



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 : 7421 CHAPMAN AVE
 Suite :
 PERMIT NO. : 45263
 Permit Type :
 Type : E

Owner : BACON CHANG & COMPANY LLC
 Applicant : A & R ELECTRIC
 Appl Address : 1150 E ELM AVENUE
 FULLERTON, CA 92831
 Phone : 578 8888

Insp Dist : ZE
 Date : 11/10/98
 Parcel No : 13165138

PROPOSED WORK:

ELEC FOR TENANT IMPROVEMENT.

FEES

111 32505 PLAN CHECK (\$60.00 M	1	125.54
111 32505 PLAN CHECK FEE CREDI	1	-125.54
111 32412 SUB-PANEL	2	40.00
111 32412 outlets/fixtures 1-1	10	9.00
111 32412 outlets/fixtures eac	108	70.20
111 32412 pwr appar over 10-50	1	25.00
111 32412 pwr appa over 50-100	1	40.00
111 32401 Issuance	1	35.00
942 22130 GENERAL PLAN	1	2.00
080 32550 CULTURAL ARTS	1	1.00
TOTAL		222.20

INSPECTION RECORD

APPROVAL _____ DATE _____ INSPECTOR _____

Underground _____
 Conduit _____
 Wiring - Rough by WALLS 11-12-98
 Heater _____
 Fixtures & Trim _____
 Motors _____
 Ufer _____
 Service _____

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 James D Taylor

Print Name JAMES TAYLOR Date 11-10-98

FINAL 12-4-98
Utility Notified _____

***** VALIDATION *****
 PAID ON 10 Nov 1998 AT 13:29
 RECEIVED BY CAROLH 198.245.206.215/2 TRANS# 91
 AMOUNT PAID \$222.20 BY CHECK#2778
 TOTAL PAID = \$222.20



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 : 7421 CHAPMAN AVE
 Suite :
 PERMIT NO. : 45267
 Permit Type :
 Type : H
 Owner : BACON CHANG & COMPANY LLC
 Applicant : P P C AIR CONDITIONING INC
 Appl Address : 5950 LAKESHORE DRIVE
 CYPRESS, CA 90630
 Phone : 952-2001
 Insp Dist : ZH
 Date : 10/20/98
 Parcel No : 13165138

PROPOSED WORK:

MECH FOR TENANT IMPROVEMENT.

FEES

942 22130 GENERAL PLAN	1	2.00
080 32550 CULTURAL ARTS	1	1.00
111 32401 Issuance	1	35.00
111 32418 REPAIR, ALTR COOL/HEA	1	18.00
111 32418 AIR HANDLING TO 10,0	1	16.00
111 32503 PLAN CHECK (\$60.00 M	1	61.20
111 32503 PLAN CHECK FEE CREDI	1	-60.00
TOTAL		73.20

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 _____

FINAL 12/6/98 Arjones
 Utility Notified _____

AUTHORIZATION

Issued By: dianeb 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 Kevin Richards

Print Name KEVIN RICHARDS Date 11-10-98

***** VALIDATION *****
 PAID ON 10 Nov 1998 AT 16:05
 RECEIVED BY DOXIE 198.245.206.215/2 TRANS# 143
 AMOUNT PAID \$73.20 BY CHECK#09231
 TOTAL PAID = \$73.20



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 : 7421 CHAPMAN AVE
 Suite :
 PERMIT NO. : 39574
 Permit Type : BUILDING
 Type : B33
 REPAIRS
 Owner : DAIWA SEIKO INC
 Applicant : PLAYER'S ROOFING
 Appl Address : P.O.BOX 1244
 GARDEN GROVE, CA 92842
 Phone : 574-5696

Insp Dist : ZB
 Date : 09/17/97
 Parcel No : 13165138

Value : 253000
 Floor area : 0

PROPOSED WORK:

T/O EXIST, APPLY ROSIN SHEET, (1) 28#, (2)
 11# PLYS & 72# CAP SHEET HOT MOPPED.

FEES

111 32410 Permit	1	1701.21
111 32401 Issuance	1	30.00
942 22130 General Plan	1	296.20
080 32550 Cultural Arts	1	148.10
TOTAL		2175.51

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Pre Inspect	09/17/97	[Signature]
Foundation		
Concrete Floor		
Reinforcing		
Masonry		
Roof Shtg		
Rough Frame		
Insul / Energy		
Drywall		
Lath		
Plas. Brown Ct.		
Landscaping		
Pre Gunitite		
Pre Deck		
Pre Plaster		

Planning Final

Bldg Final 12/3/97 [Signature]

Utility Notified

***** VALIDATION *****
 PAID ON 17 Sep 1997 AT 15:37
 RECEIVED BY DOXIE 198.245.206.11/2 TRANS# 141
 PAID BY CHECK#6052 FOR \$2175.51
 TOTAL PAID = \$2175.51

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 MIKE PLAYER Date 9-17-97



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 : 7421 CHAPMAN AVE
 Suite :
 PERMIT NO. : 45262
 Permit Type : BUILDING
 Type : B7
 ALTERATIONS TO OTHER BUILDINGS
 Owner : BACON CHANG & COMPANY LLC
 Applicant : buchanan and buchanan const.
 Appl Address : 1571 parkway loop, suite a
 TUSTIN, CA 92680
 Phone : 714-2580180
 Insp Dist : ZB
 Date : 11/10/98
 Parcel No : 13165138

PROPOSED WORK:

PROVIDE NEW CEILING HT PARTITION AND NEW RAISED FLOOR

Value : 10000
Floor area : 0

FEES

111 32509 Plan Check	1	144.40
111 32410 Permit	1	222.16
111 32401 ISSUANCE	1	35.00
942 22130 General Plan	1	13.07
080 32550 Cultural Arts	1	6.44
111 32509 PLAN CHECK FEE CREDI	1	-131.27
TOTAL		289.80

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	12/4/98	Artem
Utility Notified		

AUTHORIZATION

Issued By: dingv _____ 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 Thomas L. Gibson

Print Name THOMAS L. GIBSON Date 11-10-98

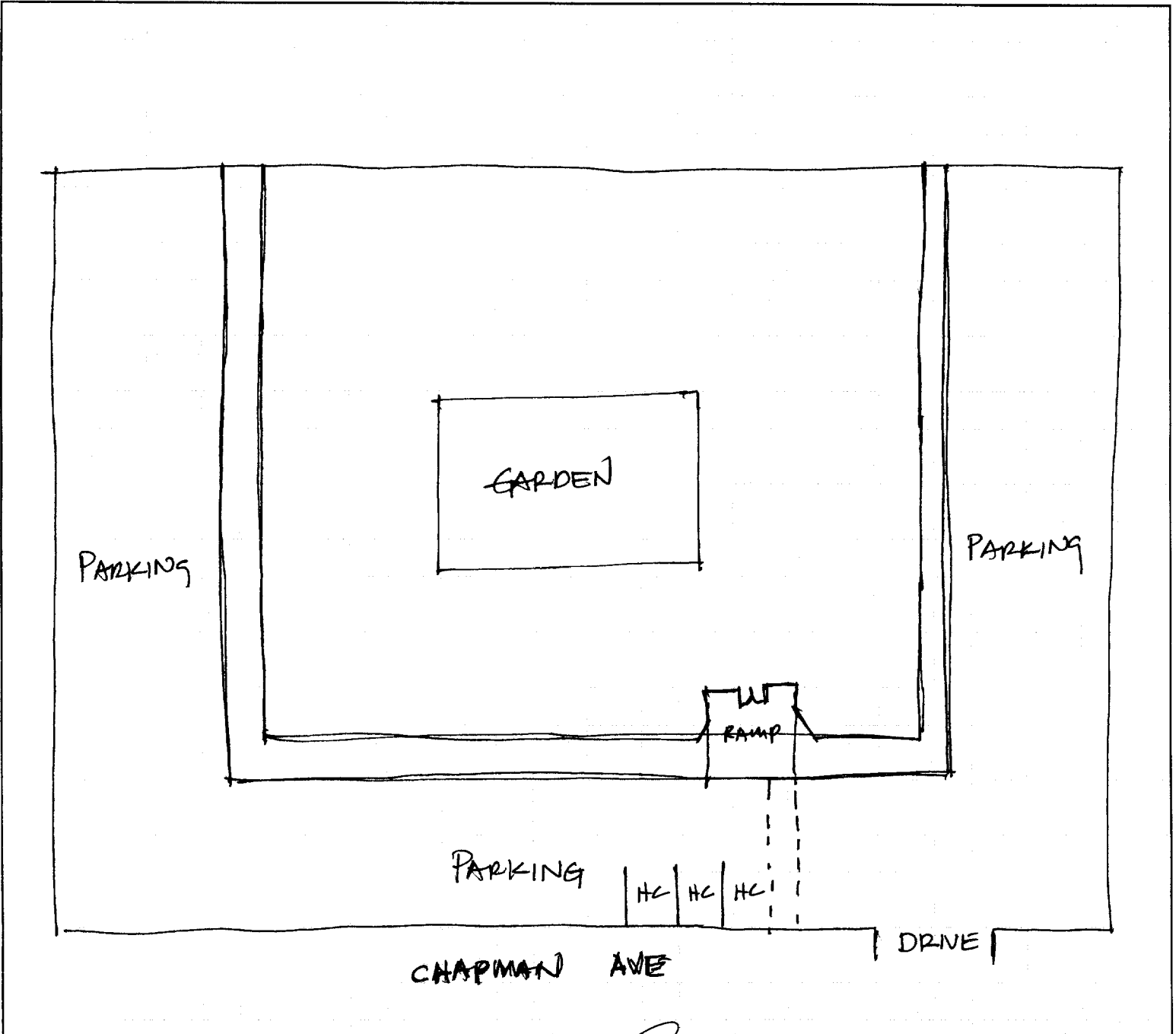
***** VALIDATION *****
 PAID ON 10 Nov 1998 AT 13:42
 RECEIVED BY CAROLH 198.245.206.215/2 TRANS# 95
 AMOUNT PAID \$289.80 BY CHECK#4240
 TOTAL PAID = \$289.80

Plot Plan Form

Planning Action: <u>NYLA</u>	Zone: <u>POD</u>	Coverage: <u>W/A</u>	Job Address: <u>7421 CHAPMAN AV</u>	Permit No: <u>45262</u>
Approved By: <u>[Signature]</u>	Date: <u>11/10/98</u>	Increase: <u>W/A</u>	Assessor Parcel No.: <u>13165138</u>	Tract & Lot #:
Remarks:			Occupancy:	Const. Type:
			Value: <u>\$10,000.00</u>	
			<input type="checkbox"/> New	<input checked="" type="checkbox"/> Alter
			<input type="checkbox"/> Add	<input type="checkbox"/> Repair
			<input type="checkbox"/> Demo	

Job Description:

T.1. - PROVIDE NEW CEILING HT. PARTITION & NEW RAISED FLOOR



I certify the information hereon is complete & correct

ARLON THOMAS
Owner's Name (print)

[Signature]
Signature (owner/agent)

11/10/98
Date



**CITY OF GARDEN GROVE
BUILDING SERVICES**

7421 CHAPMAN AVE

PERMIT#:13-1482

ISSUED:7/15/13

General Info : 714-741-5307

Inspection Requests : 714-741-5332

Applicant CRANDALL'S PLUMBING		Telephone 465-7819	Zip 92648	Building Address 7421 CHAPMAN AVE	
Address 18291 GOTHARD ST 101		City HUNTINGTON BEACH	State	Suite/Unit/Building	
State Licence 927449	Expires N/A	City Licence	Expires	TYPE Miscellaneous	ISSUED BY Joanne Chung
Contractor CRANDALL'S PLUMBING		Telephone 465-7819	Zip 92648	Inspector Dist. H8	Parcel Number 13165138
Address 18291 GOTHARD ST 101		City HUNTINGTON BEACH	State	LOT	TRACT
State Licence 927449	Expires N/A	City Licence	Expires	Valuation \$5,500.00	
Floor Area(sq. ft.)	Residential/Commercial Commercial				
Final Inspector's Signature <u>[Signature]</u> Date <u>8/29/13</u>					
Job Description INSTALL NEW 3" COLT SERIES C200 BACKFLOW PREVENTER FOR DOMESTIC WATER FEED					
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.					
X	Applicant's Signature <u>[Signature]</u>				
	Print Name <u>Angie Harkenscheid</u> Date <u>7/15/13</u>				
F E E S	Description	Quantity	Amount		
	Lawn Sprinkler (Non-Residential) - Vacuum breakers or backflow prevention devices	1	\$15.00		
	General Plan Update Fee, Valuation		\$8.33		
	Building Permit Document Retention Fee	1	\$5.00		
	Building Technology Fee	1	\$10.00		
	BSASRF State Fee		\$1.00		
	Issuance Fee	1	\$35.00		
	One-Stop Permit Center Surcharge		\$2.90		
	Building Permit Fee		\$145.00		
	Plan Check Fee		\$96.14		
	Cultural Arts Fee, Valuation		\$4.17		
	TOTAL		\$322.54		

This is a building permit when properly filled out, signed and validated, and is subject to expiration if work thereunder is suspended for 180 days.

