



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 : 12762 MONARCH ST
 Suite :
 PERMIT NO. : 32905
 Permit Type : BUILDING
 Type : B21
 : MISCELLANEOUS
 Owner : ARGA REO LIMITED PARTNERSHIP
 Applicant : WALLCO BUILDERS INC.
 Appl Address : 18262 LEAFWOOD LN
 : SANTA ANA, CA 92705
 Phone : 838-1364

 Insp Dist : ZB
 Date : 04/16/96
 Parcel No : 21502101

PROPOSED WORK:

SAW CUT IN NEW DOOR 6'-0"X 6'-8" IN EXIS
 TILT-UP CONCRETE PANEL.

FEES

Plan Check	1	17.97
Permit	1	28.14
Issuance	1	25.00
PLN.RET.LTR.SIZE	8	8.00
Pln.Ret.Lgr.Size	1	1.50
ADMIN.MODIFICATION	1	30.00
General Plan	1	2.50
Cultural Arts	1	1.25
PLAN CHECK FEE CREDIT	1	-19.60

INSPECTION RECORD

APPROVAL DATE INSPECTOR

Pre Inspect _____
 Foundation _____
 Concrete Floor _____
 Reinforcing _____
 Masonry _____
 Roof Shtg _____
 Rough Frame _____
 Insul / Energy _____
 Drywall _____
 Lath _____
 Plas.Brown Ct. _____
 Landscaping _____
 Pre Gunite _____
 Pre Deck _____
 Pre Plaster _____

 Planning Final _____
 Bldg Final 5/14/96 _____
 Utility Notified _____

11 3226 BLDG PERM &	28.14
11 3235 ADMN MODIFIC	30.00
11 3517 ISSUANCE FEE	25.00
11 3527 BLDG P C FEE	0.00
11 3542 PLAN RETENTI	9.50
92 2163 GENERAL PLAN	2.50
TOTAL	94.76

AUTHORIZATION

Issued By: jimc 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 [Signature]
 Print Name [Signature] Date 9/16/96

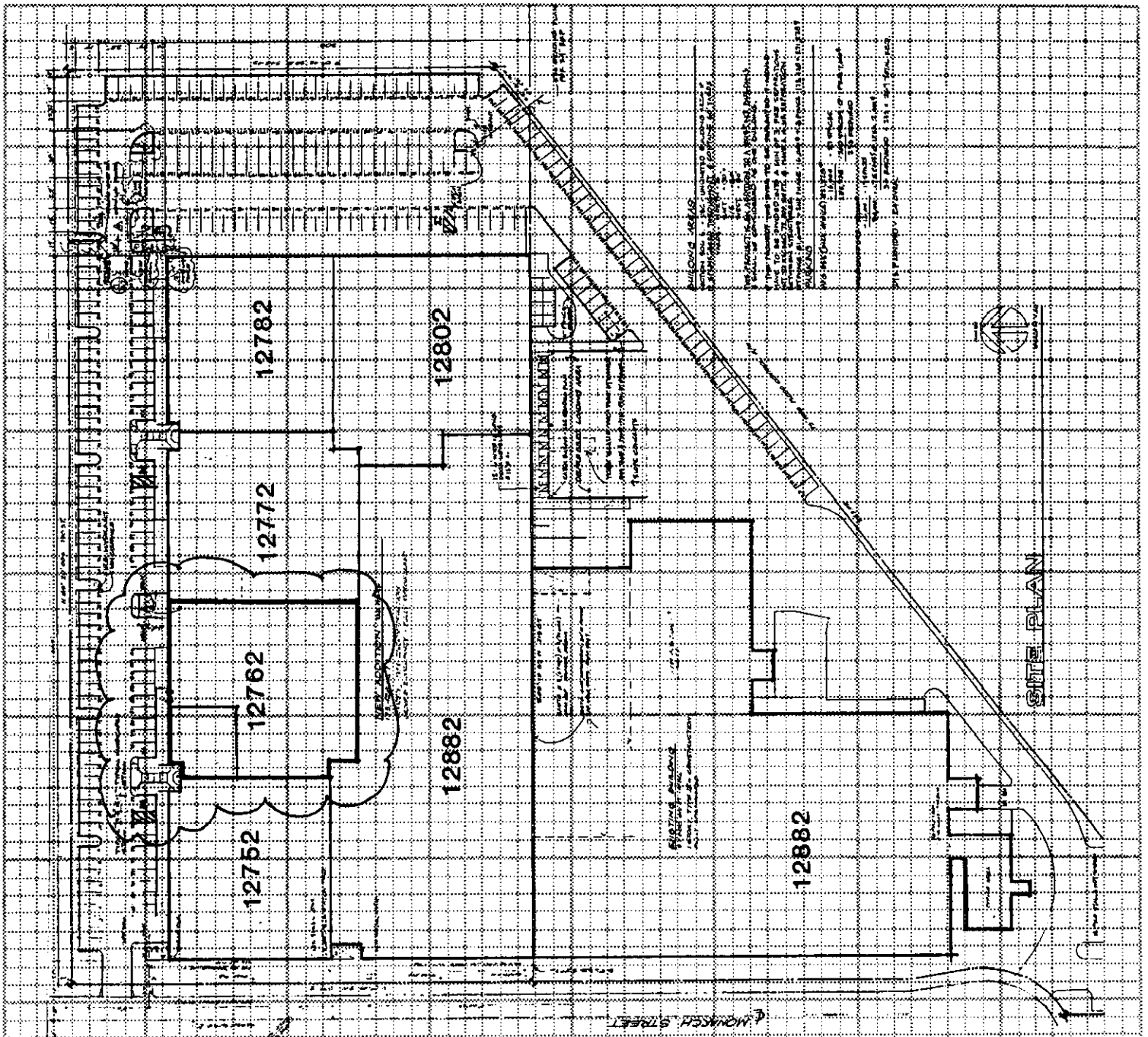
***** VALIDATION *****
 PAID ON 16 Apr 1996 AT 11:59
 RECEIVED BY TERESAP station1/2 TRANS# 66
 PAID BY CHECK#1881 FOR \$94.76
 TOTAL PAID = \$94.76

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

Planning action: <i>LOWR</i>	Use zone: <i>MP</i>
Land use approved by: <i>Loyal</i>	Date: <i>4/3/06</i>
Remarks:	Lot size:
	Lot coverage:
	± increase

Job address: <i>12762 MONARCH ST.</i>	Permit No. <i>322905</i>			
Assessor Parcel No. <i>21502101</i>	Legal desc.:			
Occupancy: <i>F-2</i>	Const. type: <i>TIL-N</i>	Sprinklers: <i>FULLY</i>	Value: <i>1000</i>	
<input type="checkbox"/> New	<input checked="" type="checkbox"/> Alter	<input type="checkbox"/> Add	<input type="checkbox"/> Repair	<input type="checkbox"/> Demo

Job Description: ADD NEW OPNG. IN EXISTING CONC. TIT-UP PANEL FOR NEW DOOR OPENING & REVISE (E) DOOR HDNR AS NEC. FOR HANDICAP ACCESS REQ'S



White: Inspection
 Yellow: Assessor
 Pink: Permittee

I certify the information hereon is complete & correct.

ARBO REO C/O ESSEX REALTY

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 : 12762 MONARCH ST
 Suite :
 PERMIT NO. : 33047
 Permit Type :
 Type : E
 Owner : ARGA REO LIMITED PARTNERSHIP
 Applicant : C N K ELECTRIC CO
 Appl Address : 5565 TORREY PINE RD
 YORBA LINDA, CA 92686
 Phone : 714 996 2305
 Insp Dist : 14
 Date : 04/24/96
 Parcel No : 21502101

PROPOSED WORK:

WIRING FOR SCREEN PRINTING MACHINE AND DRYER

FEEES

SUBPANEL, 3 PHASE	1	12.00
Outlets 1-20	1	.80
PWR APPAR 10HP KW KVA MAX	1	7.50
PWR APPAR 50HP KW KVA MAX	1	20.00
PWR APPA 100HP KW KVA MAX	1	35.00
Issuance	1	25.00
GENERAL PLAN	1	2.00
CULTURAL ARTS	1	1.00

INSPECTION RECORD

APPROVAL DATE INSPECTOR

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

11 3227 ELECTRICAL P	75.30
11 3517 ISSUANCE FEE	25.00
80 3224 PERMITS/CULT	1.00
92 2163 GENERAL PLAN	2.00

TOTAL 103.30

AUTHORIZATION

Issued By: janetw Date _____

FINAL 4-29-96 *[Signature]*

Utility Notified _____

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 *[Signature]*

Print Name CHUL K. KIM Date 4-25-96

***** VALIDATION *****
 PAID ON 25 Apr 1996 AT 16:16
 RECEIVED BY TERESAP station1/2 TRANS# 108
 PAID BY CHECK#1026 FOR \$103.30
 TOTAL PAID = \$103.30



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 : 12772 MONARCH ST
 Suite :
 PERMIT NO. : 32910
 Permit Type :
 Type : P
 Owner : ARGA REO LIMITED PARTNERSHIP
 Applicant : SO CAL RENOVATORS INC
 Appl Address : 3822 E LA PALMA
 ANAHEIM, CA 92803
 Phone : 666-2521

PROPOSED WORK:

TWO SINK C/O

Insp Dist : ZP
 Date : 04/16/96
 Parcel No : 21502101

FEEES

Lavatory	2	16.00
Issuance	1	25.00
GENERAL PLAN	1	2.00
CULTURAL ARTS	1	1.00
MINIMUM ELECTRICAL FEE	1	4.00

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 _____

11 3227 ELECTRICAL P	4.00
11 3228 PLUMBING PER	16.00
11 3517 ISSUANCE FEE	25.00
80 3224 PERMITS/CULT	1.00
92 2163 GENERAL PLAN	2.00

TOTAL 48.00

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 [Signature]
 Print Name Carol Woodring Date 4-16-96

FINAL 5/9/96 Aroney

Utility Notified _____

***** VALIDATION *****
 PAID ON 16 Apr 1996 AT 14:30
 RECEIVED BY TERESAP station1/2 TRANS# 107
 PAID BY CHECK#31001 FOR \$485.10
 TOTAL PAID = \$485.10



PERMIT (PAGE 2 of 2)

PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 12772 MONARCH ST
 Suite :
 PERMIT NO. : 32908
 Permit Type : BUILDING
 Type : B7
 ALTERATIONS TO OTHER BUILDINGS
 Owner : ARGAREO LIMITED PARTNERSHIP
 Applicant : SO CAL RENOVATORS INC
 Appl Address : 3822 E LA PALMA
 ANAHEIM, CA 92803
 Phone : 666-2521

T/I

PROPOSED WORK:

Insp Dist : ZB
 Date : 04/16/96
 Parcel No : 21502101

FEES

Plan Check	1	195.09
Permit	1	302.10
Issuance	1	25.00
PLAN CHECK FEE CREDIT	1	-195.09
General Plan	1	34.17
Cultural Arts	1	16.83
PLN.RET.LTR.SIZE	5	5.00
Pln.Ret.Lgr.Size	4	6.00

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Pre Inspect		
Foundation	4/23/96	[Signature]
Concrete Floor		
Reinforcing		
Masonry	4/25/96	[Signature] PRE-6000
Roof Shtg		
Rough Frame		
Insul / Energy		
Drywall		
Lath		
Plas.Brown Ct.		
Landscaping		
Pre Gunit		
Pre Deck		
Pre Plaster		
Planning Final		
Bldg Final	5/9/96	[Signature]
Utility Notified		

11 3226 BLDG PERM &	302.10
11 3517 ISSUANCE FEE	25.00
11 3527 BLDG P C FEE	0.00
11 3542 PLAN RETENTI	11.00
80 3224 PERMITS/CULT	16.83
92 2163 GENERAL PLAN	34.17
TOTAL	389.10

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 [Signature]
 Print Name CARY NORTH Date 4-16-96

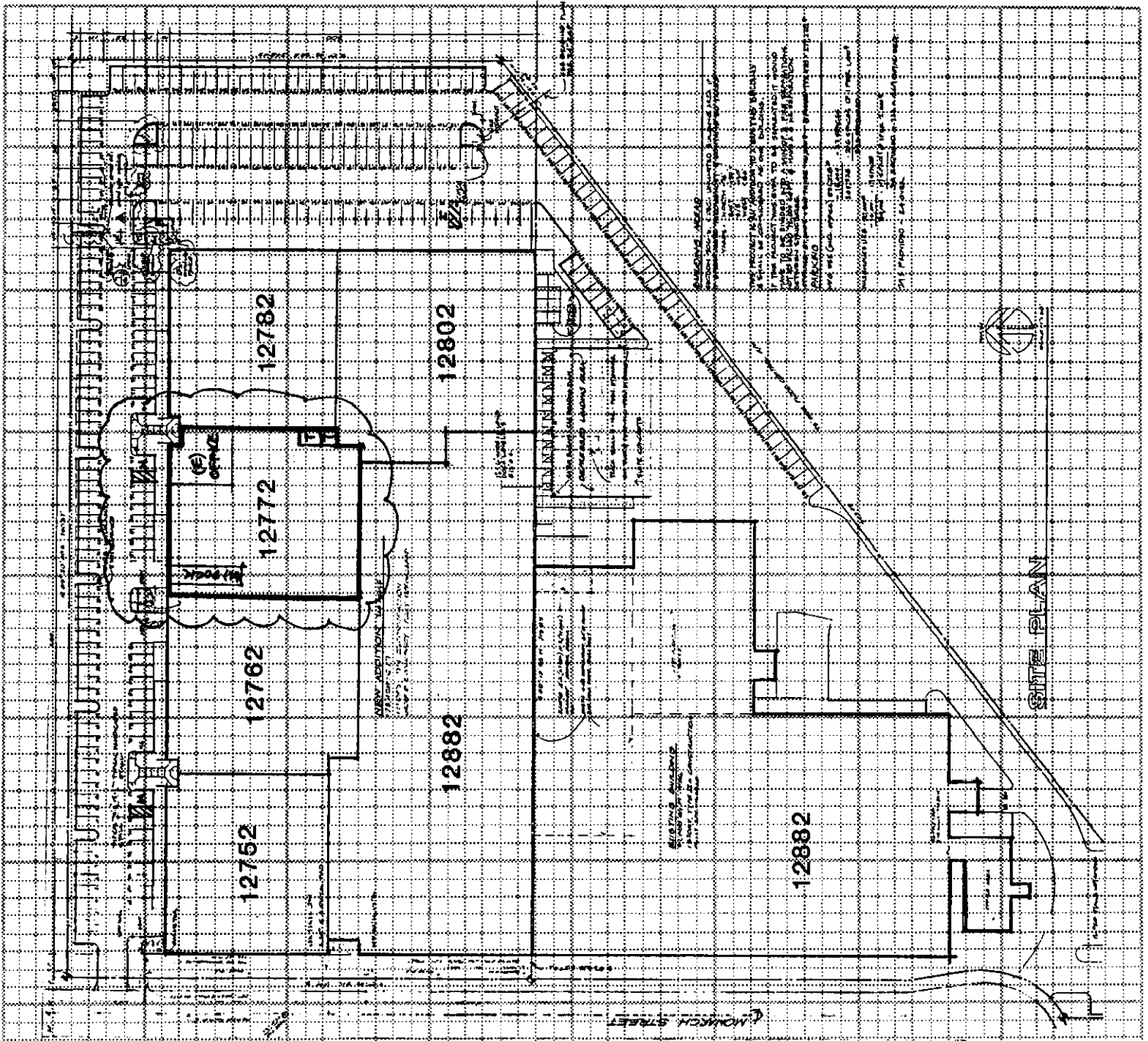
***** VALIDATION *****
 PAID ON 16 Apr 1996 AT 14:30
 RECEIVED BY TERESAP station1/2 TRANS# 107
 PAID BY CHECK#31001 FOR \$485.10
 TOTAL PAID = \$485.10

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

Planning action: <i>work</i>	Use <i>MP</i>
Land use approved by: <i>Loyal</i>	Date: <i>4/3/96</i>
Remarks:	Lot size:
	Lot coverage:
	± increase

Job address: <i>12712 MONARCH ST.</i>	Permit No.:			
Assessor Parcel No. <i>215 02101</i>	Legal desc.:			
Occupancy: <i>F.Z</i>	Const. type: <i>III.N</i>	Sprinklers: <i>FULLY SPRINK.</i>	Value: <i>28,000</i>	
<input type="checkbox"/> New	<input checked="" type="checkbox"/> Alter	<input type="checkbox"/> Add	<input type="checkbox"/> Repair	<input type="checkbox"/> Demo

Job Description: ADD NEW LOADING DOCK & UPGRADE EXIST. TOILET ROOM FOR NEW HANDICAP ACCESS REQ'S



White: Inspection
 Yellow: Assessor
 Pink: Permittee

I certify the information hereon is complete & correct.
AREO RED CO ESSEX REALTY
 Owner's name (print) Signature (owner/agent) Date

ELECTRICAL PERMIT

INSPECTION RECORD

FEEES

For Applicant to Fill in

SINGLE PHASE SERVICE SIZE 125 150 OH
 THREE PHASE SERVICE SIZE 3 Wire 4 Wire UG OH

AMPS VOLTS RIG. CONDUIT

APPROVAL DATE INSPECTOR

Underground

Conduit

Wiring - Rough

Heater

Fixtures & Trim

Motors

Other

Service

IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE
Residential (R-1 & R-3) sq. ft.			
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	10		2.50
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	3		4.50
Over 1, Not Over 10 each	2		12.00
Over 10, Not Over 30 each			
Indv. Circuits			
Time Clock			
Sign			
Sign Hookup			

ADDRESS
12762 MONARCH

LOT NO. BLK NO. TRACT NO. ELECTRIC METER NO.

OWNER
ROD GUTEIZE

PHONE

OWNER'S ADDRESS CITY

NEW BUILDING OR ADDITION - AREA SQ. FT. 11,046 sq. ft.

