I will furnish insurance for my employees as required by the Labor Code of California.  
W.C. # \_\_\_\_\_ EXP. DATE \_\_\_\_\_

OWNER'S SIGNATURE \_\_\_\_\_ BY AUTHORIZED AGENT \_\_\_\_\_ DATE \_\_\_\_\_  
If work is not started within \_\_\_\_\_ 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.



# BUILDING PERMIT

Inspection Requests  
638-6771

General Information  
638-6661

## INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY		OCC. LOAD		FIRE SPRINK.		APPROVAL	DATE	INSPECTOR
USE ZONE		FRONT	LEFT	RIGHT	REAR	FOUNDATION & LOCATION		
FIRE ZONE	Eav Proj. Setbacks		N/A			CONCRETE FLOOR		
PLANNING ACTION	PLANS <u>DG -</u>					REINFORCING		
LAND USE APPROVED BY	DATE					ROOF SHTG		
REMARKS:						ROUGH FRAME		
						INSULATION, ENERGY		
						LATH OR DRYWALL		
						PLAS. BROWN CT.		
						SOUND INSULATION		
						SMOKE DETECTOR		
						PARKING		
						LANDSCAPING		
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.	DATE	INITIAL	REQ'D	PROVIDED			
PARCEL MAP								
R/W DEDICATION						LAND USE FINAL		
FEES AND BONDS						FINAL		
	REV. CODE	AMOUNT				UTILITY RELEASE		
ST. BOND						IDENTIFICATION CODE		
WATER BOND								
WATER ASSMT. FEE (ACRG.)						WORKMEN'S COMPENSATION REQUIREMENTS		
WATER ASSMT. FEE (FT.)						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.		
PARKWAY TREE FEE						CONTRACTORS SIGN BELOW		
PARK & REC. FEE (DIST.)						I certify that I am a licensed contractor and that my license is in full force and effect.		
DRAIN ASSMT. FEE (DIST.)						W.C. # _____ EXP. DATE _____		
PLAN RETENTION FEE						By <u>M. J. McQueen</u> 5/22/78		
BLDG. PLAN CHECK						OWNER-BUILDER SIGN BELOW		
BLDG. PERMIT FEE		226	22	50		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):		
ISSUANCE		535	6	-		<input type="checkbox"/> "I am the owner of the above property and will personally perform the above work. 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 workmen's compensation laws of the State of California.		
VALUATION		TOTAL FEES				<input type="checkbox"/> I am the owner of the above property and I will contract to have all of the above work performed by licensed contractors.		
		2850				W.C. # _____ EXP. DATE _____		
AUTHORIZED BY		DATE				<input type="checkbox"/> 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.		
<u>Mu</u>		5-22-78				W.C. # _____ EXP. DATE _____		
						OWNER'S SIGNATURE _____ By _____ AUTHORIZED AGENT _____ DATE _____		

ADDRESS	1394 ERIN APT. D	
LOT NO.	TRACT NO.	BLK NO.
OWNER	ERIN APTS	
MAILING ADDRESS	CITY	ZIP
	139 23 ERIN STREET	
TEL. NO.	STATE LIC. NO. & TYPE	
VALIDATION	5-22-78	002M 600 001M 22-50
CONTRACTOR	M.J.M. CONST.	
MAILING ADDRESS	CITY	ZIP
	7484 McKinley CIR	92620
TEL. NO.	STATE LIC. NO.	
	8281535	B/302860
PRESENT BLDG. USE	PROPOSED BLDG. USE	
	NEW BLDG. USE	
FLOOR AREA (SQ. FT.)	NO. OF STORIES	NO. OF DWELLING UNITS
930	2	
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		