Permit Type: PLUMB/BLDG

ORIGINAL

INSPECTION RECORD

For Applicant to Fill in

P.C. # 2953

OCU-PANCY B2	TYPE VN	OCC. LOAD	FIRE SPRINK. YES
USE ZONE PUD	FRONT	LEFT	RIGHT
FIRE ZONE -	REAR	SEE PLOT PLAN	
PLANNING ACTION PUD 103-76	PROVIDE PLANS DATE 6/1/83		
LAND USE APPROVED BY JRY FOR FR 16.	REMARKS:		
G.G. SANT. DIS. FEE REQ'D. Yes	O.C. SANT. DIS. FEE REQ'D. Yes	DATE 6/1/83	INITIAL MC
PARCEL MAP	REQ'D	PROVIDED	
FEE SCHEDULE			
ST. BOND	REV. CODE	AMOUNT	
WATER BOND			
WATER ASSMT. FEE (ACRG.)			
WATER ASSMT. FEE (FT.)			
PARKWAY TREE FEE			
PARK & REC. FEE (DIST.)			
DRAIN ASSMT. FEE (DIST.)			
PLAN RETENTION FEE	3542	241 05	
BLDG. PLAN CHECK	3527	7142 04	
BLDG. PERMIT FEE	3226	10791 90	
ISSUANCE	3517	10 00	
VALUATION 4127 200.00	TOTAL FEES	18184 99	
AUTHORIZED BY JRY	DATE 6-1-83		

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION	6/30/83	
CONCRETE FLOOR REINFORCING		
ROOF SHTG	7/16/83	
ROUGH FRAME	9/2/83	
INSULATION, ENERGY LATH OR DRYWALL	11/9/83	
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING	4/10/83	
LANDSCAPING		
LAND USE FINAL		
FINAL	4/10/83	
UTILITY RELEASE		
IDENTIFICATION CODE		
WORKER'S COMPENSATION REQUIREMENTS		
State Compensation Insurance Policy No. CC42-0483-1363 Expiration Date 4/1/84		
<input checked="" 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 pursuant to this permit.		
PERMIT APPLICANT SIGNATURE [Signature] DATE 6-1-83 BUSINESS TAX CERTIFICATE INFORMATION I certify that the following Contractor's License No. and Classification 6-1-83 is in full force and effect. (PRINT) CONTRACTOR GERARDI/WHITNEY (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT [Signature] DATE 6-1-83		
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 _____		

ADDRESS 7421 CHAPMAN AVE
LOT NO. PARCEL 1R15 BLK NO. PM 1A/21 TRACT NO. 1301234 PERMIT NO. 1301234
OWNER DANWA CORP. TEL. NO. (213) 321-3411
MAILING ADDRESS 14011 S. NORBETH-DIE AVE CITY GARDEN GROVE ZIP 90249
<input checked="" type="checkbox"/> ARCH <input type="checkbox"/> ENGR. KAJIMA ASSOC.
MAILING ADDRESS 250 E. 1ST ST. SUITE 700 CITY LA ZIP 90012
TEL. NO. 629-2321 STATE LIC. NO. & TYPE C-1199
VALIDATION
CONTRACTOR MILLER & SEVERSON
MAILING ADDRESS 3601 SERPENTINE DR. CITY LOS ALMITOS ZIP 90720
TEL. NO. (213) 493-3611 STATE LIC. NO. # 99031
PRESENT BLDG. USE VACANT LOT PROPOSED BLDG. USE OFFICE & WAREHOUSE
DESCRIBE WORK TO BE DONE CONSTRUCT NEW OFFICES AND WAREHOUSE - CONCL. TILT-SLAB CONCR.
NEW <input checked="" type="checkbox"/> ADD'N <input type="checkbox"/> ALTER. <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>
FLOOR AREA (SQ. FT.) 201 NO. OF STORIES L 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

PLUMBING PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EACH	\$ FEE
Soil Piping	6-22-83	MS	Water Closet (toilet)	41		184 50
			Bath Tub			
Ground Plumbing			Shower	1		4 50
			Lavatory (Wash Basin)	51		229 50
Rough Plumbing	7-1-83	MS	Kitchen Sink	4		18 -
			Garbage Disposal			
Gas Piping	7-10-83	MS	Laundry Tub or Tray	3		13 50
			Water Heater	2		11 00
Gas Vent			Floor Sink	2		9 -
			Floor Drain	16		72 -
Sewer			Dish Washer			
			Drinking Fountain	3		13 50
Main Drain and Vacuum Lines			Urinal	16		72 -
			Gas System - Outlets	18		12 -
Water Heater			Building Sewer (First 100 ft.)	1		11 -
			Building Sewer (Add'l 100 ft.)	9		27 -
Backwash			Building Sewer (ea. add'l drain)			
			Rainwater Drain CONDENSATE	7		31 50
Water Lateral			Swimming Pool Piping			
			Sand Traps/Receptors	1		4 50
			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)			
			1200 L.F OF			
			6" Sewer Main			48 -
FINAL	3-21-84	MS				
UTILITY CO. NOTIFIED						
IDENTIFICATION CODE			ITEM	CODE	FEES	
			Plan Retention Fee			
			Plan Check	3522		517 82
			Permit	3228		761 50
			Issuance	3517		10 -
			TOTAL FEES			1,289 32
			LAND USE	BUILDING	DATE	

ADDRESS
7421 CHAPMAN AVE
LOT NO. BLK NO. TRACT NO. 1302

OWNER
DIAWA
OWNER'S ADDRESS CITY

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

VALIDATION

PLUMBING CONTRACTOR
LEE'S PLUMBING
ADDRESS 2407 N. LEE AVE
CITY SO. BE MONTANA PHONE 444-3526
STATE LIC. NO. & TYPE 308196

WORKER'S COMPENSATION REQUIREMENTS
State Compensation Insurance Policy No. 139766A Expiration Date 10/83
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.
James Galbreath 6/2/83
PERMIT APPLICANT SIGNATURE

BUSINESS TAX CERTIFICATE INFORMATION
I certify that the following Contractor's License No. and Classification is in full force and effect.
LEE'S PLUMBING James Galbreath 6/2/83
(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR (DATE) AUTHORIZED AGENT

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 7063
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.

INSPECTOR

HEATING, VENTILATING, REFRIGERATION & AIR COND. PERMIT

INSPECTION RECORD

FEE'S

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	650	2600
			More than 100M & incl. 500M B.T.U.	1	1200	1200
FURNACE VENTS			More than 500M & incl. 1MM B.T.U.			
			Installation or Relocation of Susp. Heater			
GAS PIPING			Installation or Relocation of Wall Heater			
			Installation or Relocation of Unit Heater	15	60	9150
DUCTS	3-21-84	EM	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	18	350	6300
AIR HANDLING UNIT			Each Ventilating System not a Part of a Heating or Air Conditioning System Authorized by Permit			
			Boiler or Compressor to & incl. 5 Hp.	2	650	1800
EVAPORATIVE COOLER			Absorption System to & incl. 100M B.T.U.	2	650	1800
BOILER OR COMPRESSOR			Boiler or Compressor to & incl. 15 Hp.	2	1200	2400
			Absorption System to & incl. 500M B.T.U.			
DECORATIVE APPLIANCE			Boiler or Compressor to & incl. 30 Hp.	1	1650	1650
			Absorption System to & incl. 1MM B.T.U.			
			Boiler or Compressor to & incl. 50 Hp.	2	3500	10500
			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
7421 CHAPMAN AVE

LOT NO. BLK NO. TRACT NO. PERMIT NO.
131697A

OWNER
DAIMA PHONE

OWNER'S ADDRESS CITY

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

VALIDATION

HEATING CONTRACTOR
Continental Contractors STATE LIC. NO. & TYPE
H-PER 915089

ADDRESS
11521 MONMOUTH C.G. 893453 CITY PHONE

1#1654A 9-23'83 CHECK 588.00

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. _____ Expiration Date **7-1-84**

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

Other: _____

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

ITEM	CODE	FEE'S
Plan Retention Fee		
Plan Check		
Permit		588.00
Issuance		10.00
TOTAL FEES		588.00
LAND USE	AUTHORIZED BY BUILDING	DATE
	<i>[Signature]</i>	9-22-83

BUILDING PERMIT NO. **130123A** 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.

INSPECTOR

PLUMBING PERMIT

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			
Sewer			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	2-16-84	EM	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)			
			P-TRAP FOR FISH POND			4.50
FINAL	3-21-84	EM				
UTILITY CO. NOTIFIED						
IDENTIFICATION CODE			ITEM	CODE		FEES
			Plan Retention Fee			
			Plan Check			
			Permit	3228		4.50
			Issuance	3517		10.00
			TOTAL FEES			14.50
BUILDING PERMIT NO.			AUTHORIZED BY			
ELECTRICAL PERMIT NO.			LAND USE	BUILDING	DATE	
					JTR 2-3-84	

ADDRESS
7421 CHAPMAN AVE, GARDEN GROVE

LOT NO. BLK NO. TRACT NO. PERMIT NO.

OWNER
DAIWA CO. 1337184

OWNER'S ADDRESS CITY

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

VALIDATION
P-PER 4.50
ISS 10.00
181812A 2-03'84 CHECK 14.50

PLUMBING CONTRACTOR STATE LIC. NO. & TYPE
K.H. LANDSCAPE CONTRACTOR, INC. 436602

ADDRESS CITY PHONE
19317 DERBYSHIRE LANE 213
CERRITOS, CALIF. 90701 924-4330

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.

PERMIT APPLICANT SIGNATURE DATE
[Signature] 2-3-84

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 7046
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.

I. INSPECTOR

HEATING, VENTILATING, REFRIGERATION & AIR COND. PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EA.	\$ FEE
FURNACE			Furnace to & incl. 100M B.T.U.			
			More than 100M & incl. 500M B.T.U.			
FURNACE VENTS			More than 500M & incl. 1MM B.T.U.			
			Installation or Relocation of Susp. Heater			
GAS PIPING			Installation or Relocation of Wall Heater			
			Installation or Relocation of Unit Heater			
DUCTS	3-23-84	MY	Installation of Appliance Vent Only	3	350	10.50
SINGLE DUCT FAN VENT			Repair, Alteration or Addition to any Heating or Cooling System <i>see below</i>	1	650	6.50
			Incidental Gas Piping			
KITCHEN HOOD			Each Range Hood incl. Duct and Fan			
			Each Vent Fan Connected to a Single Duct			
AIR HANDLING UNIT			Each Ventilating System not a Part of a Heating or Air Conditioning System Authorized by Permit	1	650	6.50
EVAPORATIVE COOLER			Boiler or Compressor to & incl. 5 Hp.			
			Absorption System to & incl. 100M B.T.U.			
BOILER OR COMPRESSOR			Boiler or Compressor to & incl. 15 Hp.			
			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: <i>cut in one new floor dampers under floor in computer room and relocate one supply</i>			
FINAL	3-22-84	MY				
UTILITY CO. NOTIFIED						
IDENTIFICATION CODE						
BUILDING PERMIT NO.	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.						