EXISTING BUILDING REMODEL AREA

OCCUPANCY GROUP

USE OF BUILDING AND OR NUMBER OF UNITS MOBILE HOME

VALIDATION
ELTYPE 1/28/88
ISSNDE 6:30
CHECK 11-13-80

ELECTRICAL CONTRACTOR
C&B Electric

STATE LIC. NO. & TYPE
3855 77

ADDRESS CITY PHONE
8231 Branwood Stanton 636 6397

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 59C 18372204 H1282

Expiration Date 11-4-81

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.

William J. Holt 11-4-81

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

FINAL 11-6-81 [Signature]

Utility Verified

IDENTIFICATION CODE

BUILDING PERMIT NO. SIGN PERMIT NO. VENT. HEAT. AIR COND. PERMIT NO.

ITEM	CODE	FEEES
Plan Retent on Fee		
Plan Check		
Permit Issuance	3227 3517	13.00 6.00
TOTAL FEES		19.00

AUTHORIZED BY
LAND USE BUILDING DATE
JR 11-4-81

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.

INSPECTION RECORD

For Applicant to Fill in

P.C. #

OCCUPANCY USE ZONE	TYPE	OCC. LOAD		FIRE SPRINK.	
		FRONT	LEFT	RIGHT	REAR
	Eav Proj.				
	Setbacks	n/c			
PLANNING ACTION					
LAND USE APPROVED BY: <i>IM 11/11/81</i>					
REMARKS: <i>letter from owner attached</i>					
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.	DATE	INITIAL	REQ'D	PROVIDED
PARCEL M/P					
R/W DEDICATION					
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	3527	3	74		
BLDG. PERMIT FEE	3226	11	50		
ISSUANCE	3517	6	00		
VALUATION	500-	TOTAL FEES	21	24	
AUTHORIZED BY: <i>[Signature]</i> DATE: <i>11-11-81</i>					

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	<i>12/3/81</i>	
UTILITY RELEASE		
IDENTIFICATION CODE		

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.

PERMIT APPLICANT SIGNATURE: *[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: *[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:

Owner, Section 7044 Minor work under \$100; Section 7045 Employees working for wages only; Section 7053

Other: *Acme Wire*

(PRINT) PROPERTY OWNER: _____ (SIGNATURE) OWNER OR AUTHORIZED AGENT: *[Signature]* DATE: _____

ADDRESS: *Selphin Beas - 12772/1182 Minarch*

LOT NO. _____ BLK NO. _____ TRACT NO. _____ PERMIT NO. **127019**

OWNER: *Acme Wire* TEL. NO. *891-4226*

MAILING ADDRESS: _____ CITY: _____ ZIP: _____

ARCH ENGR.

MAILING ADDRESS: _____ CITY: _____ ZIP: _____

12300 Edison Way Garden Grove 92641

TEL. NO. *891-4691* STATE LIC. NO. & TYPE: _____

VALIDATION: *11-11-81*

PLANCK	3.74
BOGPEP	11.50
ISSNCE	6.00
CASH	11.00

CONTRACTOR: *Self*

MAILING ADDRESS: _____ CITY: _____ ZIP: _____

TEL. NO. _____ STATE LIC. NO. _____

PRESENT BLDG. USE: _____ PROPOSED BLDG. USE: _____

DESCRIBE WORK TO BE DONE: *Opening Between Factory And office - 12772 4/12782 minarch*

NEW ADD'N ALTER. REPAIR DEMOLISH

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

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 REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

RELOCATION

PRESENT BLDG. ADDRESS: _____

MOVING CONTRACTOR: _____

ADDRESS: _____

I. INSPECTOR

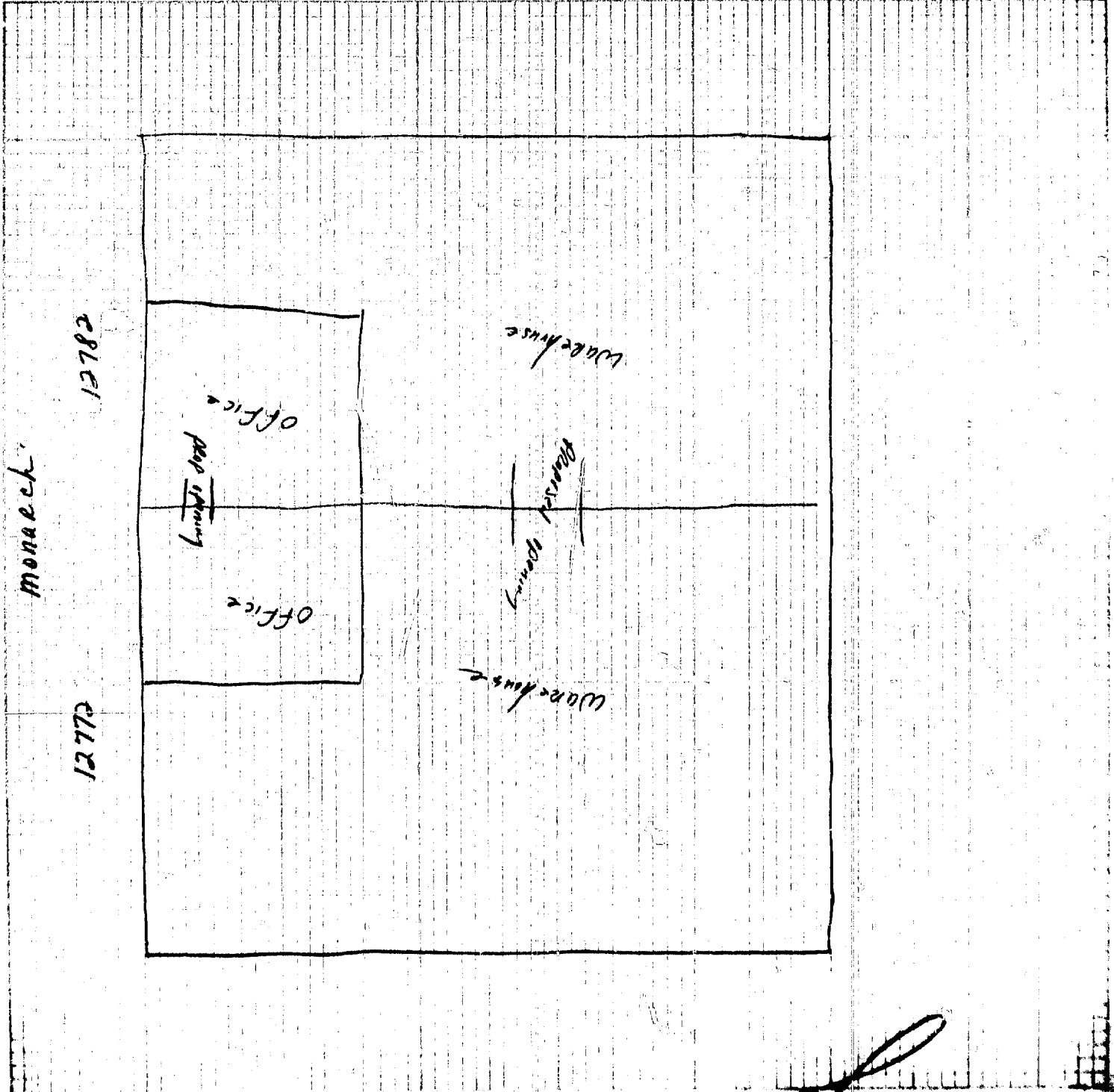
CITY OF GARDEN GROVE

PLOT PLAN

PUBLIC WORKS & DEVELOPMENT 1

OWNER <i>Acme Wire</i>		JOB ADDRESS <i>12772 - 12782 Monarch</i>		PERMIT NO. <i>12302A</i>
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSORS PARCEL NO. <i>13157513</i>	LOT	BLOCK
ADDRESS		CITY		
		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 type="checkbox"/> Demolish		
DATE <i>11/11</i>		JOB DESCRIPTION <i>Open wall between Suites + Eat off</i>		PERMIT VALUE <i>500-</i>

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



BUILDING PERMIT

DEPARTMENT OF BUILDING & SAFETY, GARDEN GROVE, PH. 537-4200

FIRE ZONE: OCC. PANCY E-2 F TYPE III OCC. LOAD
REMARKS: PLANS (SPRINKLERS)

PLANNING
USE ZONE: MF
SETBACKS: FRONT, LEFT, RIGHT, REAR
EAVE PROJ.: SEE PLOT PLAN
PLANNING ACTION: V-132-68
PARK. SPACES REQUIRED: 97
Zoning Approved By: ELM Date: 6-10-69

REMARKS:

PUBLIC WORKS

Parcel Map	Amount	Req'd	Provided
R/W Dedication		Not	
Bonds		Not	
Street Bond		Not	
Water Bond		Not	
Water Assmt. Fee	1362.00	Yes	Yes
Fire Hydrant F.F. Fee	450.00	Yes	Yes
Parkway Tree Fee	55.60	Yes	Yes
Landscape Bond		Not	

REMARKS:

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location		
Reinforcing		
Roof Shtg.	Completed 12-29-69	
Rough Frame		
Lath or Drywall		
Plas. Brown Ct.		
Other		
Final	12-30-69	
Utility Release		

VALUATION: NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT, ETC. \$539,400.00

ELM 6-6-69 FEES
Plan Check \$333.25 Building Permit \$666.52
Bond \$ Expiration Date

Permit Authorized By: 1 Bldg. Inspector J. P. [Signature] Date: 7-11-69

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

Job Address: 12822 MONARCH
Permit No.:
Lot No.: M 9 B Tract No.: PC-1718

Owner: ACME WIRE Tel. No.: 213-321-0020
Mailing Address: 335 W. BEACH BL. GARDENA 90247
City: GARDENA Zip No.:
 Arch. RON YEO AIA State Lic. No.:
 Engr. Tel. No.:

Mailing Address: 9012 GARDEN GROVE PL. GARDENA 90247
City: GARDENA Zip No.:
Contractor: SATELL & MCDAMM Lic. No. 209273
Mailing Address: 3006 ENTERPRISE, COSTA MESA Tel. No. 5492211
City: COSTA MESA Zip No.:
PRESENT BLDG. USE: PROPOSED BLDG. USE: Manufacturing

Validation: JUL 11-69 11 003 H***06.50
JUN -5-69 11 001 H***33.25

DESCRIBE WORK TO BE DONE: NEW MANUFACTURING BLDG.
NEW ADD'N ALTER. REPAIR DEMOLISH

FLOOR AREA (SQ. FT.): 20,000 NO. OF STORIES: 1 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.

CONTRACTORS SIGN BELOW
I certify that I am a licensed contractor and that my license is in full force and effect.
SATELL & MCDAMM, Thomas [Signature]
Contractor 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.

By: [Signature] Date:
Owner's Signature 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.

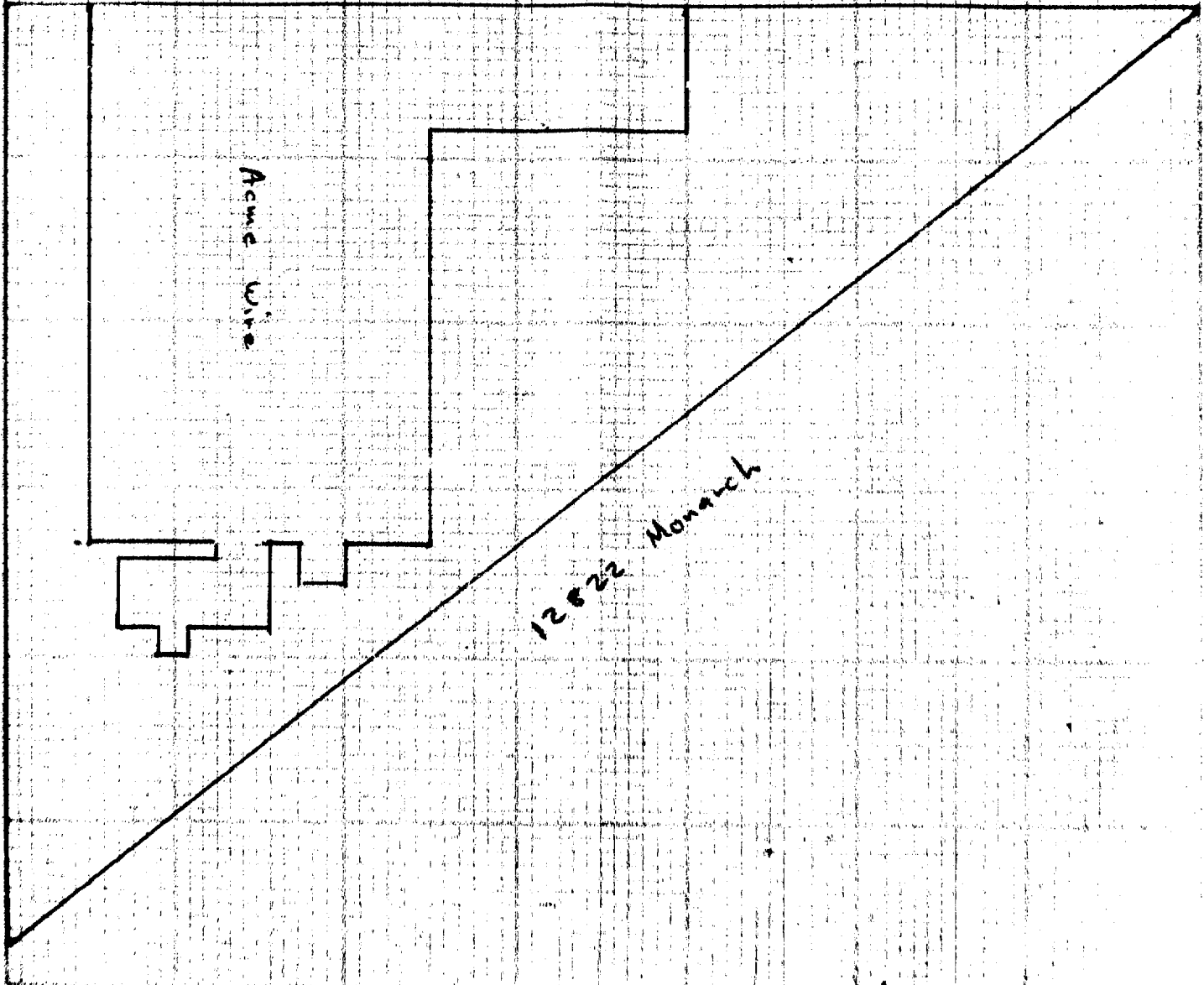
RELOCATION
PRESENT BLDG. ADDRESS:
MOVING CONTRACTOR ADDRESS:

BUILDING PERMIT PLOT PLAN

Department of Building
CITY OF GARDEN GROVE

ASSESSORS PARCEL NO. 131-571-55	DATE 7-11-69	PERMIT NO. 033708A
JOB ADDRESS AND CITY 12822 Monarch		
NAME OF CONSTRUCTION LENDER & BRANCH	LEGAL DESCRIPTION TRACT M & B	LOT BLOCK
ADDRESS	CITY	
JOB DESCRIPTION (PLEASE CHECK) <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		
PLANNING DEPT. APPROVAL <i>L. Riley</i>	DATE 7-11-69	OWNER Acme Wire
		USE Ind. Bldg. PERMIT VALUE \$539400.00

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



I Building Insp. / #2 Assessor / #3 File / #4 Permittee
I certify the information hereon is complete and correct. By *Thomas A. Testa*

ELECTRICAL PERMIT

DEPARTMENT OF BUILDING AND SAFETY

GARDEN GROVE, CALIFORNIA

PHONE: 537-4200

INSTRUCTION: USE TYPEWRITER OR BALL POINT PEN. PRINT FIRMLY. BE SURE ALL COPIES ARE LEGIBLE. NO FRAGILES PERMITTED. A DOUBLE FEE WILL BE CHARGED IF WORK IS STARTED BEFORE PERMIT IS ISSUED.

JOB ADDRESS: **12822 MONARCH** ELECTRIC PERMIT NO.: **035709 A**

LOT NO. IF NOT LISTED BELOW SEE CODE	TRACT NO.		FEE
	NUMBER	EACH	
Residential (I & H) sq. ft.		.01	
Garage, Resid. (J) sq. ft.		.005	
Service, Single Phase		\$1.00	
Service, Three Phase		1.00	
Meters, Single Phase		1.00	
Meters, Three Phase		1.00	
Pole, Power, Light, etc. <i>Tomp</i>		2.00	<i>2.00</i>
Sub-Panels 1 φ		1.00	
Sub-Panels 3 φ		1.00	
Outlets 1st 20		.20	
Outlets Over 20		.10	
Fixtures 1st 20		.20	
Fixtures Over 20		.10	
Fixtures, High Voltage Type		1.00	
Radiant Heat		1.00	
Washer		1.00	
Dryer		1.00	
Hot Water Heaters		1.00	
Dishwasher		1.00	
Domestic Range or Oven		1.00	
Motors Not Over 1 HP		1.00	
Motors Over 1 Not Over 3 HP		1.50	
Time Clock		1.00	
Sign, 1 Tran. or 1 Ballast		2.00	
Each Additional Tran. or Ballast		1.00	
Sign Hookup		1.00	

OWNER: **C.B. KILLIAN** PHONE: **DA 71600**

OWNER'S ADDRESS: **335 W. REDONDO BEACH BLVD GARDEN GROVE**

NEW BUILDING OR ADDITION - AREA: **9000** SQ. FT. EXISTING BUILDING REMODEL AREA: **0** SQ. FT. OCCUPANCY GROUP: **F29F2** USE OF BUILDING OR NUMBER OF UNITS: **Misc**

ELECTRICAL CONTRACTOR: **SOFFELL & M. ADAM** PHONE: **549 2211**

ADDRESS: **3006 ENTERPRISE COSTA MESA** CITY: **COSTA MESA** STATE LICENSE NO.: **20927**

VALIDATION: **JUL 11-69 11 064 *****4.00**

I HAVE CAREFULLY READ THE ABOVE APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF STATE AND LOCAL LAWS COVERING THIS TYPE OF CONSTRUCTION WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. NO PERSON SHALL BE EMPLOYED IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA.