# BUILDING PERMIT

## INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.		APPROVAL	DATE	INSPECTOR
		FRONT	LEFT	RIGHT	REAR			
USE ZONE						FOUNDATION & LOCATION		
FIRE ZONE	Eav Proj. Setbacks		N/A			CONCRETE FLOOR		
PLANNING ACTION	PLANS	DB				REINFORCING		
LAND USE APPROVED BY					DATE	ROUGH FRAME	5/25/78	
REMARKS:						INSULATION, ENERGY	5/25/78	
						LATH OR DRYWALL		
						PLAS. BROWN CT.		
						SOUND INSULATION		
						SMOKE DETECTOR		
						PARKING		
						LANDSCAPING		
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.			DATE	INITIAL			
				REQ'D	PROVIDED			
PARCEL MAP						LAND USE FINAL		
R/W DEDICATION						FINAL	6/21/78	
<b>FEES AND BONDS</b>						<b>IDENTIFICATION CODE</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		320 N/A						
BLDG. PERMIT FEE		226	22 50					
ISSUANCE		535	6 -					
VALUATION		TOTAL FEES						
\$ 200000		28 50						
AUTHORIZED BY		DATE						
Mh		5-22-78						
<b>WORKMEN'S COMPENSATION REQUIREMENTS</b>						<b>CONTRACTOR SIGN BELOW</b>		
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.						W.C. # _____ EXP. DATE _____ M.J. M. Const. By M.J. M. Const. 5/22/78		
<b>OWNER-BUILDER SIGN BELOW</b>						<b>CONTRACTOR SIGN BELOW</b>		
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 certify that I am a licensed contractor and that my license is in full force and effect. W.C. # _____ EXP. DATE _____		
<input type="checkbox"/> "I am the owner of the above property and will personally perform the above work. 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 workmen's compensation laws of the State of California.						<input type="checkbox"/> I am the owner of the above property and I will contract to have all of the above work performed by licensed contractors. W.C. # _____ EXP. DATE _____		
<input type="checkbox"/> 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.						W.C. # _____ EXP. DATE _____ _____ By _____ OWNER'S SIGNATURE AUTHORIZED AGENT DATE		
ADDRESS						PERMIT NO.		
1394 ERIN APT. D						01203A		
LOT NO.						TRACT NO.		
98-473-3						BLK NO.		
OWNER						TEL. NO.		
ERIN MAJOR APTS								
MAILING ADDRESS						CITY		
139 23 ERIN STREET						ZIP		
<input type="checkbox"/> ARCH <input type="checkbox"/> ENGR.						MAILING ADDRESS		
						CITY		
						ZIP		
TEL. NO.						STATE LIC. NO. & TYPE		
VALIDATION								
5-22-78						0024 6.00 001M 22.50		
CONTRACTOR								
M.J.M. CONST.								
MAILING ADDRESS						CITY		
7484 McKinley Cir Buena Park 90600						ZIP		
TEL. NO.						STATE LIC. NO.		
828 1535						B1 302860		
PRESENT BLDG. USE						PROPOSED BLDG. USE		
DESCRIBE WORK TO BE DONE						TO APT'S		
REPAIR FIRE DAMAGE								
NEW <input type="checkbox"/> ADD'N <input type="checkbox"/> ALTER. <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>								
FLOOR AREA (SQ. FT.)						NO. OF STORIES		NO. OF DWELLING UNITS
950						2		
If work is not started within 120 days from date of issue of it 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.								
<b>RELOCATION</b>								
PRESENT BLDG. ADDRESS								
MOVING CONTRACTOR								
ADDRESS								

**INSPECTION RECORD**

For Applicant to Fill in

AGENCY	TYPE	O.C. LOAD		FIRE SPRINK		APPROVAL	DATE	INSPECTOR
		FRONT	LEFT	RIGHT	REAR			
LINE						FOUNDATION & LOCATION		
LINE	Eav P.c. Siddacks					CONCRETE FLOOR REINFORCING		
PLANNING SECTION						ROOF SHTG	1-16-86	212
LAND USE APPROVED BY						ROUGH FRAME		
REMARKS						INSULATION ENERGY LATH OR DRYWALL PLAS BROWN CT. SOUND INSULATION SMOKE DETECTOR PARKING LANDSCAPING		
SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.	DATE	INITIAL	REQ'D	PROVIDED			
PARCEL MAP						LAND USE FINAL		
CONVEYANCE DEDICATION						FINAL		
FEES AND BONDS						UTILITY RELEASE		
	REV. CODE	AMOUNT	IDENTIFICATION CODE					
ST. BOND								
WATER BOND								
WATER ASSMT FEE (ACRG)								
WATER ASSMT FEE (FT)								
PARKWAY TREE FEE								
PARK & REC FEE (DIST)								
DRAIN ASSMT FEE (DIST)								
PLAN REVISION FEE								
BLDG PLAN REVIEW								
BLDG PERM FEE		45						
ISSUANCE		10						
VALUATION		55						
TOTAL FEES		37.00						
AUTHORIZED BY			1/13/86					

**WORKER'S COMPENSATION REQUIREMENTS**

State Compensation Insurance Policy No. 625457-85 Expiration Date 7-1-86

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.

\_\_\_\_\_  
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.

First Class Roofing (PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE 1-13-86

**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 7053   
Other \_\_\_\_\_

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

**ADDRESS**  
13941 ELMO ST.  
LOT NO. BLP NO. TRACT NO. PERMIT NO.

**OWNER** (PRINT)  
Investors Health Management (PRINT)  
MAILING ADDRESS (PRINT)  
1157 Dove St. Suite 265 Newport Beach  
CITY (PRINT)  
STATE LIC. NO. & TYPE

**CONTRACTOR** (PRINT)  
First Class Roofing (PRINT)  
MAILING ADDRESS (PRINT)  
9381 Central Garden Grove (PRINT)  
CITY (PRINT)  
STATE LIC. NO. & TYPE  
714-437-7600 411133

**PRESENT BLDG. USE** \_\_\_\_\_ **PROPOSED BLDG. USE** \_\_\_\_\_

**DESCRIBE WORK TO BE DONE**  
replace present roof

**NEW**  **ADDN**  **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 aban-tioned for more than 180 days this permit will be null and void.

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

**RELOCATION**

**PRESENT BLDG. ADDRESS** \_\_\_\_\_

**MOVING CONTRACTOR ADDRESS** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_