ADDRESS 7421 CHAPMAN AVE			
LOT NO.	BLK. NO.	TRACT NO.	PERMIT NO. 133983A
OWNER DIALWA		PHONE	
OWNER'S ADDRESS DIALWA		CITY	
NEW BUILDING OR ADDITION - AREA	EXISTING BUILDING REMODEL AREA	OCCUPANCY GROUP	LINE OF BUILDING AND OR NUMBER OF UNITS
7421 CHAPMAN	GARDEN GROVE		
SO. FT.	SO. FT.		
VALIDATION			
		H-PCR	23.50
		ISS	10.00
		CHECK	33.50
HEATING CONTRACTOR CONTROL HEATING		STATE LIC. NO. & TYPE 400847 C-20	
ADDRESS 3061 E. L. JOLLA ST. VAN HALEM		CITY #E	PHONE 630-5781
WORKER'S COMPENSATION REQUIREMENTS			
State Compensation Insurance Policy No. WN 83 074733 Expiration Date 3-28-84			
<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 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.			
PERMIT APPLICANT SIGNATURE <i>Joe Harzon</i>		DATE 2-15-84	
BUSINESS TAX CERTIFICATE INFORMATION			
I certify that the following Contractor's License No. 400847 and Classification C-20 is in full force and effect.			
(PRINT) CONTRACTOR CONTROL HEAT		(SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT <i>Joe Harzon</i> DATE 2-15-84	
BUSINESS TAX CERTIFICATE NO. SR-PR-24-662606		EXPIRATION DATE 2-28-85	
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
		<i>[Signature]</i>	2-21-84
A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.			

I, INSPECTOR

GROVE
Development

MILLIE-SPRINKLED PERMIT # 130123A

ELECTRICAL PERMIT

LIC. NO. 219642

Inspection Requests
638-6771

General Information
638-6661

For Applicant to Fill in

PRINT

CONSTRUCTION RECORD

FEES

WIRE SIZE UG OH
 AMPS VOLTS RIG. CONDUIT
 PHASE SERVICE SIZE 3 Wire 4 Wire UG OH
 AMPS VOLTS RIG. CONDUIT

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	1242	50	621 00
Fixtures	1760	50	880 00
Fixtures, Merc. Quartz, etc.	20	1.00	20 00
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	54	3.00	162 00
Over 1, Not Over 10 each	15	5.50	82 50
Over 10, Not Over 30 each	8	7.00	56 00
Indv. Circuits NOT OVER 50	2	11.00	22 00
Time Clock	7	3.00	21 00
Sign NOT OVER 100	4	22.00	88 00
Sign Hooked NOT OVER 500	2	32.00	64 00
FLOOR DUCTS	630	1.00	630 00
PLUG WELD REWORKING	50	1.00	50 00
SIGNATURE BOARD - MCC	4	20.00	80 00
11 ADD. SECTION	5	10.00	50 00

APPROVAL	DATE	INSPECTOR
Underground	6-14-83	Ⓚ
Conduit		
Wiring - Rough	11-3-83	Ⓚ
Fixtures & Trim	1-23-84 - 20 3-1-84	Ⓚ
Motors	3-1-84	Ⓚ
Final	3-1-84	Ⓚ
Utility Notified		

Notes! This contractor did NOT hook up equipment in-Class I Div I Area (SPRAY booth within a room) 3-1-84

IDENTIFICATION CODE

BUILDING PERMIT NO. 130123A
 SIGN PERMIT NO.
 VENT. HEAT. AIR COND. 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	FEES
Plan Retention Fee		
Plan Check	3524	1509 14
Permit	3227	2210 50
Issuance	3517	10 00
TOTAL FEES		3723 64

LAND USE AUTHORIZED BY BUILDING DATE
 MR 6/9/83

ADDRESS
 7421 CHARMON AVE.
 LOT NO. BLK NO. TRACT NO. ELECTRIC PERMIT NO.
 130235A

OWNER PHONE
 DAVIDA CORP.
 OWNER'S ADDRESS CITY

7421 CHARMON AVE
 NEW BUILDING OR ADDITION - AREA SQ. FT. EXISTING BUILDING PENODEL AREA SQ. FT. OCCUPANCY GROUP USE OF BUILDING AND OR NUMBER OF UNITS
 224 000 22 000 ME9

VALIDATION

ELECTRICAL CONTRACTOR STATE LIC. NO. & TYPE
 HOFFMANN & SON INC. 191821-610
 ADDRESS CITY PHONE

211 E. COLUMBIA ST. S.A. 545-8457

WORKER'S COMPENSATION REQUIREMENTS
 State Compensation Insurance Policy No. 02-617-09421 Expiration Date 10-1-83
 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: 6-1-83

BUSINESS TAX CERTIFICATE INFORMATION
 I certify that the following Contractor's License No. and Classification is in full force and effect.

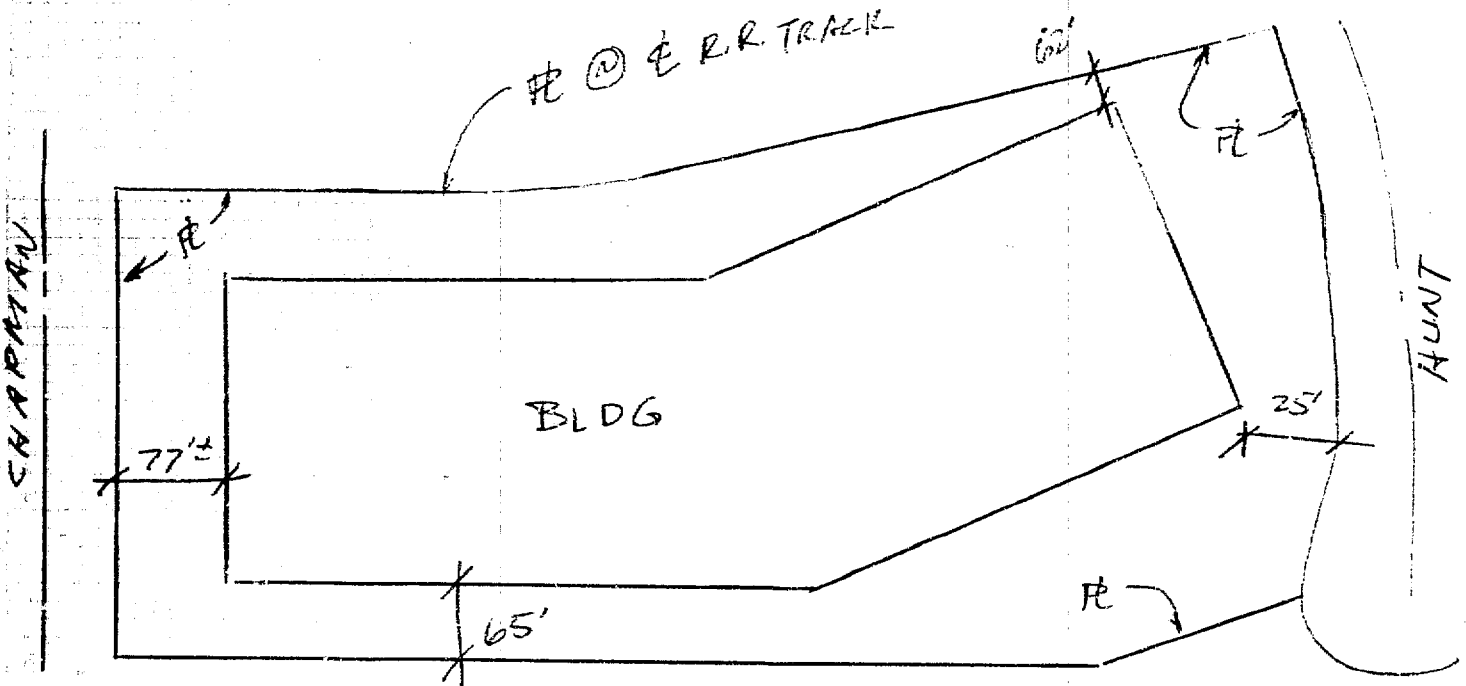
(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR DATE
 219642 [Signature] AUTHORIZED AGENT
 BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE
 I certify that I am exempt from Section 7031.5 of the Business and Professions Code, Division 3, Chapter 9, Contractors' License Law, under the following Section:
 Owner: Section 7044 Minor work under \$100: Section 7048
 Employee working for wages only: Section 7053
 Other:

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

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

OWNER DAIWA	JOB ADDRESS 7421 CHAPMAN	PERMIT NO. 130123A
NAME OF CONSTRUCTION LENDER & BRANCH	ASSESSORS PARCEL NO. 131-651-15	LOT 17
	BLOCK	TRACT
	PLEASE CHECK ONE OR MORE	
	<input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish	
ADDRESS	DATE 6/1/83	PERMIT VALUE \$412700.00
CITY	JOB DESCRIPTION NEW INDUSTRIAL BLDG	