SIGNATURE OF PERMITTEE: *Thomas Toell* DATE: **11 July 69**

BRANCH CIRCUIT PANEL: CIRCUITRY							
CIR. NO.	BKR. SIZE	WIRE SIZE	NOMENCLATURE	NO. OF OUTLET	WATTS L1	WATTS L2	WATTS L3
1							
2							
3							
4							
5							
6							

INSPECTION RECORD		
APPROVAL	DATE	INSPECTOR
Underground		
Conduit		
Wiring		
Ceiling Heat Cable		
Fixtures		
Service		
Final		
Utility Notified	7-29-69	<i>[Signature]</i>

ISSUANCE OF PERMIT: **2.00**

TOTAL FEE: **4.00**

SINGLE PHASE SERVICE SIZE: **100** RIG. CONDUIT

THREE PHASE SERVICE SIZE: 3 WIRE 4 WIRE

AMPS. WIRE RIG. CONDUIT

1 INSPECTOR: *[Signature]* PERMIT AUTHORIZED BY: *[Signature]* DATE: **7-11-69** BUILDING PERMIT NO.: **035708A** SIGN PERMIT NO.: **035709A** VENT. HEAT, AIR COND. PERMIT NO.:

PLUMBING PERMIT

CITY OF
GARDEN GROVE

537-4200

PERMIT FEES

No.	TYPE OF FIXTURE OR ITEM	EACH	\$	PER
	Water Closet (Toilet)	\$1.50		
	Bath Tub	1.50		
	Shower	1.50		
	Lavatory (Wash Basin)	1.50		
	Kitchen Sink	1.50		
	Garbage Disposal	1.50		
	Laundry Tub or Tray	1.50		
	Water Heater	1.50		
	Slop Sink	1.50		
	Floor Sink	1.50		
	Floor Drain	1.50		
	Dish Washer	1.50		
	Drinking Fountain	1.50		
	Urinal	1.50		
	Gas System — Outlets	1.50		
	House Sewer	5.00		
	Lawn Sprinklers (Single Dwelling Only)	2.00		
	Swimming Pool Piping	1.50		
	Sand Traps	1.50		
	Automatic Washing Mach.	1.50		
	Water Softeners	1.50		
	Backwash — Trap	1.50		
	Water Lateral	1.50		
	Backflow Protective Devices	2.00	2	00

Amount of Permit 2 00

TOTAL FEE \$ 4 00

Authorized By ELM Date 11-13-69

INSPECTOR

INSTRUCTION: 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.

For Applicant To Fill In Permit No.

Job 12822 MONARCH ST. Address 037600 A

Lot No. Tract No. Blk. No.

Owner ACME wire manufacturing

Owner's Address

Plumbing Contractor Bob's LANDSCAPE CO.

Contractor's Address 11891 LOARA ST.

Phone 534-6221 City Lic. No. 8384

Use of Bldg. LAWN SPRINKLERS

New Bldg. Old Bldg.

Validation NOV 13-69 11 013 W*****4.00

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 R. Kephart Date 11-12-69

Address

APPROVALS	DATE	INSPECTOR
SOIL PIPING		
GROUND PLUMBING	<u>11/9/69</u>	<u>ELM</u>
ROUGH PLUMBING		
GAS PIPING		
GAS VENT		
SEPTIC TANK or Cesspool		
SEWER		
GAS TEST		
MAIN DRAIN AND VACUUM LINES		
WATER HEATER		
BACKWASH		
WATER LATERAL		
FINAL	<u>11/23/69</u>	<u>ELM</u>
UTILITY CO. NOTIFIED		

Bldg. Permit #

ELECTRICAL PERMIT

DEPARTMENT OF BUILDING AND SAFETY

GARDEN GROVE, CALIFORNIA

PHONE: 537-4200

INSTRUCTION: 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: **12822 MONARCH** ELECTRIC PERMIT NO.: **037166A**

OWNER: **ACME WIRE** PHONE: **321-0620**

OWNER'S ADDRESS: **335 W. GARDENA BLVD. GARDENA, CALIF.**

NEW BUILDING OR ADDITION - AREA: **90,000** SQ. FT. EXISTING BUILDING REMODEL AREA: **50,000** SQ. FT. OCCUPANCY GROUP: USE OF BUILDING AND OR NUMBER OF UNITS:

ELECTRICAL CONTRACTOR: **TABER ELECTRIC** PHONE: **532-7300**

ADDRESS: **18811 CRENSHAW PL. TORRANCE** CITY: **TORRANCE** STATE LICENSE NO.: **230027**

VALIDATION

I HAVE CAREFULLY READ THE ABOVE APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF STATE AND LOCAL LAWS COVERING THIS TYPE OF CONSTRUCTION WILL BE COMPLIED WITH. WHETHER SPECIFIED OR NOT, NO PERSON SHALL BE EMPLOYED IN VIOLATION OF THE LAWS AND CODE OF THE STATE OF CALIFORNIA.

SIGNATURE OF PERMITTEE: *Donald S. Taber* DATE: **12-19-69**

BRANCH CIRCUIT PANEL: CIRCUITRY

CIR. NO.	BRKR. SIZE	WIRE SIZE	NOMENCLATURE	NO. OF OUTLET	WATTS L1	WATTS L2	WATTS L3
1							
2							
3							
4							
5							
6							

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Underground		
Conduit	1-6-70	RDP
Wiring	1-23-70	RDP
Ceiling Heat Cable		
Fixtures		
Service		
Final	4-29-70	RDP
Utility Notified		

SINGLE PHASE SERVICE SIZE: _____ AMPS. _____ WIRE _____ CONDUIT

THREE PHASE SERVICE SIZE: 3 WIRE 4 WIRE _____ AMPS. _____ WIRE _____ CONDUIT

BUILDING PERMIT NO.: **35708** SIGN PERMIT NO.: _____ VENT. HEAT. AIR COND. PERMIT NO.: _____

LOT NO.	TRACT NO.	NUMBER	EACH	FEE
RESIDENTIAL (I & H) sq. ft.				
Single, Resid. (J) sq. ft.				
Service, Single Phase				
Service, Three Phase				
Meters, Single Phase				
Meters, Three Phase				
Fals. Power, Light, etc.				
Sub Panels 1 φ				
Sub Panels 3 φ				
Outlets 1st 20				
Outlets Over 20				
Fixtures 1st 20				
Fixtures Over 20				
Fixtures, High Voltage Type				
Radiant Heat				
Washer				
Dryer				
Hot Water Heaters				
Dishwasher				
Domestic Range or Oven				
Motors Not Over 1 HP				
Motors Over 1 Not Over 3 HP				
Welders				
Motor over 3 not over 8)				
" " 8 not over 15)				
Motor over 15 not over 50)				
Time Clock				
Sign, 1 Tran. or 1 Ballast				
Each Additional Tran. or Ballast				
Sign Hookup				
ISSUANCE OF PERMIT				2.00
TOTAL FEE				119.00

INSPECTOR: _____ PERMIT AUTHORIZED BY: *ELM* DATE: **12-22-69**

HEATING, VENTILATING, REFRIGERATION & AIR CONDITIONING PERMIT

DEPARTMENT OF BUILDING
HARRY R. PEIRCE - DIRECTOR
8374200

CITY OF
GARDEN GROVE

FOR APPLICANT TO FILL IN (USE INK)
JOB ADDRESS

PERMIT NO.

12822 MONARCH

036159 A

7390

PERMIT FEES

NUMBER	TYPE OF FIXTURE OR ITEM	EACH	PRK
1	FURNACE UP TO 100,000 BTU's	\$4.00	20 00
4	FURNACE OVER 100,000 BTU's	5.00	20 00
9	FLOOR FURNACE, WALL OR SUSPENDED HEATER	4.00	36 00
14	VENT NCT INCL. IN PPLIANCE	2.00	28 00
	REPAIR, ALTERATION OR ADDITIONS TO HEATING SYSTEM, REFRIG., ETC.	4.00	
	GAS SYSTEM	1.50	
	AIR HANDLING UNIT OVER 10,000 CU. FT. PER MIN.	5.00	
	EVAPURATIVE COOLER	3.00	
21	SINGLE DUCT FAN VENT	2.00	42 00
	MULTIPLE DUCT FAN VENT	3.00	
	KITCHEN HOOD (RESIDENTIAL)	3.00	
	KITCHEN HOOD (COMMERCIAL)	10.00	
2	BOILER OR COMPRESSOR 3 H.P. OR LESS	4.00	8 00
2	BOILER OR COMPRESSOR 4 H.P. TO & INCL. 15 H.P.	7.50	15 00
	BOILER OR COMPRESSOR 16 H.P. TO & INCL. 30 H.P.	10.00	
	BOILER OR COMPRESSOR 31 H.P. TO & INCL. 50 H.P.	15.00	
	BOILER OR COMPRESSOR OVER 50 H.P.	20.00	

LOT NO. _____ TRACT NO. _____

OWNER *ACME WIRE PROD.*

OWNER'S ADDRESS *12822 MONARCH*

CONTRACTOR *WESTERN AIR & REFR.*

CONTRACTOR'S ADDRESS *15414 S. AVALON* CITY *COMPTON*

PHONE *327 4400* CITY LIC. NO. _____

USE OF BUILDING *FACTORY & OFFICES*

NEW BUILDING OLD BUILDING

VALIDATION *AUG 12-69* 11 067 W *** 151.00
31,000.00

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 *[Signature]* DATE *8-8-69*

APPROVALS	DATE	INSPECTOR
FURNACE		
FURNACE VENTS		
GAS PIPING		
DUCTS	<i>11-13-69</i>	<i>[Signature]</i>
SINGLE DUCT FAN VENT		
KITCHEN HOOD		
AIR HANDLING UNIT		
EVAPURATIVE COOLER		
BOILER OR COMPRESSOR		

ISSUANCE OF PERMIT 2 00

TOTAL FEE \$ *151 00*

PERMIT AUTHORIZED BY *Rigano* DATE *8-12-69*

ROUTING: #1 INSPECTOR #2 STATISTICS #3 PERMITTEE #4 FILE

BUILDING PERMIT NO. _____

UTILITY CO. NOTIFIED *12-25-69*

PLUMBING PERMIT

Department of Building
537-4200

CITY OF
GARDEN GROVE

PERMIT FEES

No.	TYPE OF FIXTURE OR ITEM	EACH	\$ FEE
4	Water Closet (Toilet)	1.50	21.00
	Bath Tub	1.50	
	Shower	1.50	
5	Lavatory (Wash Basin)	1.50	7.50
3	Kitchen Sink	1.50	4.50
	Garbage Disposal	1.50	
	Laundry Tub or Tray	1.50	
1	Water Heater	1.50	1.50
1	Slop Sink	1.50	1.50
2	Floor Sink	1.50	3.00
10	Floor Drain	1.50	15.00
	Dish Washer	1.50	
3	Drinking Fountain	1.50	4.50
1	Urinal	1.50	1.50
1	Gas System -- Outlets	1.50	1.50
1	House Sewer	1.50	1.50
	Lawn Sprinklers (Single Dwelling) Only	2.00	
	Swimming Pool Piping	1.50	
	Sand Traps	1.50	
	Automatic Washing Mach.	1.50	
	Water Softeners	1.50	
	Backwash -- Trap	1.50	
	Water Lateral	1.50	
1	Backflow Protective Devices	2.00	2.00
1	Classifier 50¢/ft		3.00
2	Holding Tanks "		4.00
	Issuance of Permit		2.00

TOTAL FEE

Permit Authorized By *[Signature]* Date 8-13-69

ROUTING: #1 Plumbing Inspector #2 Statistics #3 Owner #4 Office File

For Applicant to Fill In (Use Ink)

Job 12822 Prop. No. U.S. 11111
 Address 12822 MONARCH
 Lot No. _____ Tract No. _____ Blk. No. _____
 Owner Acme Wire Products Corp.
 Owner's Address _____
 Plumbing Contractor PACIFIC PLUMBING CO.
 Contractor's Address 576 CEDAR BL. COVINA
 Phone 966-5413 City Lic. No. _____
 Use of Bldg. MANUF. BLDG.
 New Bldg. Old Bldg.
 Validation AUG 13-69 TT 030 11***74.0

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 12 August 1969

Address _____

APPROVALS	DATE	INSPECTOR
SOIL PIPING	8-29-69	[Signature]
GROUND PLUMBING		
ROUGH PLUMBING	11-1-69	[Signature]
GAS PIPING		
GAS VENT		
SEPTIC TANK or Cesspool		
SEWER	11-1-69	[Signature]
GAS TEST	12-2-69	[Signature]
MAIN DRAIN AND VACUUM LINES		
WATER HEATER		
BACKWASH		
WATER LATERAL		
FINAL	12-23-69	[Signature]
UTILITY CO. NOTIFIED	12/23/69	[Signature]

Bldg. Permit # 0552004

ELECTRICAL PERMIT

DEPARTMENT OF DEVELOPMENT SERVICES

GARDEN GROVE, CALIFORNIA

PHONE: 537-4200

INSTRUCTION: USE TYPEWRITER OR BALL POINT PEN. PLEASE
FIRMLY BE SURE ALL COPIES ARE LEGIBLE. NO FRAUDS
PERMITTED. A DOUBLE FEE WILL BE CHARGED IF WORK HAS
STARTED BEFORE PERMIT IS ISSUED.

JOB ADDRESS
12822 Monarch St G.G. **037740 A**

OWNER
Home Wire Co. **037740 A**

OWNER'S ADDRESS
CITY

NEW BUILDING OR ADDITION - AREA 50. FT. EXISTING BUILDING REMODEL AREA 50. FT. OCCUPANCY GROUP USE OF BUILDING OR NUMBER OF UNITS

ELECTRICAL CONTRACTOR
Tabor Electric

ADDRESS CITY STATE LICENSE NO.

VALIDATION
NOV 20-69 11 002 U**700**

I HAVE CAREFULLY READ THE ABOVE APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF STATE AND LOCAL LAWS COVERING THIS TYPE OF CONSTRUCTION WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. NO PERSON SHALL BE EMPLOYED IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA.

SIGNATURE OF PERMITTEE DATE
X Edward S Alderson

BRANCH CIRCUIT PANEL: CIRCUITRY

CIR. NO.	BKR. SIZE	WIRE SIZE	NOMENCLATURE	NO. OF OUTLET	WATTS LT	WATTS LT	WATTS LT
1							
2							
3							
4							
5							
6							

IF NOT LISTED BELOW SEE CODE	TRACT NO.		
	NUMBER	EACH	FEE
Residential (I & H) sq. ft.		.01	
Garage, Resid. (J) sq. ft.		.005	
Service, Single Phase		\$1.00	
Service, Three Phase		1.00	
Meters, Single Phase		1.00	
Meters, Three Phase		1.00	
Pole, Power, Light, etc.		2.00	
Sub-Panels 1 φ		1.00	
Sub-Panels 3 φ		1.00	
Outlets 1st 20		.20	
Outlets Over 20		.10	
Fixtures 1st 20		.20	
Fixtures Over 20		.10	
Fixtures, High Voltage Type		1.00	
Radiant Heat		1.00	
Washer		1.00	
Dryer		1.00	
Hot Water Heaters		1.00	
Dishwasher		1.00	
Domestic Range or Oven		1.00	
Motors Not Over 1 HP		1.00	
Motors Over 1 Not Over 3 HP		1.50	

TEMP. 50 DAYS **5.00** **5.00**

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Underground		
Conduit		
Wiring		
Ceiling Heat Cable		
Fixtures		

Service
FINAL Gas - per Dat - 12/12/69
Utility Notified Elec 11-20-69

SINGLE PHASE SERVICE SIZE
AMPS. WIRE RIG CONDUIT

THREE PHASE SERVICE SIZE 3 WIRE 4 WIRE
AMPS. WIRE RIG CONDUIT

BUILDING PERMIT NO. SIGN PERMIT NO. VENT. HEAT AIR COND PERMIT NO.

Time Clock	1.00
Sign, 1 Tran. or 1 Ballast	2.00
Each Additional Tran. or Ballast	1.00
Sign Hookup	1.00
ISSUANCE OF PERMIT	2.00

TOTAL FEE **7.00**

INSPECTOR PERMITTED AUTHORIZED BY DATE
11-20-69

CITY OF GARDEN GROVE, CALIFORNIA

Development Services Department

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

Address : 12822 MONARCH ST
Parcel No: 21503110 Type: B33

Suite: PERMIT NO.: 12114
Date : 03/03/92 Insp Dist : ZB

Owner : RICKLIE CORP (NO)
Address: _____
Phone: _____

Applicant: HAR-BRO
Address : 2360 MIRA MAR AVENUE
LONG BEACH CA 90815
Phone: 213-986-4165

Architect: _____
Address : _____

Engineer: DAVID WEBER
Address : 7077 Orangewood, Suite 215
C.G. 92641

LIC: _____ EXP: _____ PH: _____

LIC: C30987 EXP: 3/3/92 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.

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 \$200; Section 7048 Employee working for wages only; Section 7053 Other: _____

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

Proposed Work: REPAIR ROOF AND ROOF FRAMING

Value : 15000
Floor Area: 0

PLANCHECK	1	111.42
Permit	1	163.86
Issuance	1	10.00
GENL PLAN/CULT ART	1	28.25
Pln.Ret.lgr.Size	15	15.00

PER	163.86
CHECK	111.42
RET	15.00
NEGL	28.25
ISS	10.00
TOTAL	328.53

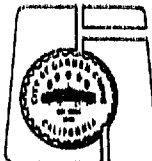
INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Pre Inspect	_____	_____
Foundation	_____	_____
Concrete Floor	_____	_____
Reinforcing	_____	_____
Masonry	_____	_____
Roof Shtg	_____	_____
Rough Frame	_____	_____
Insul / Energy	_____	_____
Drywall	_____	_____
Lath	_____	_____
Plas. Brown Ct.	_____	_____
Landscaping	_____	_____
Pre Gunite	_____	_____
Pre Deck	_____	_____
Pre Plaster	_____	_____
Planning Final	_____	_____
Bldg Final	_____	_____
Utility Notified	_____	_____

EXPIRED
6/30/93

Authorized by: X [Signature] TOTAL FEES 328.53

Inspection Requests
741-5382
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.