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



PLOT PLAN APPROVED BY _____

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

By _____

INSPECTION RECORD

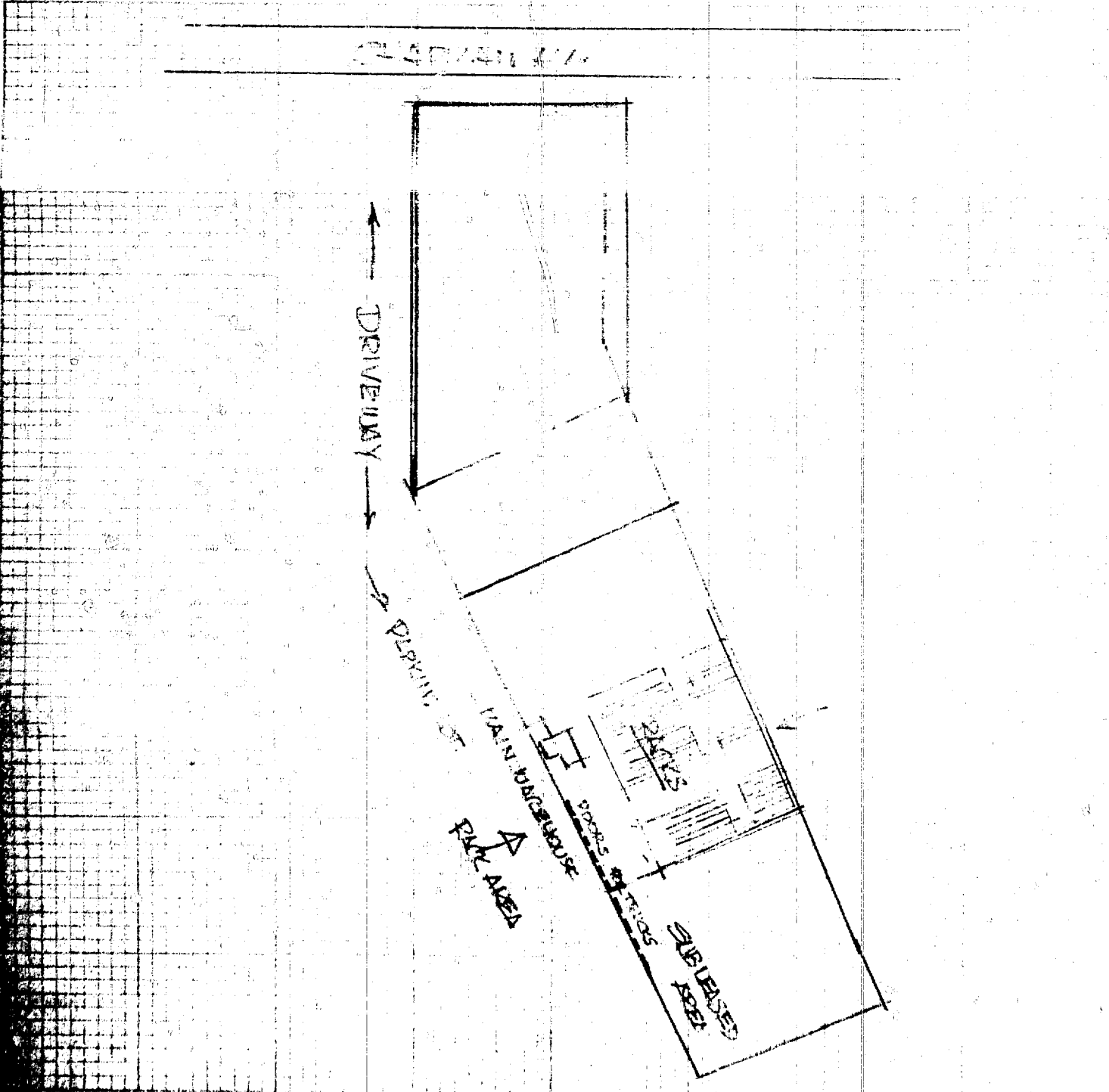
For Applicant to Fill in

P.C. #		OCC. LOAD				FIRE SPRINK.		APPROVAL	DATE	INSPECTOR	ADDRESS
USE ZONE	TYPE	FRONT	LEFT	RIGHT	REAR			FOUNDATION & LOCATION			7421 CHAPMAN AVE
FIRE ZONE	Eav Proj.	4 1/2						CONCRETE FLOOR			LOT NO. BLK NO. TRACT NO. PERMIT NO. 133292A
PLANNING ACTION	Setbacks							REINFORCING			OWNER DAIWA CORP
LAND USE APPROVED BY						PLANS DATE		ROOF SHTG			MAILING ADDRESS CITY ZIP 7421 CHAPMAN G.G. 92741
REMARKS:								ROUGH FRAME			<input type="checkbox"/> ARCH <input checked="" type="checkbox"/> ENGR. E. D. BIRNBAUM
								INSULATION, ENERGY			MAILING ADDRESS CITY ZIP 1626 SILVERLAKE L.A. 90026
								LATH OR DRYWALL			TEL. NO. STATE LIC. NO. & TYPE (213) 663-9218 SE 628
								PLAS. BROWN CT.			VALIDATION PL RET 470 S-PLAN 238.04 S-PER 347.87 ISS 10.00
								SOUND INSULATION			CONTRACTOR NATIONWIDE INSTALLERS
								SMOKE DETECTOR			MAILING ADDRESS CITY ZIP 300 THOR PL. BREA 92621
								PARKING			TEL. NO. STATE LIC. NO. (714) 529-7608 330054
								LANDSCAPING			PRESENT BLDG. USE NEW PROPOSED MANUFACT. BLDG. USE WAREHOUSE
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.	DATE	INITIAL	REQ'D	PROVIDED			LAND USE FINAL			DESCRIBE WORK TO BE DONE ERECTION OF STORAGE EQUIPMENT
								FINAL			NEW <input checked="" type="checkbox"/> ADD'N <input type="checkbox"/> ALTER. <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>
PARCEL MAP								UTILITY RELEASE			FLOOR AREA NO. OF NO. OF DWELLING (SQ. FT.) 70,000 STORIES 1 UNITS 1
R/W DEDICATION								IDENTIFICATION CODE			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.
FEES AND BONDS								WORKER'S COMPENSATION REQUIREMENTS			A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.
ST. BOND	REV. CODE	AMOUNT						State Comparison Insurance Policy No. 440-00035-89-7 Expiration Date 5-14-84			RELOCATION
WATER BOND								<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.			PRESENT BLDG. ADDRESS
WATER ASSMT. FEE (ACRG.)								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.			MOVING CONTRACTOR
WATER ASSMT. FEE (FT.)								<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.			ADDRESS
PARKWAY TREE FEE								<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.			
PARK & REC. FEE (DIST.)								Signature: <i>South Laguna</i> 12-29-83			
DRAIN ASSMT. FEE (DIST.)								BUSINESS TAX CERTIFICATE INFORMATION			
PLAN RETENTION FEE		3542	4	70				I certify that the following Contractor's License No. 330054 and Classification is in full force and effect.			
BLDG. PLAN CHECK		3527	222	24				NATIONWIDE INSTALLERS INC. South Laguna			
BLDG. PERMIT FEE		3226	347	82				(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE 12-29-83			
ISSUANCE		3517	10					BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE			
EVALUATION		70,000.00	TOTAL FEES	59581				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:			
AUTHORIZED BY								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			

1. INSPECTOR

OWNER DAIWA CORP.	JOB ADDRESS 7421-CHAPMAN AV.	PERMIT NO. 133292A-
NAME OF CONSTRUCTION LENDER & BRANCH	ASSESSORS PARCEL NO. 131-651-17	LOT BLOCK TRACT
	PLEASE CHECK ONE OR MORE <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish	
ADDRESS 555 SONDREMAN DR CITY GARDEN JA. GARDEN GROVE 7421 CHAPMAN	DATE 12/23/83	JOB DESCRIPTION RACKS - STORAGE
		PERMIT VALUE 70,000

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



of Building Insp./ or Assessor/ or Permittee/ or File certify the information hereon is complete and correct.

By _____

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 7421 Chapman Ave. PERMIT N^o 151123a

USE OF BLDG. Office & Warehouse GROUP --- TYPE Sm

BLDG. APPROVED BY Ed Robinson DATE 4/10/84 USE ZONE 100

ZONING REMARKS PUD 103-76

BLDG. OWNER Daiwa Corp. ADDRESS 14011 S. Normandie, Gardena, CA
90245

Stewart Miller BY _____ DATE 4-11-84

BLDG. OFFICIAL

William K. Miller
POST IN A CONSPICUOUS PLACE

ELECTRICAL PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

SINGLE PHASE SERVICE SIZE <input type="checkbox"/> UG <input type="checkbox"/> OH			IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE	ADDRESS				
AMPS	VOLTS	RIG. CONDUIT	Residential (R-1 & R-3) sq. ft.				7421 CHAPMAN AVE.				
THREE PHASE SERVICE SIZE <input type="checkbox"/> 3 Wire <input type="checkbox"/> 4 Wire <input type="checkbox"/> UG <input type="checkbox"/> OH			Garage, Resid. (M) sq. ft.				LOT NO.	BLK NO.	TRACT NO.	ELECTRIC PERMIT NO.	
AMPS	VOLTS	RIG. CONDUIT	Service Meter, Single Phase							134019A	
APPROVAL	DATE	INSPECTOR	Service Meter, Three Phase				OWNER				
			ADD'l Meter, Three Phase				DAIWA				
Underground			Temporary Power Pole				OWNER'S ADDRESS				
Conduit			Pole, Power, Light, etc.				SAME AS ABOVE				
Wiring - Rough			Sub-Panels 1 φ				NEW BUILDING OR ADDITION - AREA A	EXISTING BUILDING REMODEL AREA	OCCUPANCY GROUP	USE OF BUILDING AND OR NUMBER OF UNITS	
			Sub-Panels 3 φ	1	5.50	5.50	SQ. FT.	SQ. FT.			
Heater			Outlets				VALIDATION				
Fixtures & Trim			Fixtures				E-PER 38.50				
			Fixtures, Merc. Quartz, etc.				ISS 10.00				
Motors			Heater—Not Over 1650 W				214674A 2-23-84 CHECK 48.50				
			Washer				ELECTRICAL CONTRACTOR				
			Dryer				STATE LIC. NO. & TYPE				
			Hot Water Heaters				30. COAST ELEC. 293403 C-10				
			Dishwasher				ADDRESS				
			Domestic Range or Oven				CITY				
			Disposal				PHONE				
			Power Apparatus—H.F., K.W. or K.V.A. Motors, Transformers, etc.				1126 N. FOUNTAIN WAY ANAHEIM 632-8044				
			Not Over 1 each				WORKER'S COMPENSATION REQUIREMENTS				
			Over 1, Not Over 10 each				State Compensation Insurance Policy No. 7021A0311 Expiration Date 1-1-85				
			Over 10, Not Over 30 each				<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 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.				
			Indv. Circuits				[Signature] 2/23/84 PERMIT APPLICANT SIGNATURE DATE				
			Time Clock				BUSINESS TAX CERTIFICATE INFORMATION				
			Sign				I certify that the following Contractor's License No. 293403 and Classification C-10 is in full force and effect				
			Sign Hookup				30. COAST ELEC. [Signature] 2/23/84 (PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE				
Ufer			112.5 KVA XFMTR	1	33	33	219660 3/31/84 BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE				
Service							I certify that I am exempt from Section 7031.5 of the Business and Professional Code, Division 3, Chapter 9, Contractor's 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"/>				
FINAL	12-4-84	TD					Other: _____				
Utility Notified							(PRINT) PROPERTY OWNER (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT DATE				
IDENTIFICATION CODE			ITEM	CODE	FEES		A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.				
			Plan Retention Fee								
			Plan Check								
			Permit			88.50					
			Issuance			10.00					
			TOTAL FEES				48.50				
BUILDING PERMIT NO.	SIGN PERMIT NO.	VENT HEAT AIR COND. PERMIT NO.	AUTHORIZED BY			BUILDING	DATE				
			LAND USE								

T. INSPECTOR

[Signature] 2/23/84

ELECTRICAL PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

SINGLE PHASE SERVICE SIZE <input type="checkbox"/> UG <input type="checkbox"/> OH			IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEES
AMPS	VOLTS	RIG. CONDUIT	Residential (R-1 & R-3) sq. ft.			
THREE PHASE SERVICE SIZE <input type="checkbox"/> 3 Wire <input type="checkbox"/> 4 Wire <input type="checkbox"/> UG <input type="checkbox"/> OH			Garage, Resid. (M) sq. ft.			
AMPS	VOLTS	RIG. CONDUIT	Service Meter, Single Phase			
APPROVAL	DATE	INSPECTOR	Service Meter, Three Phase			
Underground			Add'l Meter, Three Phase			
Conduit			Temporary Power Pole			
Wiring - Rough			Pole, Power, Light, etc.			
Heater			Sub-Panels 1 φ			
Fixtures & Trim			Sub Panels 3 φ	1	50	5.00
Motors	2-22-84	<i>[Signature]</i>	Outlets	156	50	78.00
			Fixtures		50	
			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		3.00	
			Over 1, Not Over 10 each	2	5.00	11.00
			Over 10, Not Over 30 each		7.00	
			Indv. Circuits		5.00	
			Time Clock		3.00	
			Sign			
			Sign Hookup			
Ufer			37.5 KYA X FMC 1			11.00
Service						
FINAL	12-4-84	<i>[Signature]</i>				
Utility Notified						
IDENTIFICATION CODE			ITEM	CODE	FEES	
			Plan Retention Fee			
			Plan Check			
			Permit			
			Issuance			
			TOTAL FEES			195.54
			AUTHORIZED BY			<i>[Signature]</i>
			LAND USE			2-10-84

ADDRESS 7421 CHARMAN AVE			
LOT NO.	BLK NO.	TRACT NO.	ELECTRIC PERMIT NO. 133820A
OWNER DAIWA		PHONE	
OWNER'S ADDRESS SAME AS ABOVE			
NEW BUILDING OR ADDITION AREA	EXISTING BUILDING REMODEL AREA	OCCUPANCY GROUP	USE OF BUILDING AND OR NUMBER OF UNITS
SQ. FT.	SQ. FT.	E-PER	105.54
VALIDATION			ISS 10.00
			1N3001A 2-10*84 CHECK 115.54
ELECTRICAL CONTRACTOR GO. COAST ELEC.		STATE LIC. NO. & TYPE 293403 C-10	
ADDRESS		CITY	PHONE
1126 N. FOUNTAIN WAY		ANA	632-8044
WORKER'S COMPENSATION REQUIREMENTS			
State Compensation Insurance Policy No. 702040311 Expiration Date 1-1-85			
<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 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.			
APPLICANT SIGNATURE <i>[Signature]</i>		DATE 2/10/84	
BUSINESS TAX CERTIFICATE INFORMATION			
I certify that the following Contractor's License No. 293403 and Classification C-10 is in full force and effect.			
CONTRACTOR GO. COAST ELEC.		DATE 2/10/84	
(PRINT) CONTRACTOR		(SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT <i>[Signature]</i>	
BUSINESS TAX CERTIFICATE NO. 2A1660		EXPIRATION DATE 3/31/84	
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. Sect: on 7048 () Employee working for wages only: Section 7053 <input type="checkbox"/>			
Other:			
(PRINT) PROPERTY OWNER		(SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT	
A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.			

BUILDING PERMIT

Inspection Requests
638 6771

General Information
638 8661

INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY		OCC. LOAD		FIRE SPRINK.		APPROVAL	DATE	INSPECTOR
USE ZONE	TYPE	FRONT	LEFT	RIGHT	REAR			
FIRE ZONE	Eav Prot.					FOUNDATION & LOCATION		
	Setbacks					CONCRETE FLOOR		
PLANNING ACTION						REINFORCING		
						ROOF SHTG		
LAND USE APPROVED BY						ROUGH FRAME		
REMARKS						INSULATION ENERGY		
						LATH OR DRYWALL		
						PLAS. BROWN CE		
						SOUND INSULATION		
						SMOKE DETECTOR		
						PARKING		
						LANDSCAPING		
G.G. S.A.N.T. DIS. FEE REQ'D.	O.C. S.A.N.T. DIS. FEE REQ'D.	DATE	INITIAL	REQ'D	PROVIDED			
CARCEL MAP								
R/W DEDICATION						LAND USE FINAL		
						FINAL		
FEES AND BONDS						UTILITY RELEASE		
	REV. CODE	AMOUNT				IDENTIFICATION CODE		
ST. BOND								
WATER BOND								
WATER ASSMT FEE (ACRG.)								
WATER ASSMT FEE (FT.)								
PARKWAY TREE FEE								
PARK & REC FEE (DIST.)								
DRAIN ASSMT FEE (DIST.)								
PLAN RETENTION FEE		2.00						
BLDG. PLAN CHECK		6.80						
BLDG. PERMIT FEE		10.50						
ISSUANCE		10.00						
VALUATION		29.30						
		\$ 500.00						
AUTHORIZED BY		DATE						

ADDRESS: **7421 CHAPMAN AVE**
 LOT NO. BLOCK NO. TRACT NO. **38177A**

OWNER: **DAIWA**

MAPPING ADDRESS: **7421 Chapman Ave. Garden Grove**

MAILING ADDRESS: **Hayama + 4580**

250 E. First St. L.A. Ca. 90012

STATE LIC. NO. & TYPE: **C-1199**

VALIDATION: **PL RET 2.00**
B-PLAN 6.80
B-PER 10.50
ISS 10.00

CONTRACTOR: **109409A12-0784 CHECK 29.30**

Contact Fire Protection Eng. Inc

MAILING ADDRESS: **14411 Cabridge Dr. Riverside Heights Ca. 91745**

STATE LIC. NO.: **C-16 456267**

PRESENT BLDG. USE: **Office**

PROPOSED BLDG. USE: **Same**

REMARKS: **Add 3 new automatic fire sprinklers**
Rebar's & " " "

FLOOR AREA (SQ. FT.): **987**

RELOCATION:

RELOCATION ADDRESS: _____

MOVING CONTRACTOR: _____

ADDRESS: _____

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. **LN 84-23726** Expiration Date **5-1-85**

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 of his permit shall be deemed revoked.

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

Edward E. Dye

PERMIT APPLICANT SIGNATURE DATE

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. **536267** and Classification **C-16** is in full force and effect.

(PRINT) CONTRACTOR: **Contact Fire Protection Eng. Inc** SIGNATURE: **Edward E. Dye** DATE: _____

OR AUTHORIZED AGENT

BUSINESS TAX CERTIFICATE INFO

EXPIRATION DATE: _____

I certify that I am exempt from Section 70315 of the Business and Professional Code, Division 2, 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

I. INSPECTOR

12-7-84

HEATING, VENTILATING, REFRIGERATION & AIR COND. PERMIT

INSPECTION RECORD

FEEES

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EA.	\$ FEE
FURNACE			Furnace to & incl. 100M B.T.U.			
			More than 100M & incl. 500M B.T.U.			
FURNACE VENTS			More than 500M & incl. 1MM B.T.U.			
			Installation or Relocation of Susp. Heater			
GAS PIPING			Installation or Relocation of Wall Heater			
			Installation or Relocation of Unit Heater			
DUCTS			Installation of Appliance Vent Only			
			Repair, Alteration or Addition to any Heating or Cooling System	1		6 50
SINGLE DUCT FAN VENT			Incidental Gas Piping			
			Each Range Hood Incl. Duct and Fan			
KITCHEN HOOD			Each Vent Fan Connected to a Single Duct			
			Each Ventilating System not a Part of a Heating or Air Conditioning System Authorized by Permit			
AIR HANDLING UNIT			Boiler or Compressor to & incl. 5 Hp.			
			Absorption System to & incl. 100M B.T.U.			
EVAPORATIVE COOLER			Boiler or Compressor to & incl. 15 Hp.			
			Absorption System to & incl. 500M B.T.U.			
BOILER OR COMPRESSOR			Boiler or Compressor to & incl. 30 Hp.			
			Absorption System to & incl. 1MM B.T.U.			
DECORATIVE APPLIANCE			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.	1		5 00
			Air Handling Unit to & incl. 10M C.F.M.			
			Air Handling Unit over 10M C.F.M.			
			OTHER			
FINAL	12/28/84	JDA				
UTILITY CO. NOTIFIED			ITEM	CODE		FEEES
			Plan Retention Fee			
IDENTIFICATION CODE			Plan Check			
			Permit			11 50
			Issuance			10 00
			TOTAL FEES			21 50
BUILDING PERMIT NO.	ELECTRIC PERMIT NO.		LAND USE	AUTHORIZED BY	BUILDING	DATE
						12/13/84

ADDRESS 7421 Chapman			
LOT NO.	BLK NO.	TRACT NO.	PERMIT NO. 138256A
OWNER Daiwa Corp		PHONE 895-6645	
OWNER'S ADDRESS 7421 Chapman Garden Grove		CITY	
NEW BUILDING OR ADDITION - AREA	EXISTING BUILDING REMODEL AREA	OCCUPANCY HOURS	USE OF BUILDING AND NUMBER OF UNITS
SO. FT. 900	SO. FT.	ISS 10.00	
VALIDATION IN 412A12-13-84		CHECK	21.50
HEATING CONTRACTOR O.R. Poindexter INC		STATE LIC. NO. & TYPE 220862 C20	
ADDRESS P.O. Box 93066 Pasadena		CITY 9109	PHONE 918 794-1191
<p>WORKER'S COMPENSATION REQUIREMENTS</p> <p>State Compensation 84-235889 Expiration Date 1-1-85</p> <p>Insurance Policy No. _____</p> <p><input type="checkbox"/> I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.</p> <p>NOTE: If, after making such certificate, the applicant for the permit should become subject to the Worker's Compensation provisions of this code, he shall forthwith comply with the provisions of Section 3700 or his permit shall be deemed revoked.</p> <p><input 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 relevant to this permit.</p> <p>Norman Vredenburg OPR 12-7-84</p> <p>PERMIT APPLICANT SIGNATURE DATE</p>			
<p>BUSINESS TAX CERTIFICATE INFORMATION</p> <p>I certify that the following Contractor's License No. 220862 and Classification C20 is in full force and effect.</p> <p>O.R. Poindexter INC Norman Vredenburg 12/2/84</p> <p>(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE</p>			
BUSINESS TAX CERTIFICATE NO.		EXPIRATION DATE	
<p>I certify that I am exempt from Section 7031.5 of the Business and Professional Code, Division 3, Chapter 9, Contractors' License Law, under the following Section:</p> <p>Owner: Section 7044 <input type="checkbox"/> Minor work under \$100: Section 7048 <input type="checkbox"/></p> <p>Employee working for wages only: Section 7053 <input type="checkbox"/></p>			
Other: _____			
(PRINT) PROPERTY OWNER		(SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT	DATE
<p>A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.</p>			

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.

I. INSPECTOR

BUILDING PERMIT

Inspection Requests
638-6771

General information
638-6661

INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY BE		TYPE VN	OCC. LOAD	FIRE SPRINK <input checked="" type="checkbox"/>	APPROVAL	DATE	INSPECTOR
USE ZONE PUD	FRONT	LEFT	RIGHT	REAR	FOUNDATION & LOCATION		
FIRE ZONE	Eav Proj.	Setbacks	SEE PLOT NOCK 113/14		CONCRETE FLOOR		
PLANNING ACTION NONE	FRANCO PLANS		DATE		REINFORCING		
LAND USE APPROVED BY	REMARKS		REINFORCING		ROOF SHTL		
REMARKS	REMARKS		REINFORCING		ROUGH FRAME		
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.	DATE	INITIAL	REINFORCING	INSULATION ENERGI		
PARCEL MAP	REQ'D	PROVIDED	REINFORCING	REINFORCING	PLATH OR DRY WALL		
R/W DEDICATION	FEE'S AND BONDS		REINFORCING	REINFORCING	PLAN BROWN CT		
ST. BOND	REV. CODE	AMOUNT	REINFORCING	REINFORCING	SOUND INSULATION		
WATER BOND	IDENTIFICATION CODE		REINFORCING	REINFORCING	SMOKE DETECTOR		
WATER ASSMT. FEE (ACRG.)	WORKER'S COMPENSATION REQUIREMENTS		REINFORCING	REINFORCING	PARKING		
WATER ASSMT. FEE (FT.)	State Compensation Insurance Policy No. 1707251 Expiration Date 1-23-85		REINFORCING	REINFORCING	LANDSCAPING		
PARKWAY TREE FEE	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.		REINFORCING	REINFORCING	G.G. SANT. DIS. FEE REQ'D.		
PARK & REC FEE (DIST.)	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.		REINFORCING	REINFORCING	O.C. SANT. DIS. FEE REQ'D.		
DRAIN ASSMT. FEE (DIST.)	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.		REINFORCING	REINFORCING	DATE		
PLAN RETENTION FEE	PERMIT APPLICANT SIGNATURE		REINFORCING	REINFORCING	INITIAL		
BLDG. PLAN CHECK	BUSINESS TAX CERTIFICATE INFORMATION		REINFORCING	REINFORCING	DATE		
BLDG. PERMIT FEE	I certify that the following Contractor's License No. 373009 and Classification 000 is in full force and effect.		REINFORCING	REINFORCING	TOTAL FEES		
ISSUANCE	[PRINT] CONTRACTOR [SIGNATURE] CONTRACTOR OR AUTHORIZED AGENT		REINFORCING	REINFORCING	DATE		
VALUATION	BUSINESS TAX CERTIFICATE NO. 373009 EXPIRATION DATE		REINFORCING	REINFORCING	TOTAL FEES		
AUTHORIZED BY	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:		REINFORCING	REINFORCING	DATE		
	Owner, Section 7044 [] Minor work under \$500, Section 7048 [] Employee working for wages only, Section 7053 []		REINFORCING	REINFORCING	DATE		
	Other []		REINFORCING	REINFORCING	DATE		
	[PRINT] PROPERTY OWNER [SIGNATURE] PROPERTY OWNER OR AUTHORIZED AGENT		REINFORCING	REINFORCING	DATE		

ADDRESS	7421 CHAPMAN AVE		
LOT NO.	BLK NO.	TRACT NO.	PERMIT NO.
			138080A
OWNED	DAIWA CORP.	STATE LIC. NO.	(714) 8756695
MAILING ADDRESS	7421 CHAPMAN AVE	CITY	GARDEN GROVE
		ZIP	92641
X ARCH	KAJIMA ASSOC.	STATE LIC. NO. & TYPE	C-1199
MAILING ADDRESS	250 E. 1st ST.	CITY	LA. CA. 90012
	SUITE 700	ZIP	90012
TEL. NO.	(213) 629 2381	STATE LIC. NO. & TYPE	C-1199
VALIDATION			
		PL RET	2.00
		B-PLAN	26.18
		B-PER	39.00
CONTRACTOR	CRB CONSTRUCTION INC.		
MAILING ADDRESS			
TEL. NO.	818 9683003	STATE LIC. NO.	373706
PRESENT BLDG. USE		PROPOSED BLDG. USE	
DESCRIBE WORK TO BE DONE	ADD NEW BRACING MET STUDS w/ 6x6 BO TO Create New OFFICES modify a/c & LTG as req'd.		
NEW [] ADDN [] ALTER [] REPAIR [] DEMOLISH []			
FLOOR AREA	928 SF	NO. OF DWELLING	
STORIES		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