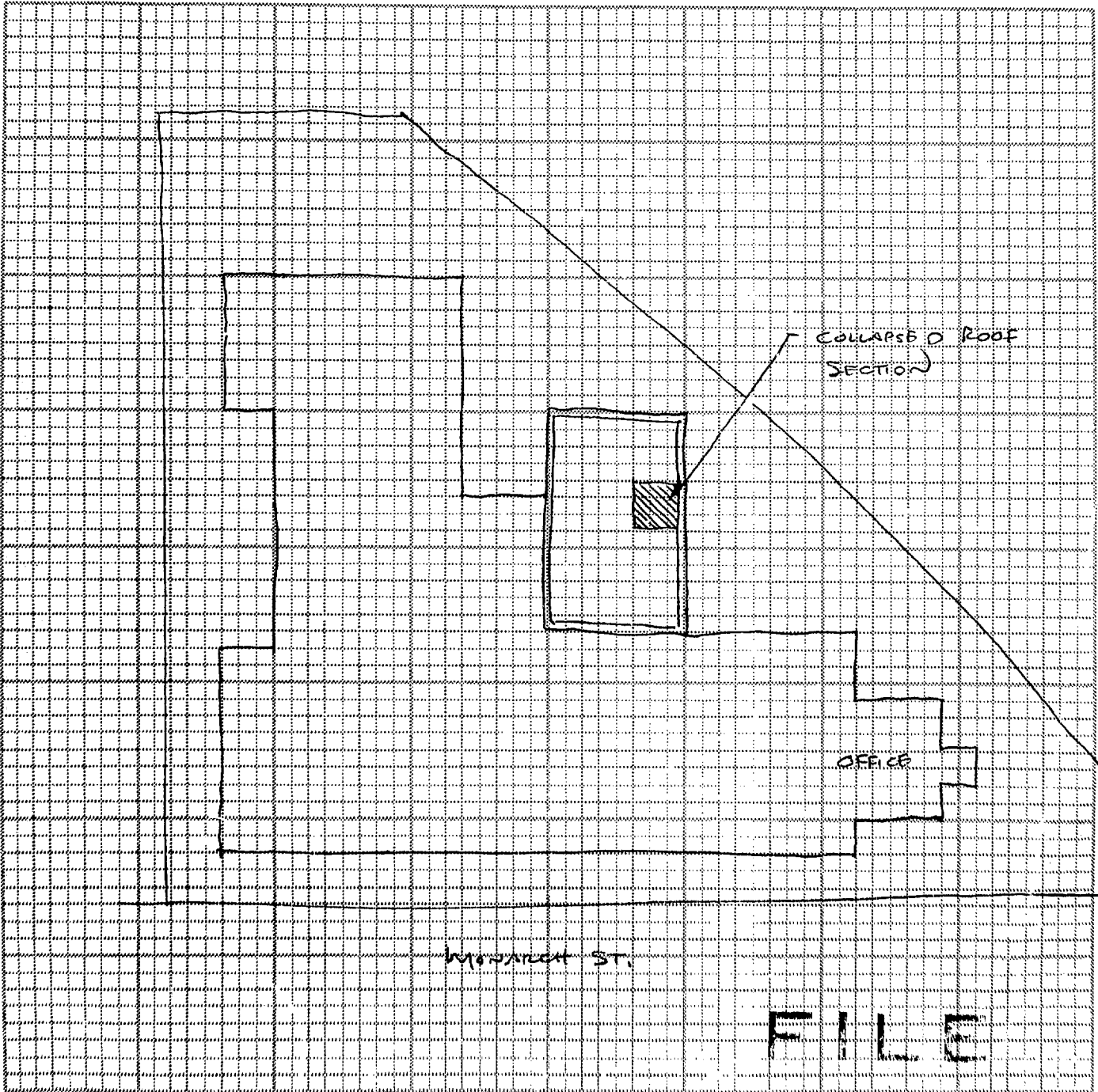
CITY OF GARDEN GROVE

PLOT PLAN

DEVELOPMENT SERVICES DEPARTMENT

PLANNING ACTION	USE ZONE	LOT SIZE	JOB ADDRESS 12822 MONARCH ST.			PERMIT NO. 12114
LAND USE APPROVED BY <i>[Signature]</i>	OCCUPANCY	LOT COVERAGE	ASSESSORS PARCEL NO. 21503110	LOT	BLOCK	TRACT
REMARKS:	TYPE	% INCREASE	(PLEASE CHECK ONE OR MORE)			
	FIRE SPRINK.	DATE	<input type="checkbox"/> NEW	<input type="checkbox"/> ADDITION	<input type="checkbox"/> ALTERATION	<input checked="" type="checkbox"/> REPAIR
			JOB DESCRIPTION REPAIR COLLAPSED ROOF SECTION			PERMIT VALUE 15,000.-

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS



FILE

<input type="checkbox"/> ARCH ENGR. WEBER ENGINEERING, INC.	White: Building Insp. / Yellow: Assessor / Pink: Permittee	
MAILING ADDRESS 7077 ORANGEWOOD CITY GARDEN GROVE 92641	AGENT FOR I certify the information hereon is complete and correct	2/27/92
TEL. NO. 898 3862	DAVID A. WEBER (PRINT) PROPERTY OWNER	<i>[Signature]</i>
STATE LIC. NO. & TYPE C 30987	(SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT	DATE

✓

PERMIT NO. : 20740 Inspector area: 2H
 Type : H
 Date Issued : 10/07/93
 Title :
 Desc : **EXHAUST SYSTEM FOR WOOD MILL AREA**
 Location : 12822 MONARCH ST
 Suite :
 Parcel number : 21502101 Owner: CANNON WEST
 Occupancy :
 Applicant : AIR MANAGEMENT SYSTEM Phone Number : 619)390-7803
 7369 QUAIL CYN. RD.
 EL CAJON CA 92021

Air Handling over 10M CFM	2	22.00
PLAN CHECK	1	14.30
Issuance	1	15.00
CULTURAL ARTS	1	1.00
GENERAL PLAN	1	2.00

H PER	22.00
H CHECK	14.30
MISC.	2.00
MISC.	1.00
ISS	15.00

0W6506A10-07*93 CHECK 54.30

INSPECTION RECORD

APPROVAL DATE INSPECTOR

Furnace _____
 Furnace Vents _____
 Gas Piping _____
 Ducts _____
 Duct Fan Vent _____
 Kitchen Hood _____
 Air Handl Unit _____
 Evap Cooler _____
 Boiler Comp _____
 Decor Appl _____

3200	14.30
3223 PERMITS/GENE	2.00
3224 PERMITS/CULT	1.00
3229 HEATING PERM	22.00
3517 ISSUANCE FEE	15.00

54.30

FINAL 10/12/93 Areny
 Utility Notified _____

741-5332
 741-5307

MK

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.

Address : 12822 MONARCH ST
Parcel No: 21502101 Type: B7

Suite: PERMIT NO.: 20047
Date : 08/25/93 Insp Dist : ZB

Owner : CANNON WEST
Address: _____
Phone: _____

Applicant: AIR MANAGEMENT SYSTEM
Address : 7369 QUAIL CYN. RD.
EL CAJON CA 92021
Phone: 619)390-7803

Architect: _____
Address : _____

Engineer: _____
Address : _____

LIC: _____ EXP: _____ PH: _____

LIC: _____ EXP: _____ PH: _____

Proposed Work: CONSTRUCT NEW MILL AREA/INSTAL
L DUST COL LECTION SYSTEM/SPRAY BOOTH

Value : 35000
Floor Area: 0

Plan Check	1	248.50
Permit	1	384.75
Issuance	1	15.00
PLAN CHECK PAID 6.10.93	1	-297.85
Pln.Ret.Ltr.Size	50	42.50
Pln.Ret.Lgr.Size	8	8.00
Cultural Arts	1	21.45
General Plan	1	43.55

INSPECTION RECORD

APPROVAL DATE INSPECTOR

Pre Inspect _____
Foundation _____
Concrete Floor _____
Reinforcing _____
Masonry _____
Roof Shtg _____
Rough Frame 8/30/93 [Signature]
Insul / Energ _____
Drywall 9/1/93 [Signature]
Lath _____
Plas. Brown Ct. _____
Landscaping _____
Pre Gunite _____
Pre Deck _____
Pre Plaster _____
Planning Final _____
Bldg Final 10-10-93 [Signature]
Utility Notified _____

3200 -297.85
3223 PERMITS/GENE 43.55
3224 PERMITS/CULT 21.45
3226 BLDG PERM & 384.75
3517 ISSUANCE FEE 15.00
3542 PLAN RETENTI 50.50

465.94

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.

#5392

PERMIT NO. : 20494
Type : E
Date Issued : 09/23/93
Title :
Desc :
Location : 12822 MONARCH ST
Suite :
Parcel number : 21502101
Occupancy :
Applicant : AIR MANAGEMENT SYSTEM
7369 QUAIL CYN. RD.
EL CAJON CA 92021

Inspector area:ZE

Owner: CANNON WEST

Phone Number : 619)390-7803

Fixtures 1-20	6	4.50
COMMCL OVEN, 50000W MAX	1	15.00
PWR APPAR 10HP KW KVA MAX	3	22.50
PWR APPAR 50HP KW KVA MAX	1	15.00
PLAN CHECK	1	37.05
Issuance	1	15.00
CULTURAL ARTS	1	1.00
GENERAL PLAN	1	2.00

E PER 57.00
ISS 15.00
E CHEK 37.05
MISC. 2.00
MISC. 1.00

0W4517A 9-23'93 CHECK 112.05

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
----------	------	-----------

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

3200 37.05
 3223 PERMITS/GENE 2.00
 3224 PERMITS/CULT 1.00
 3227 ELECTRICAL P 57.00
 3517 ISSUANCE FEE 15.00

112.05

MN

741-5332

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.

741-5307

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

FINAL 12-20-93 *[Signature]*
 Utility Notified _____

CERTIFICATE OF OCCUPANCY

2

DEPARTMENT OF BUILDING

CITY OF GARDEN GROVE

HARRY R. PEIRCE, Director

11391 ACACIA

JOB ADDRESS 12822 Monarch St. PERMIT NO. 35708-A

USE OF BUILDING Manufacturing GROUP E-2 & F-2 TYPE III

USE ZONE M-P APPROVED BY Wm. K. Miller DATE 12/30/69

ZONING REMARKS 57 Parking Spaces Required - 1-122-68

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 Acme Wire ADDRESS 335 W. Redondo Beach Blvd.
Garden

Authorized By E.L. Mendenhall, Plan Check Engineer DATE Jan. 2, 1970

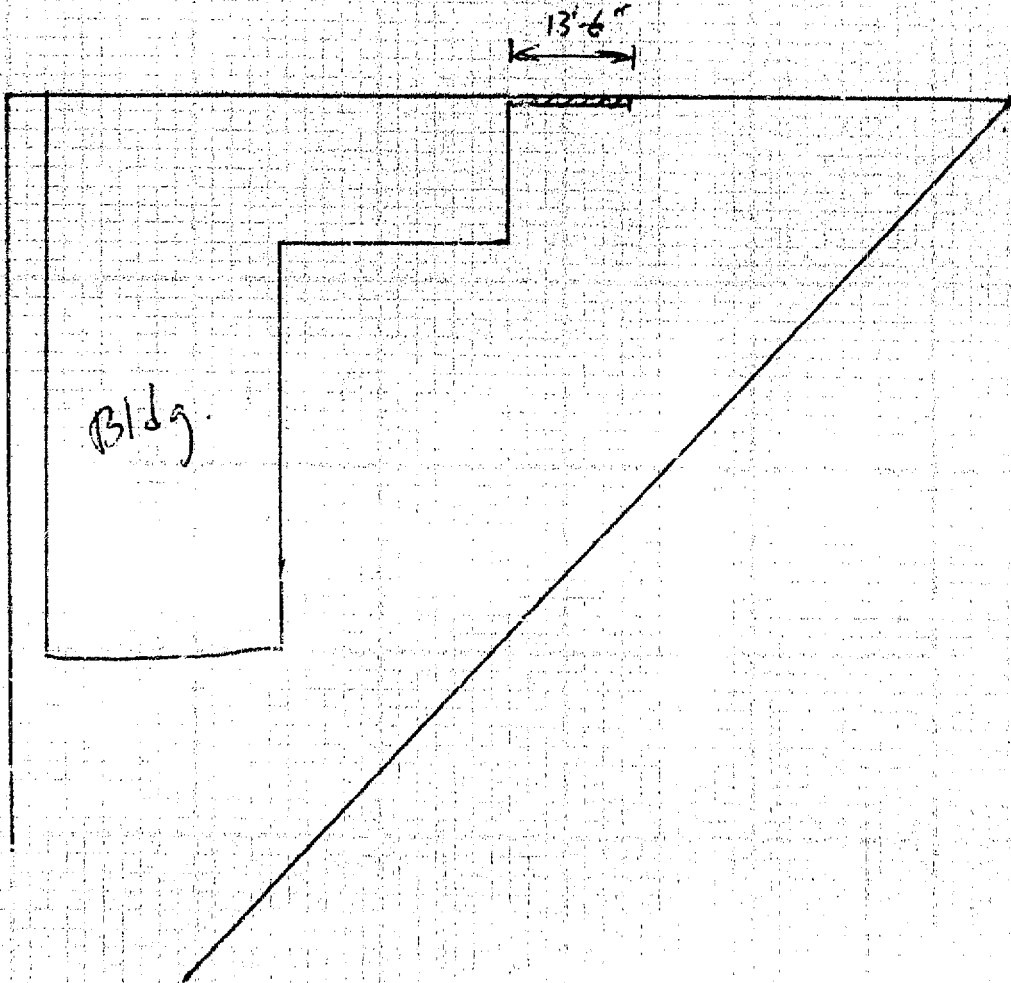
Notice! Post in a Conspicuous Place on the Premises

BUILDING PERMIT PLOT PLAN

Department of Building
CITY OF GARDEN GROVE

ASSESSORS PARCEL NO. 131-571-55	DATE 12-4-70	PERMIT NO. 42757A
JOB ADDRESS AND CITY 12822 Monarch St.		
NAME OF CONSTRUCTION LENDER & BRANCH	LEGAL DESCRIPTION TRACT	LOT BLOCK
ADDRESS	JOB DESCRIPTION (PLEASE CHECK) <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish	
PLANNING DEPT. APPROVAL <i>[Signature]</i>	DATE 12-4-70	OWNER Dura-Coat Block Wall PERMIT VALUE 80.00

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



PLUMBING PERMIT

CITY OF
GARDEN GROVE

537-4200

PERMIT FEES

No.	TYPE OF FIXTURE OR ITEM	EACH	\$	FEE
	Water Closet (Toilet)	\$1.50		
	Bath Tub	1.50		
	Shower	1.50		
	Lavatory (Wash Basin)	1.50		
1	Kitchen Sink	1.50	1.50	
	Garbage Disposal	1.50		
	Laundry Tub or Tray	1.50		
	Water Heater	1.50		
	Slop Sink	1.50		
	Floor Sink	1.50		
	Floor Drain	1.50		
	Dish Washer	1.50		
	Drinking Fountain	1.50		
3	Urinal	1.50	4.50	
	Gas System — Outlets	1.50		
	House Sewer	5.00		
	Lawn Sprinklers (Single Dwelling Only)	2.00		
	Swimming Pool Piping	1.50		
	Sand Traps	1.50		
	Automatic Washing Mach.	1.50		
	Water Softeners	1.50		
	Backwash — Trap	1.50		
	Water Lateral	1.50		
	Backflow Protective Devices	2.00		

Issuance of Permit

2 00

TOTAL FEE

\$ 8.00

Permit Authorized By

Date 7-5-70

INSTRUCTION: 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.

For Applicant to Fill in

Permit No.

Job 12822
Address 12833 MONARCH

03110

Lot No. Tract No. Blk. No.

Owner Acme Wire Products Corp.

Owner's Address (gone)

Plumbing Contractor Pacific Plumbing Co.

Contractor's Address 576 E. EDNA PL. GARDEN GROVE

Phone 966-3613 City Lic. No.

Use of Bldg. MANF. Bldg.

New Bldg. Old Bldg.

Validation JAN-5-70 11 200 *****8.00

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 Dan C. [Signature] Date 1-5-70

Address 576 E. EDNA PL. GARDEN GROVE

APPROVALS	DATE	INSPECTOR
SOIL PIPING		
GROUND PLUMBING		
ROUGH PLUMBING		
GAS PIPING		
GAS VENT		
SEPTIC TANK or Cesspool		
SEWER		
GAS TEST		
MAIN DRAIN AND VACUUM LINES		
WATER HEATER		
BACKWASH		
WATER LATERAL		
FINAL	7-26-70	[Signature]
UTILITY CO. NOTIFIED		

INSPECTOR

HEATING, VENTILATING, REFRIGERATION & AIR CONDITIONING PERMIT

DEPARTMENT OF BUILDING
HARRY R. PEIKKE - DIRECTOR
537-4200

CITY OF
GARDEN GROVE

FOR APPLICANT TO FILL IN (USE INK)
JOB ADDRESS

PERMIT NO.