11-29-84

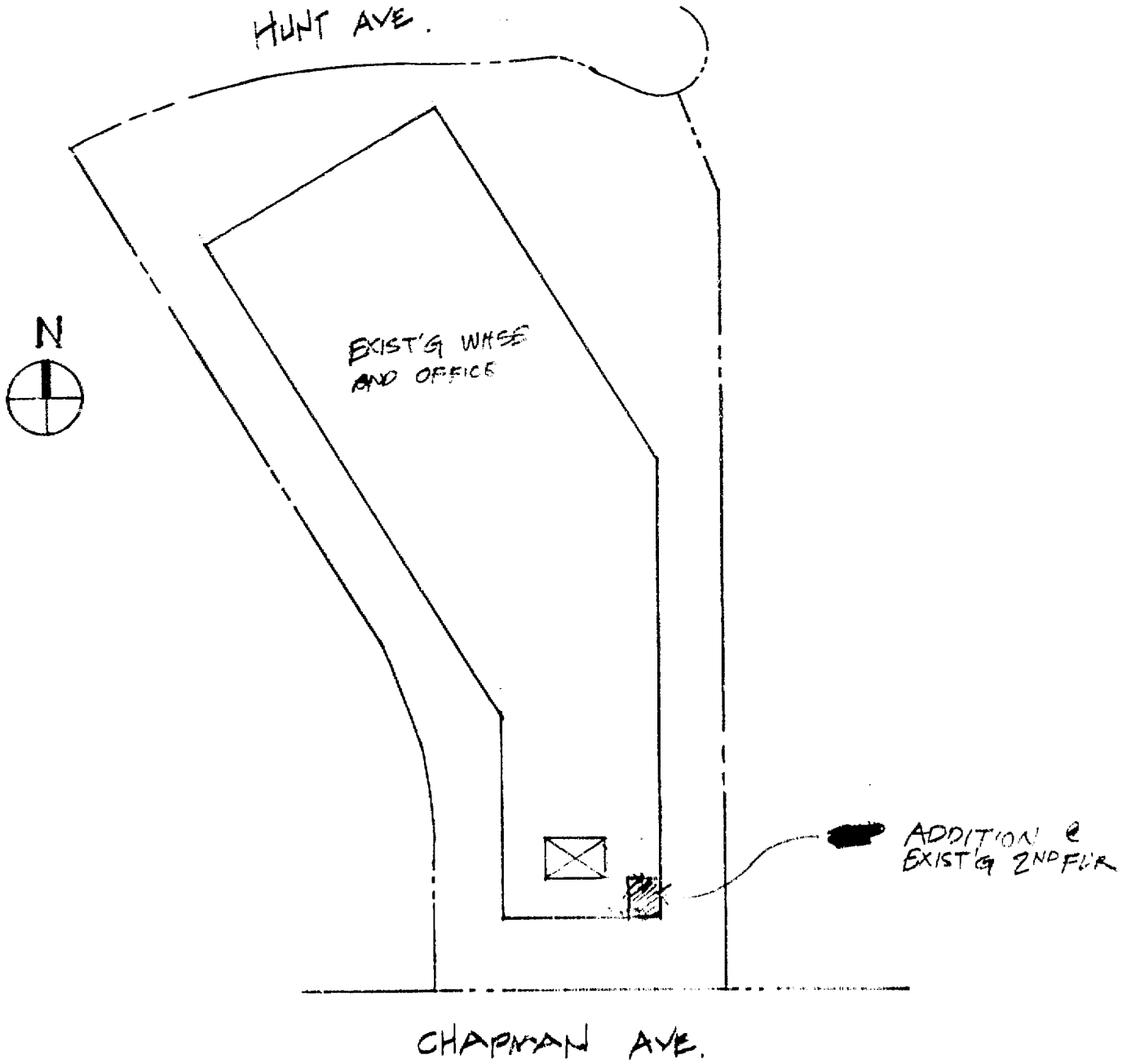
CITY OF GARDEN GROVE

PLOT PLAN

PUBLIC WORKS & DEVELOPMENT 1

OWNER DAIWA AMERICA INC.		JOB ADDRESS 7421 CHAPMAN AVE. GARDEN GROVE CA 92641		PERMIT NO. 138080A
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSORS PARCEL NO. 131-651-34	LOT	BLOCK
		PLEASE CHECK ONE OR MORE.		
		<input type="checkbox"/> New	<input checked="" type="checkbox"/> Addition	<input checked="" type="checkbox"/> Alteration
		<input type="checkbox"/> Repair	<input type="checkbox"/> Move	<input type="checkbox"/> Demolish
ADDRESS	CITY	DATE 11-29-84	JOB DESCRIPTION INTERIOR WALLS AND CEILING	PERMIT VALUE \$2,100.00

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



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

By

PLOT PLAN APPROVED BY

ELECTRICAL PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

SINGLE PHASE SERVICE SIZE <input type="checkbox"/> UG <input type="checkbox"/> OH			IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE
AMPS	VOLTS	RIG. CONDUIT	Residential (R-1 & R-3) sq. ft.			
THREE PHASE SERVICE SIZE <input type="checkbox"/> 3 Wire <input type="checkbox"/> 4 Wire <input type="checkbox"/> UG <input type="checkbox"/> OH			Garage, Resid. (M) sq. ft.			
AMPS	VOLTS	RIG. CONDUIT	Service Meter, Single Phase			
APPROVAL	DATE	INSPECTOR	Service Meter, Three Phase			
Underground			Add'l Meter, Three Phase			
Conduit			Temporary Power Pole			
Wiring - Rough	12-5-84	EW	Pole, Power, Light, etc.			
Heater			Sub Panels 1 φ			
Fixtures & Trim			Sub Panels 3 φ			
Motors			Outlets	16	5	
			Fixtures	4	3	
			Fixtures, Merc. Quarte, etc.			
			Heater - Not Over 1650 W			
			Washer			
			Dryer			
			Hot Water Heaters			
			Dishwasher			
			Domestic Range or Oven			
			Disposal			
			Power Apparatus - H.P., K.W. or K.V.A. Motors, Transformers, etc.			
			Not Over 1 each			
			Over 1, Not Over 10 each			
			Over 10, Not Over 30 each			
			Indc. Circuits			
			Time Clock			
			Sign			
			Sign Hookup			
Uter						
Service						
FINAL	1-18-85	EW				
Utility Notified						
IDENTIFICATION CODE			ITEM	CODE	FEE	
			Plan Retention Fee			
			Plan Check			
			Permit		10	
			Issuance		10	
			TOTAL FEES		20	
BUILDING PERMIT NO.	SIGN PERMIT NO.	VENT. HEAT. AIR COND. PERMIT NO.	LAND USE	AUTHORIZED BY BUILDING	DATE	
				(Signature)	12/4/84	

ADDRESS			
7421 CHAPMAN			
LOT NO.	BLK NO.	TRACT NO.	ELECTRICAL PERMIT NO.
			T38132A
OWNER		PHONE	
DAIWA			
OWNER'S ADDRESS		CITY	
7421 CHAPMAN		GARDEN GROVE	
NEW BUILDING OR ADDITION AREA	EXISTING BUILDING RE-MODEL AREA	OCCUPANCY GROUP	USE OF BUILDING AND OR NUMBER OF UNITS
VALIDATION	E-PER	ISS	CHECK
	10.00	10.00	20.00
1087J0A12-04*84			
ELECTRICAL CONTRACTOR		STATE LIC. NO. & TYPE	
FLYNN ELECTRIC		340584 C-10	
ADDRESS		CITY PHONE	
547 S. LURINE		GARDEN GROVE (818) 335-6011	
WORKER'S COMPENSATION REQUIREMENTS			
State Compensation Insurance Policy No. _____ Expiration Date _____			
<input checked="" 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 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.			
(Signature)		DATE	
Jr Flynn		12-4-84	
BUSINESS TAX CERTIFICATE INFORMATION			
I certify that the following Contractor's License No. 340584 and Classification C-10 is in full force and effect.			
FLYNN ELECT.		Jr Flynn 12-4-84	
(PRINT) CONTRACTOR		(SIGNATURE) CONTRACTOR	
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	
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.

INSPECTION RECORD

For Applicant to Fill in

PC. # _____

OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.	
		FRONT	LEFT	RIGHT	REAR
USE ZONE					
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
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.)					
DRAIN ASSMT. FEE (DIST.)					
PLAN RETENTION FEE		2	00		
BLDG. PLAN CHECK		62	90		
BLDG. PERMIT FEE		93	31		
ISSUANCE		10	00		
VALUATION	11,322	TOTAL FEES	168	21	
AUTHORIZED BY		DATE			
<i>[Signature]</i>		5-8-85			

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	9/19/85	
UTILITY RELEASE	GH 9-85	

IDENTIFICATION CODE

--	--	--	--

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. MP823815 Expiration Date 9-10-85

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] 1-10-85

PERMIT APPLICANT SIGNATURE DATE

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 2120994 and Classification 17 is in full force and effect.

[Signature] 1-10-85

(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 7421 CHAPMAN

LOT NO. BLK NO. TRACT NO. PERM. NO. 140411A

OWNER DAIWA TEL. NO. _____

MAILING ADDRESS 7421 CHAPMAN GG CITY _____ ZIP _____

ARCH
 ENGR.

MAILING ADDRESS _____ CITY _____ ZIP _____

TEL. NO. _____ STATE LIC. NO. & TYPE _____

VALIDATION

PL RET	2.00
B-PLAN	62.90
B-PER	93.31
ISS	10.00

CONTRACTOR Pyro Automatic Prot. Inc. CHECK 168-21

MAILING ADDRESS 1863 N. Neville St. CITY _____ ZIP _____

TEL. NO. 637-2100 STATE LIC. NO. 362599

PRESENT BLDG. USE _____ PROPOSED BLDG. USE _____

DESCRIBE WORK TO BE DONE install fire sprinklers in new racks

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 RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

RELOCATION

PRESENT BLDG. ADDRESS _____

MOVING CONTRACTOR _____

ADDRESS _____

P.C. #

INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.	
		FRONT	LEFT	RIGHT	REAR
USE ZONE					
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					
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		2 00			
BLDG. PLAN CHECK		62 90			
BLDG. PERMIT FEE		93 31			
ISSUANCE		10 00			
VALUATION		11,322	TOTAL FEES	168 21	
AUTHORIZED BY		DATE			
		5-8-85			

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	9/19/85	
FINAL	GH → 9-85	
UTILITY RELEASE		

IDENTIFICATION CODE

--	--	--

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. MP823815 Expiration Date 9-10-85

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.

Ken Howell
PERMIT APPLICANT SIGNATURE DATE 1-10-85

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 24994 and Classification 197 is in full force and effect.

Pyro Automatic Prot. Inc.
(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE 1-10-85

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
7421 CHAPMAN

LOT NO. BLK NO. TRACT NO. PERMIT NO. 140411A

OWNER
DAIWA TEL. NO. _____

MAILING ADDRESS CITY ZIP
7421 CHAPMAN GG

ARCH
 ENGR.

MAILING ADDRESS CITY ZIP

TEL. NO. _____ STATE LIC. NO. & TYPE _____

VALIDATION

PL RET	2.00
B-PLAN	62.90
B-PER	93.31
ISS	10.00

CONTRACTOR 111889A 5-08-85 CHECK 168.21
Pyro Automatic Prot. Inc.

MAILING ADDRESS CITY ZIP
1863 N. Neville St.