037105 A

12822 MONARCH

PERMIT FEES

NUMBER	TYPE OF FIXTURE OR ITEM	EACH	FEE
	FURNACE UP TO 100,000 BTU's	\$4.00	
2	FURNACE OVER 100,000 BTU's <i>Chas</i>	5.00	10.00
	FLOOR FURNACE, WALL OR SUSPENDED HEATER	4.00	
	VENT NOT INCL. IN APPLIANCE	2.00	
	REPAIR, ALTERATION OR ADDITIONS TO HEATING SYSTEM, REFRIG., ETC.	4.00	
	GAS SYSTEM	1.50	
	AIR HANDLING UNIT OVER 10,000 CU. FT. PER MIN.	5.00	
	EVAPORATIVE COOLER	3.00	
2	SINGLE DUCT FAN VENT	2.00	4.00
	MULTIPLE DUCT FAN VENT	3.00	
	KITCHEN HOOD (RESIDENTIAL)	3.00	
	KITCHEN HOOD (COMMERCIAL)	10.00	
	BOILER OR COMPRESSOR 3 H.P. OR LESS	4.00	
	BOILER OR COMPRESSOR 4 H.P. TO & INCL. 15 H.P.	7.50	
	BOILER OR COMPRESSOR 16 H.P. TO & INCL. 30 H.P.	10.00	
	BOILER OR COMPRESSOR 31 H.P. TO & INCL. 50 H.P.	15.00	
	BOILER OR COMPRESSOR OVER 50 H.P.	25.00	

LOT NO. _____ TRACT NO. _____

OWNER *DURA-CON, INC*

OWNER'S ADDRESS *12822 MONARCH*

CONTRACTOR *BEATTIE METAL PRODUCTS*

CONTRACTOR'S ADDRESS *153 S. 9TH AVE. CITY INDUSTRY*

PHONE *213-333-8111* CITY (C. NO. _____)

USE OF BUILDING *INSTALLATION OVER EXHAUSTS*

NEW BUILDING OLD BUILDING

VALIDATION *OCT 14-69* *021* *WWW* *15.00*

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 *[Signature]* DATE *10-17-69*

ADDRESS _____

APPROVALS	DATE	INSPECTOR
FURNACE		
FURNACE VENTS	<i>11-14-69</i>	<i>R19910</i>
GAS PIPING		
DUCTS		
SINGLE DUCT FAN VENT		
KITCHEN HOOD		
AIR HANDLING UNIT		
EVAPORATIVE COOLER		
BOILER OR COMPRESSOR		

ISSUANCE OF PERMIT _____ 2 00

TOTAL FEE \$ *16.00*

PERMIT AUTHORIZED BY *[Signature]* DATE *10-12-69*

ROUTING: BUILDING PERMIT NO. _____

#1 INSPECTOR #2 STATISTICS #3 PERMITTEE #4 FILE

12671 L24

PLUMBING PERMIT

CITY OF
GARDEY GROVE

537-4200

PERMIT FEES

No.	TYPE OF FIXTURE OR ITEM	EACH	\$	PER
	Water Closet (Toilet)	\$1.50		
	Bath Tub	1.50		
	Shower	1.50		
	Lavatory (Wash Basin)	1.50		
	Kitchen Sink	1.50		
	Garbage Disposal	1.50		
	Laundry Tub or Tray	1.50		
	Water Heater	1.50		
	Slop Sink	1.50		
	Floor Sink	1.50		
	Floor Drain	1.50		
	Dish Washer	1.50		
	Drinking Fountain	1.50		
	Urinal	1.50		
	Gas System — Outlets	1.50		
	House Sewer	5.00		
	Lawn Sprinklers (Single Dwelling Only)	2.00		
	Swimming Pool Piping	1.50		
	Sand traps	1.50		
	Automatic Washing Mach.	1.50		
	Water Softeners	1.50		
	Backwash — Trap	1.50		
	Water Lateral	1.50		
	Backflow Protective Devices	2.00		
	FIRE SPRINKLER SYSTEM			
	VALUATION \$6,500.00			
	Valuation of Permit		2	00
	TOTAL FEE			34 50

INSTRUCTION: 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.

For Applicant to Fill in

Permit No.

Job **12822 MONARCH ST**
Address

050372 A

Lot No. Tract No. Blk. No.

Owner **ACME WIRE PRODUCTS**

Owner's Address **12822 MONARCH ST, GARDEY GROVE**

Plumbing Contractor **BARNARD ECKER Co., Inc.**

Contractor's Address **16722 S. PARKSIDE CERRITOS**

Phone **986 2391** City Lic. No. **755**

Use of Bldg. **MFE**

New Bldg. Old Bldg.

Validation **MAR-2-72 11 021 114443450**

I hereby acknowledge that I have read this application and certify 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 Gardena, Grove and/or State of California, or that I am the legal owner of the property described herein, 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 W. Esmos** Date **2 MAR 72**

Address **16722 S. PARKSIDE CERRITOS**

APPROVALS	DATE	INSPECTOR
SOIL PIPING		
GROUND PLUMBING		
ROUGH PLUMBING		
GAS PIPING		
GAS VENT		
SEPTIC TANK or Cesspool		
SEWER		
GAS TEST		
MAIN DRAIN AND VACUUM LINES		
WATER HEATER		
BACKWASH		
WATER LATERAL		
FINAL	5-11-72	09
UTILITY CO. NOTING		

INSPECTOR

Permit Authorized By **[Signature]** Date **3-2-72**

BUILDING PERMIT

DEPARTMENT OF BUILDING & SAFETY, GARDEN GROVE PH. 537-4200

FIRE ZONE
 OCCU. PANCY E-2 F-2 TYPE III SP. OCC. LOAD
 REMARKS SH. Plans

PLANNING

USE ZONE <u>M-P.</u>	SETBACKS	FRONT	LEFT	RIGHT	REAR
	EAVE PROJ.		<u>1/2</u>		

PLANNING ACTION: [Signature] PARK. SPACES REQUIRED

Zoning Approved By [Signature] Date 12-4-70

Remarks:

PUBLIC WORKS

Parcel Map	Amount	Req'd	Provided
R/W Dedication			
Bonds			
Street Bond			
Water Bond			
Water Assmt. Fee			
Fire Hydrant F.F. Fee			
Parkway Tree Fee			
Landscape Bond			

Remarks:

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location	<u>12-8-70</u>	<u>[Signature]</u>
Reinforcing	<u>12-14-70</u>	<u>[Signature]</u>
Roof Shtg.		
Rough Frame		
Lath or Drywall		
Plas. Brown Ct.		
Other		
Final	<u>2-11-71</u>	<u>[Signature]</u>
Utility Release		

VALUATION NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT., ETC. \$ 80.00

FEES

Plan Check	\$ <u>2.50</u>	Building Permit	\$ <u>5.00</u>
Bond	\$	Expiration Date	

Permit Authorized By [Signature] Date 12-4-70

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 12822 Monarch St. Permit No.
 Lot No. Tract No.

Owner ACHIEVE WIRE PRODUCTS CORP Tel. No.
 Mailing Address 12822 Monarch St. Garden Grove City Zip No. 92640
 Arch. Engr. State Lic. No. Tel. No.
 Mailing Address City Zip No.

Contractor Owner Lic. No. Tel. No.
 Mailing Address City Zip No.

PRESENT BLDG. USE PROPOSED BLDG. USE
Industrial

Validation DEC-4-70 11 014 M***\$2.50
 DEC-4-70 11 015 M***\$5.00

DESCRIBE WORK TO BE DONE 6" Block Wall

NEW ADD'N ALTER. REPAIR DEMOLISH

FLOOR AREA 13 1/2 LF 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.

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-BUILD - 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.

Owner's Signature [Signature] By [Signature] Authorized Agent _____ Date 12-4-70
 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

INSPECTION RECORD

For Applicant to Fill in

F-716

TYPE	OCC. LOAD		FIRE SPRINK.		
	FRONT	LEFT	RIGHT	REAR	
USE ZONE	Ear Prot				
	Setbacks				
PLANNING ACTION	PLANS				
LAND USE APPROVED BY	Meh Guber 4/21/89				
REMARKS:					
G.S.SANT DIS. FEE REC'D.	O.C.SANT DIS. FEE REC'D.	DATE	INITIAL		
PARCEL MAP	REQ'D	PROVIDED			
R/W DEDICATION					
FEES AND BONDS					
ST BOND	REV. CODE	AMOUNT			
WATER BOND					
WATER ASSMT FEE - ACRES					
WATER ASSMT FEE - FT.					
PARKWAY TREE FEE					
PARK & REC. FEE - DIST.					
DRAIN ASSMT FEE - DIST.					
PLAN RETENTION FEE					
BLDG PLAN CHECK		10 20			
BLDG PERMIT FEE		15 50			
ISSUANCE		10 50			
VALUATION					
	TOTAL FEES	35 70			
AUTHORIZED BY	DATE	4-29-89			

APPROVAL	DATE	INSPECTOR
PRE INSPECTION		
FOUNDATION & LOCATION		
CONCRETE FLOOR		
REINFORCING		
MASONRY		
ROOF SHING		
ROUGH FRAME		
INSULATION, ENERGY		
DRYWALL		
LATH		
PLAS. BROWN CT.		
LANDSCAPING		
PRE GRUNTE		
PRE DECK		
PRE PLASTER		
PLANNING	4/21/89 ML	
FINAL	4/27/89 Eful	

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.

APPLICANT SIGNATURE DATE 4-21-89

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 Professions Code, Division 3, Chapter 9, Contractors License Law, under the following Section Owner Section 7033 Minor work under \$200 Section 7048 Employee working for me Section 7053

Other _____

SIGNATURE PROPERTY OWNER DATE _____

12822 Monarch St.

BLK NO. TRACT NO. PERMIT NO. 163680A

OWNER: CLARISON Comp. TEL NO. 714 895 3232

MAILING ADDRESS _____

ARCH ENGR

MAILING ADDRESS _____

TEL NO. _____ STATE OF, NO. & TYPE

VALIDATION: B-PER 10.20 B-PER 15.50 ISS 10.00 1M4-038A 4-21-89 CASH 35.70

CONTRACTOR: EMPIRE GAS Garden

MAILING ADDRESS _____

TEL NO. 714 892 7466

PRESENT BLDG USE: N/A. PROPOSED BLDG USE: N/A

DESCRIBE WORK TO BE DONE: SET 1 PG TANK

NEW ADD ALTER REPAIR DEMOLISH

FLOOR AREA: N/A NO. OF STORIES: N/A

ISO FT. N/A

If work is not started within 180 days from date of issue or is discontinued 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

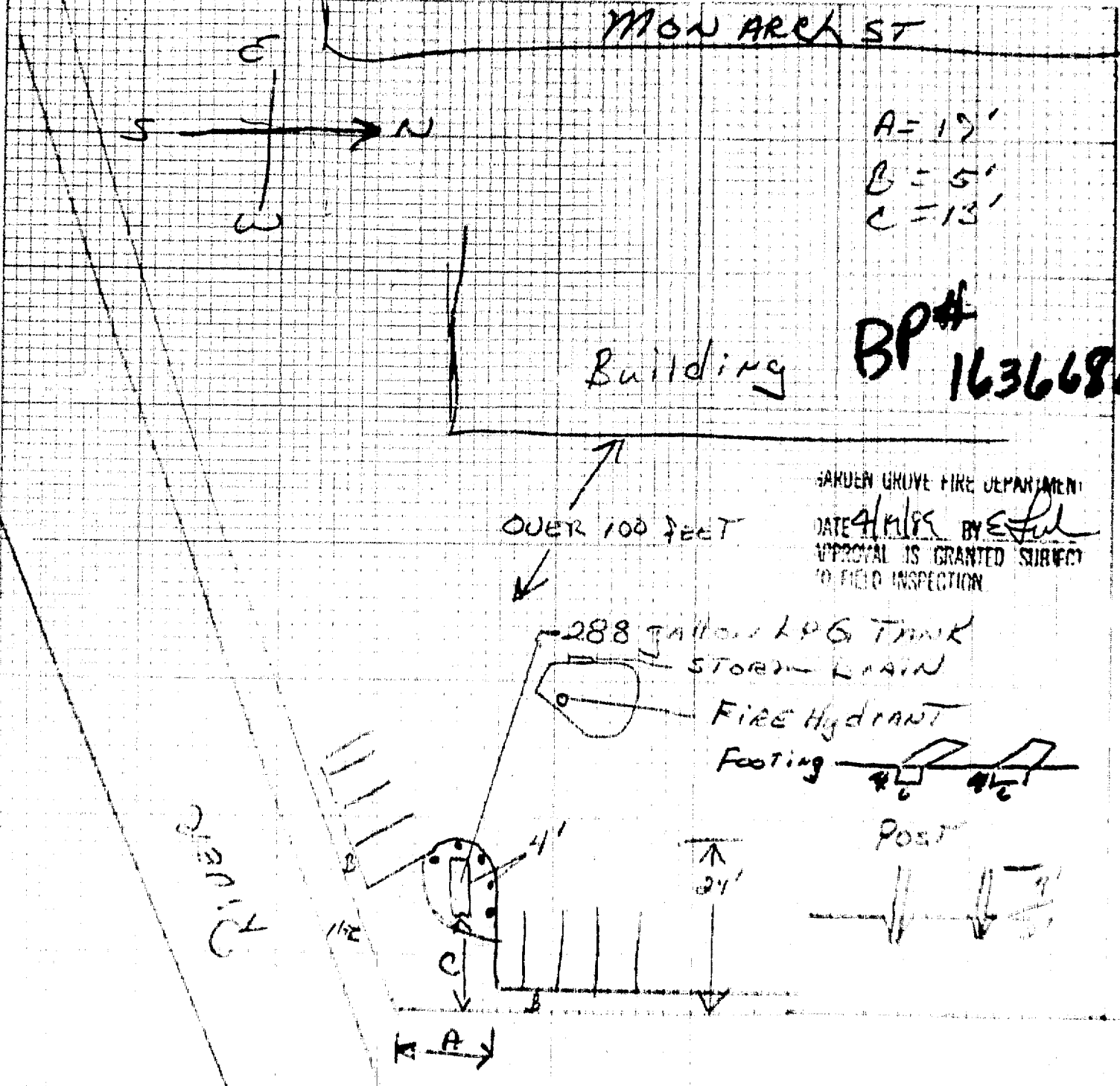
PRESENT BLDG ADDRESS _____

MOVING CONTRACTOR _____

ADDRESS _____

PROJECT	LEFT	RIGHT	REAR	ZONE	LOT #	12822 MONARCH ST 163668A	
Sub. Proj.					LOT COVERAGE	215036	10
PLANNING ACTION	PLEASE CHECK ONE OR MORE						
LAND USE APPROVED BY	<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						
REMARKS:	DATE	DESCRIPTION					PERMIT VALUE
	4/18/89	INSTALL L.P.S. TANK					25000

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



GARDEN GROVE FIRE DEPARTMENT
DATE 4/18/89 BY E. Ful
APPROVAL IS GRANTED SUBJECT
TO FIELD INSPECTION

*1 Building Insp / *2 Assessor / *3 Permitter / *4 File
I certify the information herein is complete and correct

By **Charisow Company** **FRANZ, H.R.** 4/18/89

ELECTRICAL PERMIT

DEPARTMENT OF DEVELOPMENT SERVICES

GARDEN GROVE, CALIFORNIA

PHONE: 537-4200

INSTRUCTION: 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: **12822 MONARCH**

ELECTRIC PERMIT NO.: **052020 A**

OWNER: **ACME WIRE CO.**

OWNER'S ADDRESS: **SAME**

CITY: _____

LOT NO.	TRACT NO.		
IF NOT LISTED BELOW SEE CODE	NUMBER	EACH	FEE
Residential (I & H) sq. ft.		.91	
Garage, Resid. (J) sq. ft.		.005	
Service, Single Phase		\$1.00	
Service, Three Phase		1.00	
Meters, Single Phase		1.00	
Meters, Three Phase		1.00	
Pole, Power, Light, etc.		2.00	
Sub-Panels 1 φ		1.00	
Sub-Panels 3 φ		1.00	
Outlets 1st 20	5	20	1.00
Outlets Over 20		.10	
Fixtures 1st 20	20	.20	4.00
Fixtures Over 20	63	.10	6.30
Fixtures, MERC., QUARTZ, ETC.	1	1.00	1.00
Heater		1.00	
Washer		1.00	
Dryer		1.00	
Hot Water Heaters		1.00	
Dishwasher		1.00	
Domestic Range or Oven		1.00	
Motors Not Over 1 HP		1.00	
Motors Over 1 Not Over 3 HP		1.50	

NEW BUILDING OR ADDITION - AREA: _____ SQ. FT.

EXISTING BUILDING REMODEL AREA: _____ SQ. FT.

OCCUPANCY GROUP: _____

USE OF BUILDING AND OR NUMBER OF UNITS: _____

ELECTRICAL CONTRACTOR: **SE BRIGGS & SON INC**

PHONE: **6467696**

ADDRESS: **778 WEST 20th COSTA MESA**

CITY: _____ STATE LICENSE NO: **192199**

VALIDATION: **APR 19-72 11 107 H***14.30**

I HAVE CAREFULLY READ THE ABOVE APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF STATE AND LOCAL LAWS COVERING THIS TYPE OF CONSTRUCTION WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. NO PERSON SHALL BE EMPLOYED IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA.

SIGNATURE OF PERMITTEE: **X Thomas J. Roy**

DATE: _____

BRANCH CIRCUIT PANEL: CIRCUITRY

CIR. NO.	BKR. SIZE	WIRE SIZE	NOMENCLATURE	NO. OF OUTLET	WATTS L1	WATTS L2	WATTS L3
1							
2							
3							
4							
5							
6							

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Underground		
Conduit	4-21-72	RSP
Wiring	4-21-72	RSP
Heater		
Fixtures	4-21-72	RSP
Service		
FINAL	4-21-72	RSP
Utility Notified		

Time Clock	1.00
Sign, 1 Tran. or 1 Ballast	2.00
Each Additional Tran. or Ballast	1.00
Sign Hookup	1.00

ISSUANCE OF PERMIT: **2.00**

TOTAL FEE: **6.30**

SINGLE PHASE SERVICE SIZE 15 AMP. 20 AMP. 30 AMP. 40 AMP. 60 AMP. 100 AMP.

WIRE: _____ RIG. CONDUIT: _____

THREE PHASE SERVICE SIZE 3 WIRE 4 WIRE 5 WIRE

AMPS: _____ WIRE: _____ RIG. CONDUIT: _____

I INSPECTOR: _____

PERMIT AUTHORIZED BY: _____ DATE: _____

BUILDING PERMIT NO.: _____ SIGN PERMIT NO.: _____

VENT. HEAT. AIR COND. PERMIT NO.: _____

BUILDING PERMIT

Inspection Requests
741-5332

General Information
741-5307

PL # 880478M

INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY	TYPE	OCC LOAD		FIRE SPRINK		APPROVAL	DATE	INSPECTOR
		FRONT	LEFT	RIGHT	REAR			
USE ZONE	Ear Proj					PRE INSPECTION		
	Setbacks					FOUNDATION & LOCATION		
						CONCRETE FLOOR		
						REINFORCING		
PLANNING ACTION					PLANS	MASONRY		
					DATE	ROOF SHTG		
LAND USE APPROVED BY						ROUGH FRAME		
REMARKS						INSULATION ENERGY		
						DRYWALL		
						LATH		
						PLAS BROWN CT		
						LANDSCAPING		
G.G.SANT DIS. FEE REQ'D		OCC.SANTOS FEE REQ'D		DATE	NTAL			
				REQ'D	PROVIDED			
PARCEL MAP								
R/W DEDICATION								
FEES AND BONDS								
		REV. CODE		AMOUNT				
ST BOND								
WATER BOND								
WATER ASSMT FEE (ACRG)								
WATER ASSMT FEE (FT)								
PARKWAY TREE FEE								
PAV & REC. FEE (DIST)								
DRAP. ASSMT FEE (DIST)								
PLAN RETENTION FEE								
BUILD PLAN CHECK				91 80				
BUILD PERMIT FEE				135 84				
BALANCE				10 00				
COLLECTION								
	12,000			TOTAL FEES	237 64			
	PL				DATE	10/26/89		

ADDRESS 12822 MONARCH ST GARDEN GROVE CA	
LOT NO. BLK NO. TRACT NO.	157175A
OWNER CLAIRSON COMMERCIAL Prod Inc	TEL NO. 714 2569606
MAILING ADDRESS SAME	
<input type="checkbox"/> ARCH <input type="checkbox"/> ENGR	
MAILING ADDRESS	
TEL NO.	STATE LIC. NO. & TYPE
VALIDATION B-PLAN 91.80 B-PER 135.84 ISS 10.00 188975A10-26189 CHECK 237.64	
CONTRACTOR VECTOR THREE ENVIRO Inc	
MAILING ADDRESS 451 W. LAMBERT BREA 92621 SUITE 280	
TEL NO. 714 256 9606	STATE LIC. NO. & TYPE 558239 "A"
PRESENT BLDG. USE COMM	PROPOSED BLDG. USE COMM
DESCRIBE WORK TO BE DONE REMOVE 4 GASOLINE TANKS	
NEW <input type="checkbox"/> ADD <input type="checkbox"/> ALTER <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input checked="" type="checkbox"/>	
FLOOR AREA (SQ FT)	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 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. 110-54-38-88 Expiration Date 10.1.90

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: In 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.

[Signature] 10-25-89
PERMIT APPLICANT SIGNATURE DATE

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 558239 and Classification on A is in full force and effect.

Don Hollenback *Don Hollenback* 10-26-89
PRINTED NAME SIGNATURE CONTRACTOR DATE

BUSINESS TAX CERTIFICATE NO. _____ EXPIRES DATE _____

I certify that I am exempt from Section 7031 b of the Business and Professional Code or, section 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 _____

_____ DATE _____
EEN PROPERTY OWNER SIGNATURE PROPERTY OWNER AUTHORIZED AGENT

APPROVED

ORANGE COUNTY HEALTH CARE AGENCY
ENVIRONMENTAL HEALTH
WASTE MANAGEMENT SECTION

Approved 10/26/89 87 PC 395
Plan Reviewed By _____ Date _____ Plan # _____

This approval shall not be construed to permit the violation of any law, nor does it prevent further corrections of errors found on the plans. Plans must be resubmitted for approval if any additional changes are made by the applicant.

In addition to this approval, all applicable permits required by the local fire department, building department, and the Air Quality Management District must be obtained.

Underground sink installation, removal, and repair inspections are required and must be scheduled 48 hours in advance. Telephone (714) 834-8100.

A copy of these approved plans must be available at the site at all times.

MONARCH STREET

PARKING

2-10,000 gal Unleaded

BUILDING
20,000 gallon Unleaded Gas

Dispenser
Vent Pumps

Dispenser

Vent
ENV. HEALTH

Alley

ACACIA

DATE 10-26-89 BY *L. [Signature]*
APPROVAL IS GRANTED SUBJECT TO FIELD INSPECTION
GARDEN GROVE FIRE DEPARTMENT

BP# 1671954



VECTOR THREE ENVIRONMENTAL, INC.

PLOT PLAN VTEI#9171
CLAIRSON COMMERCIAL PROD., INC.
12822 Monarch Street
Garden Grove, Calif. 92641

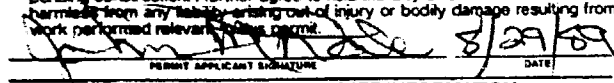
BUILDING PERMIT

Inspection Requests
741-5332

General Information
741-5307

INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.		APPROVAL	DATE	INSPECTOR
		FRONT	LEFT	RIGHT	REAR			
USE ZONE	Ex. Prk.					PRE INSPECTION		
	Substrate					FOUNDATION & LOCATION		
						CONCRETE FLOOR		
						REINFORCING		
PLANNING ACTION					PLANS	MASONRY		
LAND USE APPROVED BY	Mike L. Lee		DATE		8/29/09	ROOF SHYG	8/29/09	
REMARKS:						ROUGH FRAME		
						INSULATION, ENERGY		
						DRYWALL		
						LATH		
						F.L.S. BROWN CT.		
						LANDSCAPING		
G.G.SANT.DIS. FEE REQ'D.	O.C.SANT.DIS. FEE REQ'D.			REQ'D	PROVIDED			
PARCEL MAP						PRE GUNITE		
R/W DEDICATION						PRE DECK		
FEES AND BONDS						PRE PLASTER		
	REV. CODE	AMOUNT				PLANNING	8/29/09	111
ST. BOND						FINAL	8/29/09	
WATER BOND						WORKER'S COMPENSATION REQUIREMENTS		
WATER ASSMT. FEE (ACRG.)						State Compensation Insurance Policy No. <u>DLCC 367398-1</u> Expiration Date <u>FEB 9, 2011</u>		
WATER ASSMT. FEE (FT.)						<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.		
PARKWAY TREE FEE						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.		
PARK & REC. FEE (DST.)						<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 relevant to this permit.		
DRAIN ASSMT. FEE (DST.)						 <small>PERMIT APPLICANT SIGNATURE</small> <small>DATE</small> 8/29/09		
PLAN RETENTION FEE						BUSINESS TAX CERTIFICATE INFORMATION		
BLDG. PLAN CHECK			10	20		I certify that the following Contractor's License No. _____ and Classification _____ is in full force and effect.		
BLDG. PERMIT FEE			15	50		<small>(PRINT) CONTRACTOR</small> _____	<small>(SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT</small> _____	<small>DATE</small> _____
ISSUANCE			10	00		<small>BUSINESS TAX CERTIFICATE NO.</small> _____ <small>EXPIRATION DATE</small> _____		
VALUATION						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 <input type="checkbox"/> Minor work under \$200: Section 7048 <input type="checkbox"/> Employee working for wages only: Section 7053 <input type="checkbox"/>		
			TOTAL FEES	35	70	Other: _____		
AUTHORIZED BY	N					<small>(PRINT) PROPERTY OWNER</small> _____	<small>(SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT</small> _____	<small>DATE</small> _____
						8-29-09		

ADDRESS	12822 Monarch Street		
LOT NO. (OR NO. TRACT NO.)	PERMIT NO.	166143A	
OWNER	166143A		
MAILING ADDRESS	CITY	2P	
<input type="checkbox"/> ARCH			
<input type="checkbox"/> ENGR.			
MAILING ADDRESS	CITY	2P	
TEL NO.	STATE LIC NO. & TYPE		
VALIDATION	B-PLAN	10.20	
	B-PER	15.50	
	ISS	10.00	
CONTRACTOR	DALE CONST. INC. 35.70		
MAILING ADDRESS	1339 Gardenia Ln Lakeview 91780		
TEL NO.	STATE LIC NO. & TYPE	549368	
PRESENT BLDG. USE	PROPOSED BLDG. USE		
DESCRIBE WORK TO BE DONE	Frame & Drywall both sides of an opening which was a doorway.		
NEW <input type="checkbox"/>	ADD'N <input type="checkbox"/>	ALTER <input checked="" type="checkbox"/>	REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>
FLOOR AREA (SQ. FT.)	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 RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.			
RELOCATION			
PRESENT BLDG. ADDRESS			
MOVING CONTRACTOR			
ADDRESS			

I. INSPECTOR

HEATING, VENTILATING, REFRIGERATION & AIR COND. PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

1909-73

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EA.	\$ FEE	ADDRESS	
FURNACE			Furnace to & incl. 100M B.T.U.	1		5 00	12822 Monarch St. LOT NO. BLK NO. TRACT NO. 107107A	
FURNACE VENTS			More than 100M & incl. 500M B.T.U.				ACME Wire Products Corp. OWNER	
GAS PIPING			More than 500M & incl. 1MM B.T.U.				PHONE 894-4726	
DUCTS			Installation or Relocation of Susp. Heater				ACME Wire Products Corp. OWNER'S ADDRESS	
SINGLE DUCT FAN VENT			Installation or Relocation of Wall Heater				CITY	
KITCHEN HOOD			Installation or Relocation of Unit Heater				12822 Monarch St.	
AIR HANDLING UNIT			Installation of Appliance Vent Only				NEW BUILDING OR ADDITION - AREA	
EVAPORATIVE COOLER			Repair, Alteration or Addition to any Heating or Cooling System				EXISTING BUILDING REMODEL AREA	
BOILER OR COMPRESSOR			Incidental Gas Piping				OCCUPANCY GROUP	
DECORATIVE APPLIANCE			Each Range Hood incl. Duct and Fan				USE OF BUILDING AND OR NUMBER OF UNITS	
			Each Vent Fan Connected to a Single Duct				244 2nd 600	
			Each Ventilating System not a Part of a Heating or Air Conditioning System Authorized by Permit				1324 70	
			Boiler or Compressor to & incl. 5 Hp.	1		5 00	680	
			Absorption System to & incl. 100M B.T.U.				10 00	
			Boiler or Compressor to & incl. 5 Hp.					
			Absorption System to & incl. 500M B.T.U.					
			Boiler or Compressor to & incl. 30 Hp.					
			Absorption System to & incl. 1MM B.T.U.					
			Boiler or Compressor to & incl. 50 Hp.					
			Absorption System to & incl. 2MM B.T.U.					
			Boiler or Compressor over 50 Hp.					
			Each Evaporative Cooler					
			Air Handling Unit to & incl. 2M C.F.M.					
			Air Handling Unit to & incl. 10M C.F.M.					
			Air Handling Unit over 10M C.F.M.					
			OTHER:					
			<i>Mount over the lam beam - called Dial a Temp do not call them of this - talk to Jan Wagner</i>					
			ITEM	CODE		FEES		
			Plan Retention Fee	529		5 00	70	
			Plan Check	523		6 00	80	
			Permit	229		10 00		
			Issuance	535		6 00		
			TOTAL FEES			23 50		
			AUTHORIZED BY			DATE		
			<i>cmf</i>			2/21/79		

IDENTIFICATION CODE

BUILDING PERMIT NO. _____ ELECTRIC PERMIT NO. _____

UTILITY CO. NOTIFIED _____

ADDRESS

12822 Monarch St.
LOT NO. BLK NO. TRACT NO. **107107A**

ACME Wire Products Corp.
OWNER

PHONE
894-4726

ACME Wire Products Corp.
OWNER'S ADDRESS

CITY

12822 Monarch St.

NEW BUILDING OR ADDITION - AREA

EXISTING BUILDING REMODEL AREA

OCCUPANCY GROUP

USE OF BUILDING AND OR NUMBER OF UNITS

244 2nd 600

1324 70

680

10 00

2/21/79

Dial-A-Temp, Inc.
HEATING CONTRACTOR

231640 - C-20
STATE LIC. NO. & TYPE

1126 Fountain Way
ADDRESS

Anaheim 630-6660
CITY PHONE

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. # PC936423 EXP. DATE 8/79

DIAL-A-TEMP INC. BY [Signature] DATE 2-15-79
CONTRACTOR AUTHORIZED AGENT

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 as 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 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.

ELECTRICAL PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill In

IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE
Residential (R-1 & R-3) sq. ft.			
Garage, Resid. (M) sq. ft.			
Service Meter, Single Phase			
Service Meter, Three Phase	1		15 00
Add'l. Meter, Three Phase			
Temporary Power Pole			
Pole, Power, Light, etc.			
Sub-Panels 1 φ			
Sub-Panels 3 φ	9		45 00
Outlets			
Fixtures			
Fixtures, Merc. Quartz, etc.			
Heater - Not Over 1800W			
Washer			
Dryer			
Hot Water Heaters			
Dishwasher			
Domestic Range & Oven			
Disposal			
Power Apparatus - H.P., K.W. or K.V.A. Motors, Transformers, etc.			
Not Over 1 each			
Over 1, Not Over 18 each	57		17 00
Over 18, Not Over 30 each	3		15 00
Indv. Circuits			
Time Clock			
Sign			
Sign Hookup			
Over 20 sq ft	31		30 00
Other			
Service			
FINAL			
Utility Notified			
<p>IDENTIFICATION CODE</p>			
BUILDING PERMIT NO.	ISSUE PERMIT NO.	VENT. HEAT. AIR COND. PERMIT NO.	
<p>IF WORK IS NOT STARTED WITHIN 120 DAYS FROM DATE OF ISSUE OR IF INTERRUPTED FOR MORE THAN 120 DAYS, THIS PERMIT WILL BE NULL AND VOID.</p>			

ADDRESS			
12822 MONARCH			
LOT NO.	BLK NO.	TRACT NO.	REGISTERED PLANNING NO.
			12822A
OWNER'S ADDRESS			
SAME WIRE			
CITY			
COSTA MESA			
NEW BUILDING OR ADDITION - AREA	EXISTING BUILDING REMODEL AREA	OCCUPANCY GROUP	USE OF BUILDING AND OR NUMBER OF UNITS
		ind.	
VALIDATION			
6/11/79 001 M 278.08 002 M 556.00 003 M 60			
ELECTRICAL CONTRACTOR		STATE LIC. NO. & TYPE	
CER ELECTRIC			
ADDRESS			
1575 MACARTHUR			
CITY			
COSTA MESA			
PHONE			
WORKER'S COMPENSATION REQUIREMENTS			
<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 certification, 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 related to this permit.</p>			
<p>Signature: <u>[Signature]</u> DATE: 6-6-79</p>			
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	
202251	[Signature]		
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 <input type="checkbox"/> Minor work under \$180: Section 7048 <input type="checkbox"/> Employee working for wages only: Section 7053 <input type="checkbox"/>			
Other: _____			
(PRINT) PROPERTY OWNER	(SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT	DATE	
	[Signature]		
A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.			

Handwritten note: Contractor did not see for final
3-24-80

Handwritten note: 6-9-79 Expired
6-19-79

Handwritten signature: [Signature] DATE: 6-11-79

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 12822 Monarch PERMIT NO 116349A, 116350A

USE OF BLDG. Ind/Warehouse GROUP B-2 TYPE III-n

BLDG. APPROVED BY Ted Robinson DATE 3/12/81 USE ZONE H-P

ZONING REMARKS _____

BLDG. OWNER Acme Wire ADDRESS 12822 Monarch, Garden Grove

Raymond T. Holland BY William K. Miller DATE 3/13/81

BLDG. OFFICIAL

POST IN A CONSPICUOUS PLACE

BUILDING PERMIT

INSPECTION RECORD

For Applicant to Fill in

TYPE	OCC. LOAD		FIRE SPRINK	
	FRONT	LEFT	RIGHT	REAR
SE ZONE				
FIRE ZONE	Eav Proj.			
	Setbacks	SEE PLOT PLAN		
PLANNING ACTION			PLANS	DATE
LAND USE APPROVED BY				
REMARKS:	GRADING			

G/S SANT. DIS. FEE REG'D.	O.C. SANT. DIS. FEE REG'D.	DATE	INITIAL
PARCEL MAP	REQ'D	PROVIDED	
R/W DEDICATION			

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.)		
LRM ASSMT. FEE (DIST.)		
PLAN. RETENT. ON FEE		
BLDG. PLAN CHECK	521	30.00
BLDG. PERMIT FEE	231	159.00
ISSUANCE	535	6.00
VALUATION		
	TOTAL FEES	195.00
AUTHORIZED BY		DATE
<i>[Signature]</i>		7-28-80

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	3/16/81	
FINAL		
UTILITY RELEASE		

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 268-80 UNIT 60 Expiration Date 7-1-81

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] 7/28/80
PERMIT/APPLICANT SIGNATURE DATE

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 209273 and Classification B-1 is in full force and effect.