TEL. NO. 637-2100 STATE LIC. NO. 362599

PRESENT BLDG. USE _____ **PROPOSED BLDG. USE** _____

DESCRIBE WORK TO BE DONE install fire sprinklers in new racks

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 RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

RELOCATION

PRESENT BLDG. ADDRESS _____

MOVING CONTRACTOR _____

ADDRESS _____

I. INSPECTOR

BUILDING PERMIT

Inspection Requests
638-6771

General Information
638-6661

INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY TYPE		OCC. LOAD		FIRE SPRINK.		APPROVAL	DATE	INSPECTOR
USE ZONE		FRONT	LEFT	RIGHT	REAR	FOUNDATION & LOCATION		
FIRE ZONE	Eav Proj. Setbacks					CONCRETE FLOOR		
PLANNING ACTION						REINFORCING		
LAND USE APPROVED BY						ROUGH FRAME		
REMARKS:						INSULATION, ENERGY		
G.G. SANT. DIS. FEE REQ'D.						LATH OR DRYWALL		
O.C. SANT. DIS. FEE REQ'D.						PLAS. BROWN CT.		
DATE						SOUND INSULATION		
INITIAL						SMOKE DETECTOR		
REQ'D						PARKING		
PROVIDED						LANDSCAPING		
PARCEL MAP						LAND USE FINAL		
R/W DEDICATION						FINAL		
FEEES AND BONDS						UTILITY RELEASE		
		REV. CODE	AMOUNT			IDENTIFICATION CODE		
ST. BOND								
WATER BOND								
WATER ASSMT. FEE (ACRG.)								
WATER ASSMT. FEE (FT.)								
PARKWAY TREE FEE								
PARK & REC. FEE (DIST.)								
DRAIN ASSMT. FEE (DIST.)								
PLAN RETENTION FEE			2 00					
BLDG. PLAN CHECK			6 80					
BLDG. PERMIT FEE			10 50					
ISSUANCE			10 00					
VALUATION		TOTAL FEES	29 30					
500.00								
AUTHORIZED BY						DATE		
[Signature]						11-20-84		
GARDEN GROVE						WORKER'S COMPENSATION REQUIREMENTS		
State Compensation Insurance Policy No. 4000489574 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 type="checkbox"/> I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed pursuant to this permit.								
[Signature]						3-29-84		
PERMIT APPLICANT SIGNATURE						DATE		
BUSINESS TAX CERTIFICATE INFORMATION								
I certify that the following Contractor's License No. 362599 and Classification C-10 are in full force and effect.								
PYRO AUTO PROTECTIVE						3-29-84		
(PRINT) CONTRACTOR						(SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT		
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		
						DATE		
ADDRESS: 7421 CHAPMAN AVE								
LOT NO. BLK NO. TRACT NO. PERMIT NO. 137963A								
OWNER: DIANA								
MAILING ADDRESS: 7421 CHAPMAN AVE								
<input type="checkbox"/> ARCH <input type="checkbox"/> ENGR.								
TEL. NO. STATE LIC. NO. & TYPE								
PL RET 2.00								
B-PLAN 6.88								
B-PER 10.50								
ISS 10.00								
186526A11-20'84 CHECK 29.30								
VALIDATION								
CONTRACTOR: PYRO AUTO PROTECTIVE INC								
MAILING ADDRESS: 18663 NEVILLE ORANGE 92665								
TEL. NO. STATE LIC. NO.								
714 637-7622 362599								
PRESENT BLDG. USE PROPOSED BLDG. USE								
DESCRIBE WORK TO BE DONE								
SPRINKLER NEW STRIP ROOF HOD								
NEW <input checked="" type="checkbox"/> ADD'N <input checked="" type="checkbox"/> ALTER <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>								
FLOOR AREA (SQ. FT.)			NO. OF STORIES			NO. OF DWELLING UNITS		
			3			2		
If work is not started within 120 days from date of issue or if abandoned for more than 120 days, this permit will be null and void.								
A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.								
RELOCATION								
PRESENT BLDG. ADDRESS								
MOVING CONTRACTOR								
ADDRESS								

I. INSPECTOR

CITY OF GARDEN GROVE, CALIFORNIA

Development Services Department

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

Address : 7421 CHAPMAN AVE
Parcel No: 13165130 Type: B10

Suite: PERMIT NO.: 12250
Date : 03/13/92 Insp Dist : ZB

Owner : DAIWA CORP
Address: _____

Applicant: P M BROWN
Address : 18383 ENTERPRISE
HUNTINGTON BEACH CA 92648
Phone: 847-1976

Phone: _____

Architect: _____
Address : _____

Engineer: _____
Address : _____

LIC: _____ EXP: _____ PH: _____

LIC: _____ EXP: _____ PH: _____

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 1182789 Expiration Date 10-1-92
 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] 3-12-92
PERMIT APPLICANT SIGNATURE DATE

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 395857 and Classification B is in full force and effect.

P. Brown 3-13-92
(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: 15 PILASTERS FOR WROUGHT IRON FENCE

Value : 1500
Floor Area: 0

Plan Check	1	22.87
Permit	1	35.68
Genl plan/cult art	1	5.50
Issuance	1	10.00

B PER 35.68
B CHECK 22.87
ISSD. 5.50
ISS 10.00

CHK 1574 3-13-92 CHECK 74.05

3200	5.50
3226 BLDG PERM &	35.68
3517 ISSUANCE FEE	10.00
3527 BUILDING P.	22.87

INSPECTION RECORD

APPROVAL DATE INSPECTOR

Pre Inspect 3/31/92 [Signature]

Foundation 4/6/92 [Signature]

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 4/9/92 [Signature]

Utility Notified _____

Authorized by: [Signature]

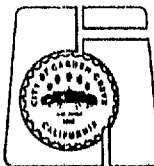
X

TOTAL FEES

74.05

Inspection Requests

741-5332
General Information
741-5307

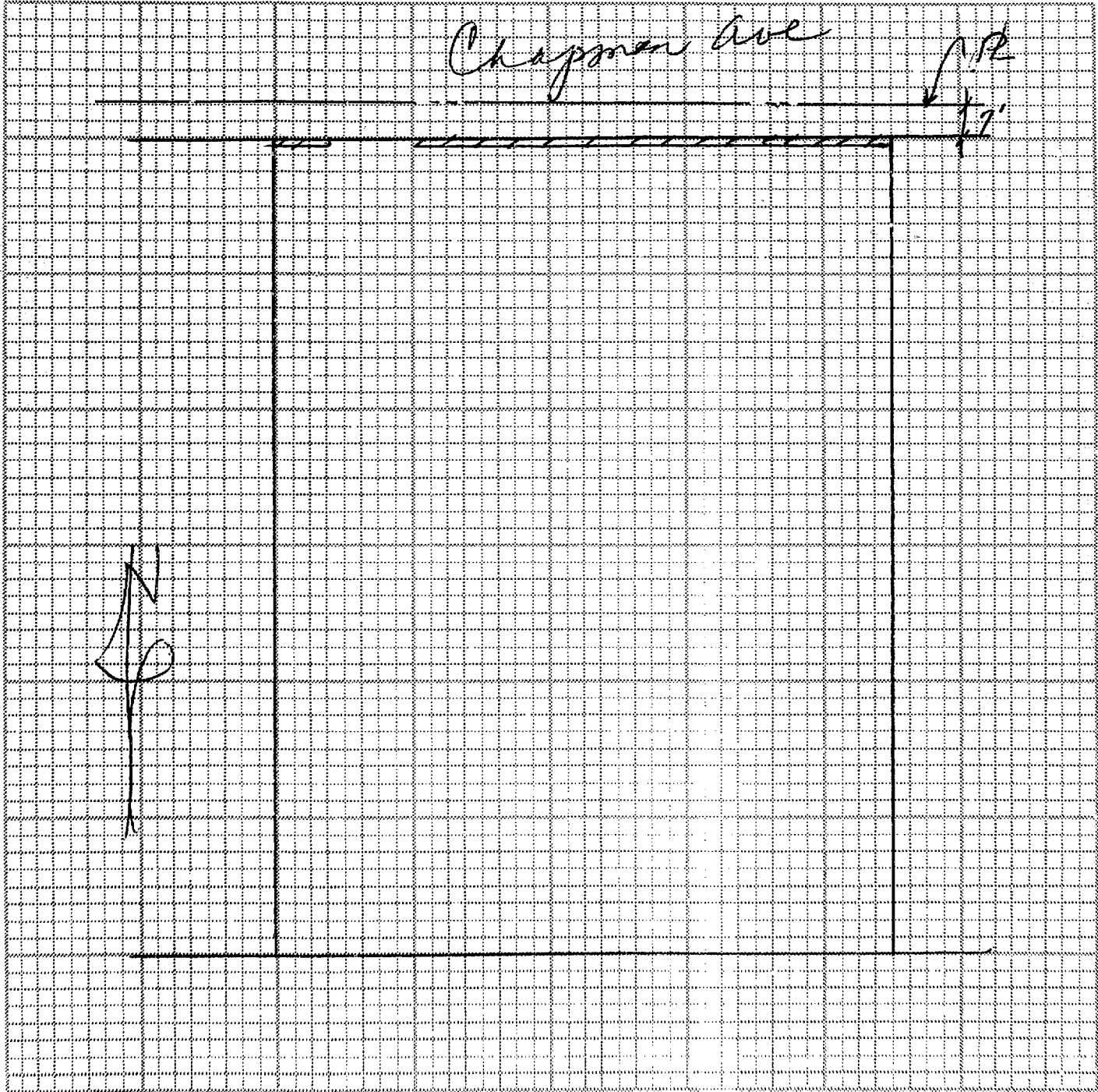


If work is not started within 180 days from date of issue or if abandoned for more than 180 days, this permit will be null and void.

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

PLANNING ACTION MM-120-91	USE ZONE P1D	LOT SIZE	JOB ADDRESS 1421 Chapman	PERMIT NO. 12250
LAND USE APPROVED BY <i>[Signature]</i>	DATE 3/13/92	OCCUPANCY	ASSESSOR'S PARCEL NO. 13165130	LOT
REMARKS:	TYPE	% INCREASE	(PLEASE CHECK ONE OR MORE)	
	FIRE SPRINK.	DATE 3-13-92	JOB DESCRIPTION 15 pilasters for wrought iron fence	
			PERMIT VALUE 1500.00	

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS



<input type="checkbox"/> ARCH <input type="checkbox"/> ENGR.	White: Building Insp. / Yellow: Assessor / Pink: Permittee I certify the information hereon is complete and correct		
MAILING ADDRESS	CITY	ZIP	
TEL. NO.	STATE LIC. NO. & TYPE	(PRINT) PROPERTY OWNER	(SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT
			DATE

CITY OF GARDEN GROVE, CALIFORNIA

Development Services Department

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

Address : 7421 CHAPMAN AVE
 Parcel No: 13165133 Type: B7

Owner : DAIWA
 Address : _____
 Phone: _____

Architect: _____
 Address : _____

LIC: _____ EXP: _____ PH: _____

Suite: _____ PERMIT NO.: 15087
 Date : 10/05/92 Insp Dist : ZB

Applicant: DONLEE DEVELOPMENT CORPORA
 Address : 8951 PEBBLE BEACH
 WESTMINSTER CA 92683
 Phone: _____

Engineer: _____
 Address : _____

LIC: _____ EXP: _____ PH: _____

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 1137445 Expiration Date: 6-1-93

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

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

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

[Signature] 10-5-92
PERMITTEE/CONTRACTOR DATE

Proposed Work: SPRAY BOOTH

Value . 4000
 Floor Area: 0

Permit	1	63.82
Issuance	1	10.00
PLANCHECK FEE PAID 8-11-9		
GENL PLAN/CULT ART	1	9.00
Pln.Ret.Lgr.Size	10	10.00

BUSINESS TAX CERTIFICATE INFORMATION

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

[Signature] 10-5-92
PERMITTEE/CONTRACTOR OR AUTHORIZED AGENT DATE

BUSINESS TAX CERTIFICATE NO. _____ EXPIRATION DATE _____

I certify that I am exempt from Section 7031.5 of the Business and Professions Code, Division 3, Chapter 9, Contractors' License Law, under the following Section: Owner: Section 7044 Minor work under \$200; Section 7048 Employee working for wages only; Section 7053 Other: _____

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

B PER 63.82
 PL RET 10.00
 MISC. 9.00
 ISS 10.00

0N3430A10-05'92 CHECK 92.82

INSPECTION RECORD

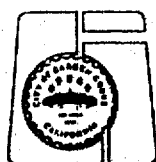
APPROVAL DATE INSPECTOR

- Pre Inspect _____
- Foundation _____
- Concrete Floor _____
- Reinforcing _____
- Masonry _____
- Roof Shtg _____
- Rough Frame _____
- Insul / Energy _____
- Brywall _____
- Lath _____
- Plas.Brown Ct. _____
- Landscaping _____
- Pre Gunite _____
- Pre Deck _____
- Pre Plaster _____
- Planning Final _____
- Log Final 10/2/92 *[Signature]*
- Utility Notified _____

3200	9.00
3226 BLDG PERM &	63.82
3517 ISSUANCE FEE	10.00
3542 PLAN RETENTI	10.00

Authorized by: *[Signature]* TOTAL FEES 92.82

Inspection Requests
 741-5332 General Information
 741-5307



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

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

CITY OF GARDEN GROVE, CALIFORNIA

Development Services Department

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

Address : 7421 CHAPMAN AVE
 Parcel No: 1316513# Type: B16

Owner : BAIWA
 Address: _____
 Phone: _____

Architect: _____
 Address : _____

LIC: _____ EXP: _____ PH: _____

Suite: _____ PERMIT NO.: 14715
 Date : 09/09/92 Insp Dist :

Applicant: PACIFIC FIRE SUPPRESSION
 Address : 7491 TALBERT AVE #210
 HUNTINGTON BEACH CA 92648
 Phone: 375-2471

Engineer: _____
 Address : _____

LIC: _____ EXP: _____ PH: _____

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. WC 122667 Expiration Date 6-1-93

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 hereunder.