[Signature] 7/28/80
(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE

212602 BUSINESS TAX CERTIFICATE NO. 7/81 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 <u>12322 MONARCH</u>			
LOT NO.	BLK NO.	TRACY NO.	PERMIT NO.
<u>131-575-12</u>			<u>1163488</u>
OWNER	TEL. NO.		
<u>ACME WIRE</u>	<u>894</u>		
MAILING ADDRESS	CITY	ZIP	
<input type="checkbox"/> ARCH			
<input type="checkbox"/> ENGR.			
MAILING ADDRESS	CITY	ZIP	
TEL. NO.	STATE LIC. NO. & TYPE		
VALIDATION			
CONTRACTOR			
<u>SAFFELLE MCADAM, INC</u>			
MAILING ADDRESS	CITY	ZIP	
<u>2801 BARRANCA RD</u>			
<u>IRVINE, CA 92714</u>			
TEL. NO.	STATE LIC. NO.		
<u>714/551-6711</u>	<u>209273</u>		
PRESENT BLDG. USE	PROPOSED BLDG. USE		
DESCRIBE WORK TO BE DONE			
<u>GRADING</u>			
NEW <input type="checkbox"/> ADD'N <input type="checkbox"/> ALTER. <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>			
FLOOR AREA	NO. OF STORIES	NO. OF DWELLING UNITS	
<u>150 sq. ft.</u>	<u>1/2</u>	<u>1</u>	
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			

ELECTRICAL PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

(Check)

SINGLE PHASE SERVICE SIZE			IF NOT LISTED BELOW SEE CODE			NO.	EA.	FEE
AMPS	VOLTS	RIG. CONDUIT						
THREE PHASE SERVICE SIZE			Residential (R-1 & R-3) sq. ft.					
4000 AMPS 480 VOLTS			Garage, Resid. (M) sq. ft.					
APPROVAL			Service Meter, Single Phase					
DATE			Service Meter, Three Phase			5		75
INSPECTOR			Add'l Meter, Three Phase					
Underground			Temporary Power Pole					
8-6-80			Pole, Power, L. ght, etc.					
12-3-80			Sub-Panels 1					
10-31-80			Sub-Panels 3			15		75
			Outlets			128		3
			Fixtures			778		174.50
			Fixtures, Merc. Quartz, etc.					
			Heater—Not Over 1650 W					
			Washer					
			Dryer					
			Hot Water Heaters			2		4
			Dishwasher					
			Domestic Range or Oven					
			Disposal					
			Power Apparatus—H.P., K.W. or K.V.A. Motors, Transformers etc.					
			Not Over 1 each			4		6
			Over 1, Not Over 10 each			5		15
			Over 10, Not Over 30 each					
			Indv. Circuits					
			Time Clock			2		2
			Sign					
			Sign Hookup					
2-8 10-7-80			45 KVA TRAN.			6		60
1-6-81			per approved plans					
1-28-81								

ADDRESS
12822 MONARCH

LOT NO. BLK NO. TRACT NO. ELECTRIC PERMIT NO.
118482A

OWNER
ACME/BANNER

OWNER'S ADDRESS CITY

NEW BUILDING OR ADDITION - AREA EXISTING BUILDING REMODEL AREA OCCUPANCY GROUP USE OF BUILDING AND OR NUMBER OF UNITS
MFG.

VALIDATION

ELECTRICAL CONTRACTOR STATE LIC. NO. & TYPE
C E ELECTRIC INC. 273734

ADDRESS CITY PHONE
1515 MACARTHUR COSTA MESA 556-1574

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. **P13142** Expiration Date **12-19-80**

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 harmless from any liability arising out of injury or bodily damage resulting from work performed under this permit.

(Signature) PERMIT APPLICANT SIGNATURE **7-24-80**

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.

IDENTIFICATION CODE

11635A

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.

ITEM	CODE	FEES
Plan Retention Fee		
Plan Check	2-4	315.18
Permit	237	463.00
Issuance	53	6
TOTAL FEES		784.68

AUTHORIZED BY *(Signature)* DATE **7-24-80**

PLUMBING PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EACH	\$ FEE
Soil Piping	8-21-80	EM	Water Closet (toilet)	20		60 -
			Bath Tub			
			Shower			
Ground Plumbing			Lavatory (Wash Basin)	25		75 -
Rough Plumbing	12-11-80	EM	Kitchen Sink			
			Garbage Disposal			
Gas Piping			Laundry Tub or Tray	2		6 -
			Water Heater			
Gas Vent			Floor Sink	2		6 -
			Floor Drain	4		12 -
Sewer	10-7-80	FR 9/10 (EM)	Dish Washer			
			Drinking Fountain			
Main Drain and Vacuum Lines			Urinal	6		18 -
			Gas System - Outlets	3		3 -
Water Heater			Building Sewer (First 100 ft.)	1		6 -
			Building Sewer (Add'l 100 ft.)			
Backwash			Building Sewer (ea. add'l drain)			
			Rainwater Drain	26		78 -
Water Lateral			Swimming Pool Piping			
			Sand Traps/Receptors			
			Automatic Washing Machine			
			Water Softeners			
			Backwash - Trap			
			Water Lateral	1		3 -
			Backflow Protective Devices			
			Water Piping (ea. 100 ft.)			
			Lawn Sprinklers (S.F.D. Only)			
			Lawn Sprinklers (other)			
			WATER HEATER	2		6 -

FINAL	2-26-81	EM
UTILITY CO. NOTIFIED	3-13-81	JR

IDENTIFICATION CODE

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BUILDING PERMIT NO.	ELECTRICAL PERMIT NO.
116349A	

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.

ITEM	CODE	FEES
Plan Retention Fee		
Plan Check		
Permit	228	273.00
Issuance	333	6 -
TOTAL FEES		279.00

LAND USE	AUTHORIZED BY BUILDING	DATE
	JR	8/6/80

ADDRESS
12822 MONARCH

LOT NO. BLK NO. TRACT NO.
178495

OWNER
ACME BANNER

OWNER'S ADDRESS
CITY

NEW BUILDING OR ADDITION - AREA
EXISTING BUILDING REMODEL AREA
OCCUPANCY GROUP
USE OF BUILDING OR NUMBER OF U
SQ. FT. SQ. FT. **62**

VALIDATION

PLUMBING CONTRACTOR
PROPLUS SYSTEMS INC

STATE LIC. NO. & TYPE
365819 C

ADDRESS
17925 SKYPARK CIRCLE E

CITY
IRVINE, CAL

PHONE
92714 979-90

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. **940363** Expiration Date

I certify that in the performance of the work for which this permit issued, I shall not employ any person in any manner so as to be 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 under this permit.

8/5/80

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor, License No. **365819** and Classification **C-36** is in full effect.

PROPLUS SYSTEMS (PRINT) CONTRACTOR

(SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT **JR** DATE **8/5/80**

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: _____

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

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

INSPECTION RECORD

For Applicant to Fill in

P.C. # **2831**

OCCUPANCY B2 TYPE IND	OCC. LOAD	FIRE SPRINK. <input checked="" type="checkbox"/>
USE ZONE M-P PUB	FRONT	LEFT
FIRE ZONE -	RIGHT	REAR
PLANNING ACTION	YES PLANS DATE	
LAND USE APPROVED BY		
REMARKS		

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		

ADDRESS
12822 MONARCH

LOT NO. BLK NO. TRACT NO. **11177104**

OWNER **ACME BANNER** TEL. NO. **894-4726**

MAILING ADDRESS **12822 MONARCH** CITY ZIP

TEL. NO. STATE LIC. NO. & TYPE

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

FINAL **2-9-81 BIRCH**

UTILITY RELEASE

VALIDATION

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.)	

IDENTIFICATION CODE

CONTRACTOR **FYR AND PROTECTION**

MAILING ADDRESS **640 ECKHOFF** CITY ZIP **ORANGE, CALIF 92668**

TEL. NO. **36 2599** STATE LIC. NO.

PLAN RETENTION FEE	3517	24	30
BLDG. PLAN CHECK	3527	233	16
BLDG. PERMIT FEE	3226	350	38
ISSUANCE	3517	6	00
VALUATION	\$ 119,000		
TOTAL FEES	613	84	

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. **1-10-370-01546** Expiration Date **07/10/81**

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.

PERMIT APPLICANT SIGNATURE **[Signature]** DATE **10/29/80**

PRESENT BLDG. USE **INDUSTRIA** PROPOSED BLDG. USE

DESCRIBE WORK TO BE DONE **AUT. FIRE SPRINKLERS**

NEW ADD'N ALTER REPAIR DEMOLISH

AUTHORIZED BY **[Signature]** DATE **10-27-80**

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:

FLOOR AREA (SQ. FT.) **170,000** NO. OF STORIES **1** NO. OF DWELLING UNITS

If work is not started within 120 days from date of issue or is 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.

INSPECTOR **[Signature]**

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

RELOCATION

PRESENT BLDG. ADDRESS

MOVING CONTRACTOR

ADDRESS

PLUMBING PERMIT

Job # 615

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			
Septic			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 Lateral			Swimming Pool Piping			
			Sand Traps/Receptors			
			Automatic Washing Machine			
			Water Softeners			
			Backwash - Trap			
			Water Lateral			
			Backflow Protective Devices			
			Water Piping (ea. 100 ft.)			
			Lawn Sprinklers (S.F.D. Only)			
			Lawn Sprinklers (other)			16 00

1-SMR

FINAL *3-3-81* *MY*

UTILITY CO. NOTIFIED

IDENTIFICATION CODE

ITEM	CODE	FEES
Plan Retention Fee		
Plan Check		
Permit	<i>3228</i>	<i>10 00</i>
Issuance	<i>3517</i>	<i>6 00</i>
TOTAL FEES		16 00

ADDRESS
12822 Monarch St
LOT NO. BLK NO. TRACT NO. *1181200*

OWNER *ACME KANETC* PHONE

OWNER'S ADDRESS CITY

NEW BUILDING OR ADDITION - AREA SQ. FT. EXISTING BUILDING PERMITS AREA *022000* OCCUPANCY GROUP *COM* USE OF BUILDING OR ON NUMBER OF UNITS *ACME*

VALIDATION *ISSUE* CHECK *3.30*

Landscaping
ILLUSTRATED CONTRACTOR STATE LIC. NO. & TYPE *272560 C2*

Buccala Landscaping
ADDRESS CITY PHONE *2885 E. La Cuesta 630-13*

Amador
WORKER'S COMPENSATION REQUIREMENTS
State Compensation Insurance Policy No. *1-40-3950-012564* Expiration Date *7/81*
 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] *2-27-81*
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

BUILDING PERMIT NO. ELECTRICAL PERMIT NO.

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.

INSPECTOR

AUTHORIZED BY *LJR* BUILDING DATE *2-27-81*

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

PLUMBING PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EACH	\$ FEE	ADDRESS
So. Plumb			Water Closet (toilet)	16		48 -	12822 MONARCH
			Bath Tub				LOT NO. BLK NO. TRACT NO. 117021A
Ground Plumbing			Shower				OWNER ACME-BANNER
			Lavatory (Wash Basin)	16		48 -	OWNER'S ADDRESS CITY
Rough Plumbing			Kitchen Sink				NEW BUILDING OR ADDITION AREA EXISTING BUILDING REMODEL AREA OCCUPANCY GROUP USE OF BUILDING AND OR NUMBER OF UNITS
			Garbage Disposal				SO. FT. SQ. FT. B2 0021B
Pl. Plumb			Laundry Tub or Tray				VALIDATION
			Water Heater				PLUMBING CONTRACTOR STATE LIC. NO. & TYPE
So. Plumb			Floor Sink				PROPLUS SYSTEMS INC. C-36
			Floor Drain				365819
So. Plumb			Dish Washer				ADDRESS CITY PHONE
			Drinking Fountain				17925 SKYPARK CIRCLE "C" IRVINE CALIF. 92714 979-9077
Main Drain and Vacuum Lines			Urinal				WORKER'S COMPENSATION REQUIREMENTS
			Gas System - Outlets				State Compensation Insurance Policy No. 940363 Expiration Date
Water Heater			Building Sewer (First 100 ft.)				<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.
			Building Sewer (Add'l 100 ft.)				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.
Backwash			Building Sewer (ea. add'l drain)				<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 relevant to this permit.
			Rainwater Drain				PERMIT APPLICANT SIGNATURE DATE 11-18-80
Water Laterals			Swimming Pool Piping				BUSINESS TAX CERTIFICATE INFORMATION
			Sand Traps/Receptors				I certify that the following Contractor's License No. 366819 and Classification C-36 is in full force and effect.
			Automatic Washing Machine				PROPLUS SYSTEMS INC. 11-18-80
			Water Softeners				(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE
			Backwash Trap				215847 7-31-81
			Water Laterals				BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE
			Backflow Protective Devices				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:
			Water Piping (ea. 100 ft.)				Owner Section 7044 <input type="checkbox"/> Minor work under \$100; Section 7048 <input type="checkbox"/>
			Lawn Sprinklers (S.F.D. Only)				Employee working for wages only Section 7053 <input type="checkbox"/>
			Lawn Sprinklers (other)				Other:
							(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.

See Permit # 116495A

FINAL 226-81 24

ITEM	CODE	FEES
Plan Return in File		
Plan Check		
Permit	3228	96.00
Issuance	SUPPLEMENT TO 116495A	
TOTAL FEES		96 -

46350A

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.

HEATING, VENTILATING, REFRIGERATION & AIR COND. PERMIT

Inspection Requests
638-6771

General Information
638-6661

INSPECTION RECORD 0264-0-59

FEE\$

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO. EA.	\$ FEE
FURNACE			Furnace to & incl. 100M B.T.U.	4 #5	20.00
FURNACE VENTS			More than 100M & incl. 500M B.T.U.		
			More than 500M & incl. 1MM B.T.U.		
GAS PIPING			Installation or Relocation of Susp. Heater		
			Installation or Relocation of Wall Heater		
			Installation or Relocation of Unit Heater		
DUCTS	1-20-81	MS	Installation of Appliance Vent Only		
SINGLE DUCT FAN VENT			Repair, Alteration or Addition to any Heating or Cooling System		
			Incidental Gas Piping		
KITCHEN HOOD			Each Range Hood Incl. Duct and Fan		
			Each Vent Fan Connected to a Single Duct	20 #3	60.00
AIR HANDLING UNIT			Each Ventilating System not a Part of a Heating or Air Conditioning System Authorized by Permit		
EVAPORATIVE COOLER			Boiler or Compressor to & incl. 5 Hp.		
BOILER OR COMPRESSOR			Absorption System to & incl. 100M B.T.U.		
			Boiler or Compressor to & incl. 15 Hp.	4 #5	20.00
			Absorption System to & incl. 500M B.T.U.		
DECORATIVE APPLIANCE			Boiler or Compressor to & incl. 30 Hp.		
			Absorption System to & incl. 1MM B.T.U.		
			Boiler or Compressor to & incl. 50 Hp.		
			Absorption System to & incl. 2MM B.T.U.		
			Boiler or Compressor over 50 Hp.		
			Each Evaporative Cooler		
			Air Handling Unit to & incl. 2M C.F.M.		
			Air Handling Unit to & incl. 10M C.F.M.		
			Air Handling Unit over 10M C.F.M.		
			OTHER:		

ADDRESS
12822 Monarch St. 117893A
LOT NO. BLK NO. TRACT NO. PERMIT NO.

OWNER
Acme Wire Banner Products
OWNER'S ADDRESS CITY

12822 Monarch St. Garden Grove
NEW BUILDING OR EXISTING BUILDING OCCUPANCY USE OF BUILDING AND
ADDITION - AREA REMODEL AREA GROUP OR NUMBER OF UNITS
SQ. FT. SQ. FT.

VALIDATION

HEATING CONTRACTOR STATE LIC. NO. & TYPE
Dial-A-Temp, Inc. 231640 C-20
ADDRESS CITY PHONE

1126 Fountain Way Anaheim 630-6660

WORKER'S COMPENSATION REQUIREMENTS
State Compensation Insurance Policy No. 04666 Expiration Date 8-1-81
 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. 231640 and Classification C-20 is in full force and effect.

(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE
SREA 24639549 10/15/80

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.

FINAL 2-26-81 MS
UTILITY CO NOTIFIED

IDENTIFICATION CODE

BUILDING PERMIT NO. 116350A
ELECTRIC PERMIT NO.

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.

ITEM	CODE	FEE\$
Plan Retention Fee		10.70
Plan Check		68.00
Permit Issuance		100.00
		600
TOTAL FEES		1847.00

LAND USE AUTHORIZED BY BUILDING DATE
11-17-80

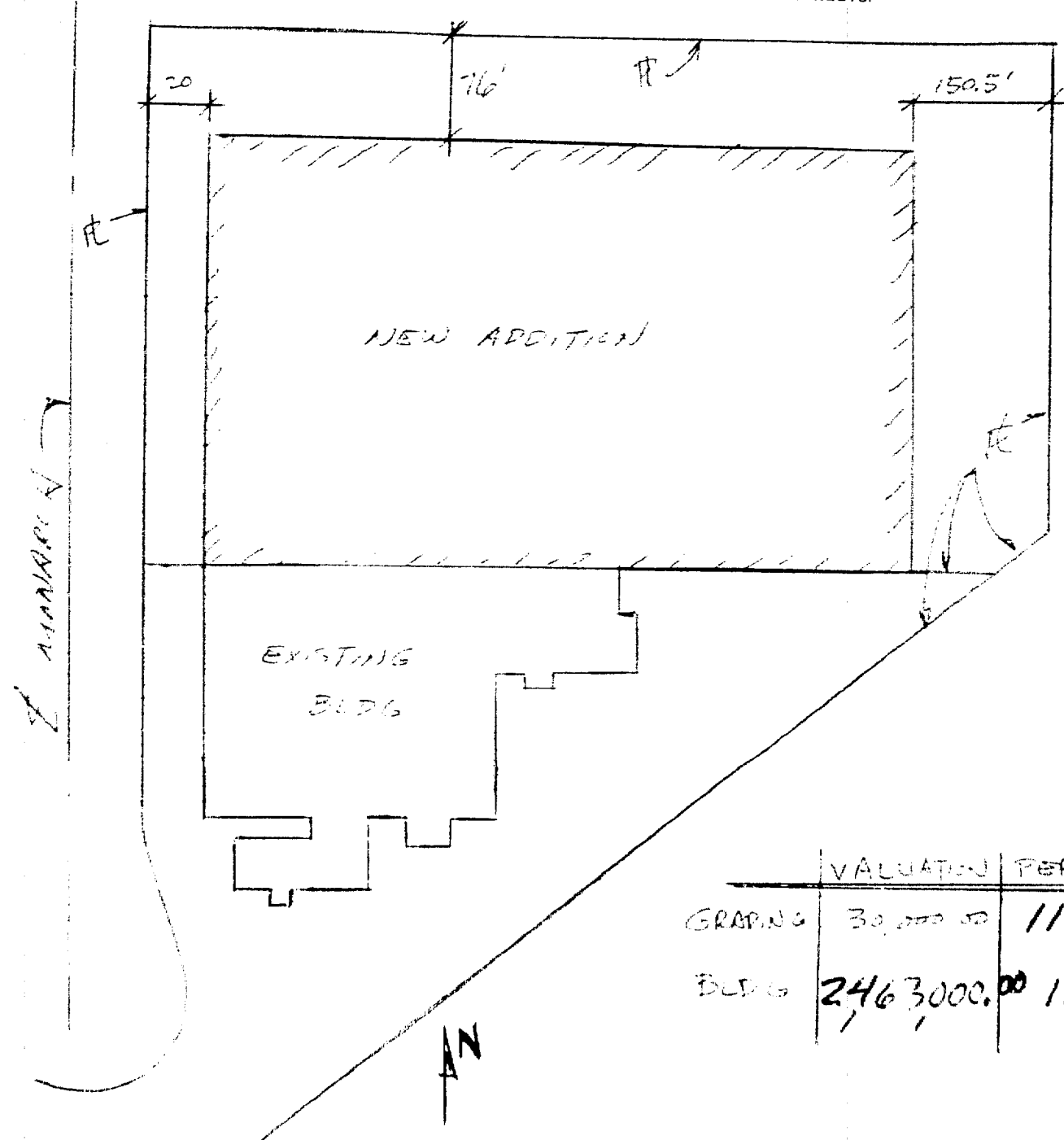
CITY OF GARDEN GROVE

PLOT PLAN

PUBLIC WORKS & DEVELOPMENT

OWNER <i>ACME WIRE</i>		JOB ADDRESS <i>12822 MONARCH</i>		PERMIT NO. <i>502 BEX</i>
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSORS PARCEL NO. <i>131-575-12</i>	LOT	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"/> Demolis		
ADDRESS	CITY	DATE <i>7-28-80</i>	JOB DESCRIPTION <i>ADDITION TO EXIST TILT-UP BLDG</i>	PERMIT VALUE <i>SEE PG. 2</i>

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



	VALUATION	PERMIT NO.
GRADING	30,000.00	116349A
BLDG	246,300.00	116350A

#1 Building Insp #2 Assessor #3 Permittee #4 City Engineer
I certify the information herein is complete and correct

PLOT PLAN APPROVED BY _____

BUILDING PERMIT

INSPECTION RECORD

For Applicant to Fill in

PERMIT NO. 217

OCCUPANCY B-2 TYPE II OCC. M-LOAD FIRE SPRINK. YES

USE ZONE M-P FRONT LEFT RIGHT REAR

Eav. Proj. -

Setbacks: 20 76 0 150

PLANNING ACTION

LAND USE APPROVED BY [Signature]

REMARKS: SEE REC 15612

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
CONCRETE FLOOR	<u>8/24/80</u>	
REINFORCING <u>PLAS</u>	<u>10/17/80</u>	
ROOF-SHTG	<u>10/17/80</u>	
ROUGH FRAME	<u>10/17/80</u>	
INSULATION, ENERGY		
LATH OR DRYWALL	<u>N</u>	
PLAS BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING	<u>3/12/81</u>	<u>N</u>
LANDSCAPING		

ADDRESS 12822 MCNARCH

LOT NO. BLK NO. TRACT NO. PERMIT NO. 118350A

OWNER ACME WIRE TEL. NO. 8944724

MAILING ADDRESS 12822 MCNARCH CITY IRVINE ZIP 92714

ARCH- REN YEE, FAIA

MAILING ADDRESS ELCASHINE, CORONA L MAR CITY IRVINE ZIP 92714

TEL. NO. 644-8111 STATE LIC. NO. & TYPE C-3567

G.G. SANT. DIS. FEE REQ'D.

C.C. SANT. DIS. FEE REQ'D.

DATE 7/28/80 INITIALS VP

REQ'D / PROVIDED

PARCEL MAP

R/W DEDICATION

LAND USE FINAL

FINAL 3/12/81

UTILITY RELEASE

CONTRACTOR SAFFELLE & MADAM, INC.

MAILING ADDRESS 2801 BARRANCA CITY IRVINE ZIP CA 92714

TEL. NO. 44551-6711 STATE LIC. NO. 209273

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)	

IDENTIFICATION CODE

PRESENT BLDG. USE IND. PROPOSED BLDG. USE IND/WAREHOUSE

DESCRIBE WORK TO BE DONE 173,428 SQ FT NEW ADDITION - (TILT-UP)

NEW ADD'N ALTER. REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) 173,428 NO. OF STORIES 1 NO. OF DWELLING UNITS -

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.

PLAN RETENTION FEE	AMOUNT
BLDG. PLAN CHECK	<u>529 41 25</u>
BLDG. PERMIT FEE	<u>520 2132 33</u>
ISSUANCE	<u>326 3302 41</u>
VALUATION	<u>535 6.00</u>

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 268-40 UNITED Expiration Date 7-1-81

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.

Judy A. Anderson 7/28/80

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 209273 and Classification C-3 is in full force and effect.

SAFFELLE & MADAM Judy Anderson 7/28/80

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

212602 J/A 7/81

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: _____

VALUATION	TOTAL FEES
<u>\$ 246,300.00</u>	<u>5481.99</u>

RELOCATION

PRESENT BLDG. ADDRESS

MOVING CONTRACTOR

ADDRESS

AUTHORIZED BY [Signature] DATE 7-28-80

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

RELOCATION

PRESENT BLDG. ADDRESS

MOVING CONTRACTOR

ADDRESS

PLUMBING PERMIT

CITY OF
GARDEN GROVE

537-4200

PERMIT FEES

No.	TYPE OF FIXTURE OR ITEM	EACH	\$	PER
	Water Closet (Toilet)	\$1.50		
	Bath Tub	1.50		
	Shower	1.50		
	Lavatory (Wash Basin)	1.50		
	Kitchen Sink	1.50		
	Garbage Disposal	1.50		
	Laundry Tub or Tray	1.50		
	Water Heater	1.50		
	Slop Sink	1.50		
	Floor Sink	1.50		
	Floor Drain	1.50		
	Dish Washer	1.50		
	Drinking Fountain	1.50		
	Urinal	1.50		
	Gas System -- Outlets	1.50		
	House Sewer	5.00		
	Lawn Sprinklers (Single Dwelling) Only	2.00		
	Swimming Pool Piping	1.50		
	Sand Traps	1.50		
	Automatic Washing Mach.	1.50		
	Water Softeners	1.50		
	Backwash -- Trap	1.50		
	Water Lateral	1.50		
	Backflow Protective Devices	2.00		
	<i>Fire Sprinklers</i>		134	00
	<i>504.00 unit</i>			
Issuance of Permit			2	00

TOTAL FEE

\$ 136 00

Permit Authorized By

AS

Date 9-17-69

INSPECTOR

INSTRUCTION: 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.

For Applicant to Fill In

Permit No.

Job Address *12822 Monarch St* 036743 A

Lot No. Tract No. Blk. No.

Owner *Acme Wire Product + Dura Coat Inc*

Owner's Address

5110 N. Wilshire
Contractor *Nilsen Fire Protection Inc.*

Contractor's Address *51 No 3rd Ave Arcadia*

Phone *MA 1-4760* City Lic. No.

Use of Bldg. *Manufacturing*

New Bldg. Old Bldg.

Validation SEP 17-69 TT 046 M** *135.00

I hereby acknowledge that I have read this application and plan and 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 *Nilsen* Date *9-17-69*

Address

APPROVALS	DATE	INSPECTOR
SOIL PIPING		
GROUND PLUMBING		
ROUGH PLUMBING		
GAS PIPING		
GAS VENT		
SEPTIC TANK or Cesspool		
SEWER		
GAS TEST		
MAIN DRAIN AND VACUUM LINES		
WATER HEATER		
BACKWASH		
WATER LATERAL		
FINAL		
UTILITY CO. NOTING		

12677 24

HEATING, VENTILATING, REFRIGERATION & AIR CONDITIONING PERMIT

DEPARTMENT OF BUILDING
HARRY R. PEINCE - DIRECTOR
837-4200

CITY OF
GARDEN GROVE

FOR APPLICANT TO FILL IN (USE INK)	PERMIT NO.
JOB ADDRESS 12822 Monarch St.	048778

PERMIT FEES

NUMBER	TYPE OF FIXTURE OR ITEM	EACH	FEE
	FURNACE UP TO 100,000 BTU's		\$4.00
	FURNACE OVER 100,000 BTU's		5.00
	FLOOR FURNACE, WALL OR SUSPENDED HEATER		4.00
	VENT NOT INCL. IN APPLIANCE		2.00
	REPAIR, ALTERATION OR ADDITIONS TO HEATING SYSTEM, REFRIG. ETC.		4.00
	GAS SYSTEM		1.50
1	AIR HANDLING UNIT <small>OVER 10,000 CU. FT. PER MIN.</small>		5.00
	EVAPORATIVE COOLER		3.00
	SINGLE DUCT FAN VENT		2.00
	MULTIPLE DUCT FAN VENT		3.00
	KITCHEN HOOD (RESIDENTIAL)		3.00
	KITCHEN HOOD (COMMERCIAL)		10.00
	BOILER OR COMPRESSOR <small>3 H.P. OR LESS</small>		4.00
	BOILER OR COMPRESSOR <small>4 H.P. TO & INCL. 15 H.P.</small>		7.50
	BOILER OR COMPRESSOR <small>16 H.P. TO & INCL. 30 H.P.</small>		10.00
	BOILER OR COMPRESSOR <small>31 H.P. TO & INCL. 50 H.P.</small>		15.00
	BOILER OR COMPRESSOR OVER 50 H.P.		25.00
	ISSUANCE OF PERMIT		2.00

LOT NO.	TRACT NO.
OWNER ACME WIRE PRODUCTS CORP	
OWNER'S ADDRESS 12822 MONARCH ST G.G.	
CONTRACTOR Owner	
CONTRACTOR'S ADDRESS	
CITY	
PHONE	
CITY LIC. NO.	
USE OF BUILDING Industrial	
NEW BUILDING <input type="checkbox"/>	OLD BUILDING <input checked="" type="checkbox"/>
VALIDATION DEC-4-70 TT 016 12-4-70	

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 licensed 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 **G.L. Korman** DATE **12-4-70**

ADDRESS	DATE	INSPECTOR
FURNACE		
FURNACE VENTS		
GAS PIPING		
DUCTS		
SINGLE DUCT FAN VENT		
KITCHEN HOOD		
AIR HANDLING UNIT		
EVAPORATIVE COOLER		
BOILER OR COMPRESSOR		

TOTAL FEE \$ **740**

PERMIT AUTHORIZED BY **[Signature]** DATE **12-4-70**

ROUTING: BUILDING PERMIT NO. **12822-12-4-70**

#1 INSPECTOR
#2 STATIONER
#3 PERMITTEE

HEATING, VENTILATING, REFRIGERATION & AIR CONDITIONING PERMIT

DEPARTMENT OF
DEVELOPMENT SERVICES
638-6771

CITY OF
GARDEN GROVE

FOR APPLICANT TO FILL IN (USE INK) PERMIT NO.

JOB ADDRESS 12822 MONARCH ST 058966 A

PERMIT FEES

NUMBER	TYPE OF FIXTURE OR ITEM	EACH	FEE
	FURNACE UP TO 100,000 BTU'S	\$4.00	
1	FURNACE OVER 100,000 BTU'S	5.00	500
	FLOOR FURNACE, WALL OR SUSPENDED HEATER	4.00	
	VENT NOT INCL. IN APPLIANCE	2.00	
	REPAIR, ALTERATION OR ADDITIONS TO HEATING SYSTEM, REFRIG., ETC.	4.00	
	GAS SYSTEM	1.50	
	AIR HANDLING UNIT OVER 10,000 CU. FT. PER MIN.	5.00	
	EVAPORATIVE COOLER	3.00	
3	SINGLE DUCT FAN VENT	2.00	6 00
	MULTIPLE DUCT FAN VENT	3.00	
	KITCHEN HOOD (RESIDENTIAL)	3.00	
	KITCHEN HOOD (COMMERCIAL)	10.00	
	BOILER OR COMPRESSOR 3 H.P. OR LESS	4.00	
	BOILER OR COMPRESSOR 4 H.P. TO & INCL. 15 H.P.	7.50	
	BOILER OR COMPRESSOR 16 H.P. TO & INCL. 30 H.P.	10.00	
	BOILER OR COMPRESSOR 31 H.P. TO & INCL. 50 H.P.	15.00	
	BOILER OR COMPRESSOR OVER 50 H.P.	25.00	

LOT NO. TRACT NO.

OWNER **DURA-COAT INC.**

OWNER'S ADDRESS **12822 MONARCH ST.**

CONTRACTOR **BEATTIE METAL PRODUCTS, INC.**

CONTRACTOR'S ADDRESS **153 S. 7TH AVE** CITY **INDUSTRY**

PHONE **333-8111** CITY LIC. NO.

USE OF BUILDING **INSTALLATION OVEN EXHAUSTS**

NEW BUILDING OLD BUILDING

VALIDATION JAN 23-73 11 212 M***13.00

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 PERMITEE DATE

ADDRESS

APPROVALS	DATE	INSPECTOR
FURNACE		
FURNACE VENTS		
GAS PIPING		
DUCTS		
SINGLE DUCT FAN VENT		
KITCHEN HOOD		
AIR HANDLING UNIT		
EVAPORATIVE COOLER		
BOILER OR COMPRESSOR		

ISSUANCE OF PERMIT 2 00

TOTAL FEE \$ 13 00

PERMIT AUTHORIZED BY DATE 1-23-73

ROUTING: BUILDING PERMIT NO.

1 INSPECTOR #2 STATISTICS
2 PERMITEE #4 FILE

FINAL 8/20/73

UTILITY CO. NOTIFIED

BUILDING PERMIT

INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY ZONE	TYPE	OCC. LOAD		FIRE SPRINK.	
		FRONT	LEFT	RIGHT	REAR
FIRE ZONE	Eav Proj.				
	Setbacks				
PLANNING ACTION			PLANS DATE		
LAND USE APPROVED BY					
REMARKS:					
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.	DATE	INITIAL		
		REQ'D	PROVIDED		
PARCEL MAP					
R.W. DEDICATION					
FEEES 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			15.00		
BLDG. PERMIT FEE + permit fee	3224		135.86		
ISSUANCE	3517		6.00		
VALIDATION		TOTAL FEES	156.06		
APPROVED BY		DATE	10/13/81		

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
CONCRETE FLOOR		
REINFORCING		
ROOF SHTG		
ROUGH FRAME		
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
FARRING		
LANDSCAPING		
LAND USE FINAL		
FINAL	10/12/81	
UTILITY RELEASE		
IDENTIFICATION CODE		

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.

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		
12822 Monarch		
LOT NO.	BLK NO.	TRACT NO.
		121004
OWNER	TEL. NO.	
Acme Banner		
MAILING ADDRESS	CITY	ZIP
Same		
<input type="checkbox"/> ARCH		
<input type="checkbox"/> ENGR.		
MAILING ADDRESS	CITY	ZIP
TEL. NO.	STATE LIC. NO. & TYPE	
	10/13/81 #0049	
VALIDATION	BDGPER	135.06
	INVEST	15.00
	ISSNCE	6.00
	CHECK	156.06
CONTRACTOR		
Stone Roofing Co.		
MAILING ADDRESS	ZIP	
PO Box 370	San Gabriel 91778	
TEL. NO.	STATE LIC. NO.	
PRESENT BLDG. USE	PROPOSED BLDG. USE	
	Comm.	
DESCRIBE WORK TO BE DONE		
Roof		
NEW <input type="checkbox"/>	ADD'N <input type="checkbox"/>	ALTER. <input type="checkbox"/>
REPAIR <input type="checkbox"/>	DEMOLISH <input checked="" type="checkbox"/>	
FLOOR AREA (SQ. FT.)	NO. OF STORIES	NO. OF DWELLING UNITS
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		

ELECTRICAL PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

SINGLE PHASE SERVICE SIZE <input type="checkbox"/> UG <input type="checkbox"/> OH		
ANPS	VOLTS	RIG. CONDUIT
THREE PHASE SERVICE SIZE <input type="checkbox"/> 3 Wire <input type="checkbox"/> 4 Wire <input type="checkbox"/> UG <input type="checkbox"/> OH		
ANPS	VOLTS	RIG. CONDUIT
APPROVAL	DATE	INSPECTOR
Underground	24-82	R
Conduit		
Wiring - Rough		
Heater		
Fixtures & Trim		
MOTORS		
FINAL		
Job Noted		

IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE
Residential (R-1 & R-3) sq. ft.			
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	2		10 00
Outlets			
Fixtures			
Fixtures, Merc. Quartz, etc.			
Heater - Not Over 1550 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	8		24 00
Over 1, Not Over 10 each	1		5 00
Over 10, Not Over 30 each			
Indv. Circuits			
Time Clock			
Sign			
Sign Hookup			
15 KVA WELDERS	10		50 00
250 KVA WELDER	1		22 50
ITEM	CODE	FEES	
Plan Retention Fee			
Plan Check			
Permit	3227	111	50
Issuance	5517	6	00
TOTAL FEES		117	50
AUTHORIZED BY			
LAND USE	BUILDING	DATE	
	JJC	1-28-82	

ADDRESS			
12822 MONARCH			
LOT NO.	BLK NO.	TRACT NO.	
OWNER		PHONE	
ACME / BANNER			
OWNER'S ADDRESS CITY			
NEW BUILDING OR ADDITION - AREA	EXISTING BUILDING REMODEL AREA	OCCUPANCY GROUP	USE OF BUILDING AND OR NUMBER OF UNITS
sq. ft.	01/28684	IND	#0202
VALIDATION			
ELTPER			111.50
ISSNCE			6.00
CHECK			**117.50
ELECTRICAL CONTRACTOR		STATE LIC. NO. & TYPE	
CER ELECTRIC INC		273734	
ADDRESS		CITY	PHONE
1585 SUNLAND		COSTA	914
MEIA 558-1524			
WORKER'S COMPENSATION REQUIREMENTS			
State Compensation Insurance Policy No. P 13142 Expiration Date			
<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.			
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.			
<input checked="" 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 under this permit.			
PERMIT APPLICANT SIGNATURE			DATE
[Signature]			1-28-82
BUSINESS TAX CERTIFICATE INFORMATION			
I certify that the following Contractor's License No. 273734 and Classification is in full force and effect.			
(PRINT) CONTRACTOR			DATE
CER ELECTRIC INC			1-28-82
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 <input type="checkbox"/> Minor work under \$100. Section 7048 <input type="checkbox"/>			
Employee working for wages only: Section 7053 <input type="checkbox"/>			
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.			

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.