[Signature] 7-9-92
APPLICANT SIGNATURE DATE

Proposed Work: FIRE SPRINKLERS IN TENANT IMPROVEMENT

Value : 17000
 Floor Area: 11000

Permit	1	182.06
Issuance	1	10.00

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 423418 and Classification 516 are in full force and effect.

[Signature] 7-7-92
SIGNATURE CONTRACTOR OR AUTHORIZED AGENT DATE

BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE

I certify that I am exempt from Section 7031.5 of the Business and 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: _____

OWNER PROPERTY OWNER SIGNATURE PROPERTY OWNER OR AUTHORIZED AGENT DATE

PER 182.06
 ISS 10.00
 ON 179A 9-09-92 CHECK 192.06

INSPECTION RECORD

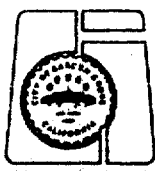
APPROVAL	DATE	INSPECTOR
Pre Inspect	_____	_____
Foundation	_____	_____
Concrete Floor	_____	_____
Reinforcing	_____	_____
Masonry	_____	_____
Roof Shtg	_____	_____
Wough Frame	_____	_____
Insul / Energy	_____	_____
Brwwall	_____	_____
Bath	_____	_____
Plac. Brown Ct.	_____	_____
Landscaping	_____	_____
Pre Sunite	_____	_____
Pre Deck	_____	_____
Pre Plaster	_____	_____
Planning Final	_____	_____
Permit Final	<u>10-8-92</u>	<i>[Signature]</i>
Utility Notified	_____	_____

3226 BLDG PERM \$ 182.06
 3517 ISSUANCE FEE 10.00

Authorized by: *[Signature]* TOTAL FEES 192.06

Inspection Requests

Call for information 741-5367



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, CALIFORNIA

Development Services Department

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

PERMIT NO. : 14420
Type : E
Date Issued : 08/19/92
Title :
Desc :
Location : 7421 CHAPMAN AVE
Suite :
Parcel number : 13165130
Occupancy :
Applicant : BOB CORPORATION
 11743 CARDINAL CIR
 GARDEN GROVE CA 92641

Inspector area: ZE

Owner: DAIWA CORP.

Phone Number :

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. UC0231 Expiration Date 11-93
 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 a certificate, the applicant for the permit should become subject to the Worker's Compensation provisions of this code, he shall 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 property damage resulting from work performed hereunder.
[Signature] 8/19/92
PERMITTEE SIGNATURE DATE

Sub-Panels 1 or 3 Phase	2	22.00
Outlets 1-20	20	15.00
Outlets over 20	31	13.95
Fixtures 1-20	20	10.00
Fixtures over-20	119	53.55
Power Apparatus 1 - 10 @ 75 KVA	10	75.00
PLAN CHECK	1	30.00
GENL. PLAN/CULT ART	1	143.00
Issuance	1	3.00
		15.00

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 215622
 and Classification E-10 is in full force and effect.
[Signature] 8/19/92
CONTRACTOR SIGNATURE DATE

E PER 219.50
 B CHECK 143.00
 MISC. 3.00
 ISS 15.00

OR 81A 8-19'92 CHECK 380.90

INSPECTION RECORD

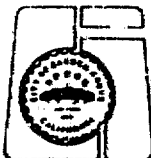
APPROVAL	DATE	INSPECTOR
Underground		
Conduit		
Wiring - Rough		
Heater		
Fixtures & Trim		
Motors		
Water		
Other		

3200 229.55
 3227 ELECTRICAL P 135.95
 3517 ISSUANCE FEE 15.00

Authorized by: [Signature] TOTAL FEES 380.50

Inspection Requests

741-5332
 General Information
 741-5307



If work is not started within 180 days from date of issue or if abandoned for more than 180 days, this permit will be null and void.
 A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

FINAL 9-22-92 [Signature]
 Utility Notified

CITY OF GARDEN GROVE, CALIFORNIA

Development Services Department

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

Address : 7421 CHAPMAN AVE
Parcel No: 13165130 Type: B7

Suite: PERMIT NO.: 14244
Date : 08/05/92 Insp Dist : 2B

Owner : DAIWA
Address: _____
Phone: _____

Applicant: P M BROWN
Address : 18383 ENTERPRISE
HUNTINGTON BEACH CA 92648
Phone: 847-1976

Architect: Kirk Adams
Address : 1247 N. GILSON ST
Orange Ca 92667
LIC: 0129126 EXP: 1-31-93 PH: 639-3892

Engineer: _____
Address : _____
LIC: _____ EXP: _____ PH: _____

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. _____ Expiration Date _____
 I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.
NOTE: If, after making such certificate, the applicant for the permit should become subject to the Worker's Compensation provisions of this code, he shall forthwith comply with the provisions of Section 3700 or his permit shall be deemed revoked.
 I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed relevant to this permit.

Proposed Work: TENANT IMPROVEMENT

Value	:	70000	
Floor Area:	:	0	
Permit Issuance		1	562.62
PLANCHECK FEE PAID 5-03-92		1	10.00
ADDL PLANCHECK FEE		1	256.69
Pln. Ret. Lgr. Size		20	20.00
GFNL PLAN/CULT ART		1	124.50

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor License No. 333859 and Classification BE is in full force and effect.

PROPERTY OWNER (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE 8-5-92

B PER 562.62
B CHEK 256.69
PL RET 20.00
MISC. 124.50
ISS 10.00
ON 719A 8-05'92 CHECK 973.81

INSPECTION RECORD

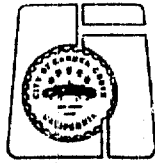
APPROVAL	DATE	INSPECTOR
Pre Inspect	_____	_____
Foundation	_____	_____
Concrete Floor	_____	_____
Reinforcing	_____	_____
Masonry	_____	_____
Roof Shtg	_____	_____
Rough Frame	_____	_____
Insul / Energy	_____	_____
Drywall	_____	_____
Lath	_____	_____
Plas. Brown Ct.	_____	_____
Landscaping	_____	_____
Pre Gunite	_____	_____
Pre Deck	_____	_____
Pre Plaster	_____	_____
Planning Final	_____	_____
Bldg Final	<u>10/6/92</u>	<u>[Signature]</u>
Utility Notified	_____	_____

3200	381.19
3225 BLDG PERM &	562.62
3517 ISSUANCE FEE	10.00
3542 PLAN RETENTI	20.00

Authorized by: [Signature] TOTAL FEES 973.81

Inspection Requests
741-5332
General Information
741-5307

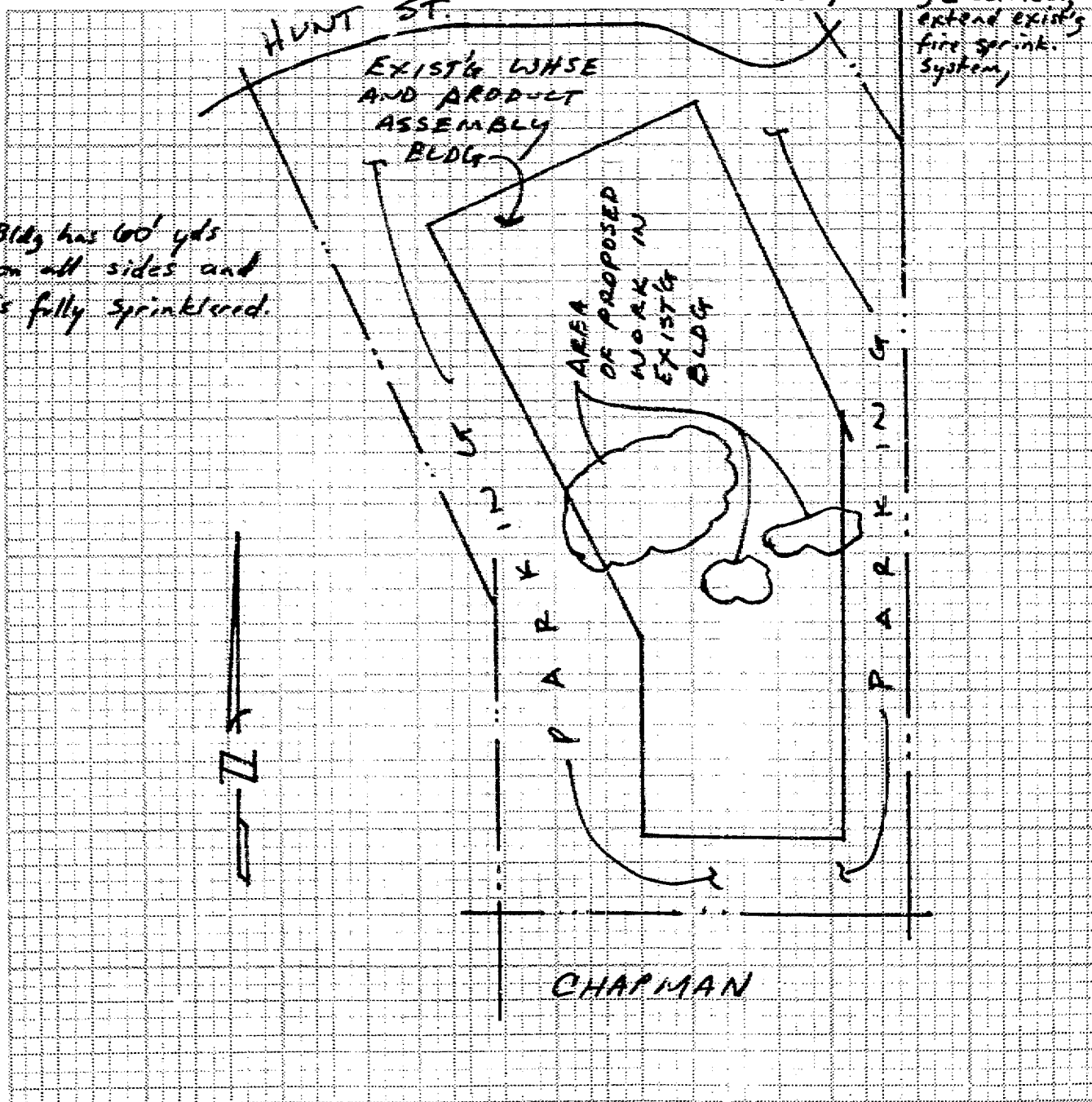
If work is not started within 180 days from date of issue or if abandoned for more than 180 days, this permit will be null and void.
A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.



1. INSPECTOR

PLANNING ACTION	USE ZONE <i>RX</i>	LOT SIZE	JOB ADDRESS	PERMIT NO.
LAND USE APPROVED BY <i>[Signature]</i>	CATEL <i>3/5/92</i>	LOT COVERAGE	7421 Chapman	12244
REMARKS:	OCCU-PANCY <i>B2</i>	% INCREASE	AMERICAN PARCEL NO.	
	TYPE <i>VN*</i>	DATE	15165130	
	FIRE SPRINK <i>Y</i>		(PLEASE CHECK ONE OR MORE)	
			<input type="checkbox"/> NEW	<input type="checkbox"/> ADDITION
			<input checked="" type="checkbox"/> ALTERNATION	<input type="checkbox"/> REPAIR
			<input type="checkbox"/> MOVE	<input type="checkbox"/> DEMOLISH
			JOB DESCRIPTION	PERMIT VALUE
			create encl. rm. in exist. bldg. for repair of sport's goods, Enclose underside of exist'g mezz add exit corridor T-bar ceiling	70,000

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS and driveway clg. @ corridor



<input type="checkbox"/> ARCH. <input checked="" type="checkbox"/> ENGR. <i>KIRK M. ADAMS</i>	Write: Building Insp. / Yellow: Assessor / Pink: Permittee I certify the information hereon is complete and correct
MAILING ADDRESS 1247 N. GOSSELL ST ORANGE CA 92667	(PRINT) PROPERTY OWNER <i>PAULA COPE</i>
TEL. NO. 714 634-3892	STATE LIC. NO. & TYPE C-23126
(SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT <i>[Signature]</i>	DATE <i>0522</i>