



**CITY OF GARDEN GROVE
BUILDING SERVICES**

13352 EUCLID ST

PERMIT#:12-1134

ISSUED:6/1/12

General Info : 714-741-5307

Inspection Requests : 714-741-5332

Owner RHEE,STEVE K		Telephone	Zip 92843	Building Address 13352 EUCLID ST														
Address 13352 EUCLID ST		City Garden Grove	State CA	Suite/Unit/Building														
Applicant RHEE,STEVE K		Telephone	Zip 92843	TYPE Electrical Permit														
Address 13352 EUCLID ST		City Garden Grove	State CA	ISSUED BY Joanne Chung														
Floor Area(sq. ft.)		Residential/Commercial Residential		Inspector Dist. P14	Parcel Number 10010143													
				LOT	TRACT													
				Valuation \$0.00														
Job Description upgrade electrical panel				Final Inspector's Signature <i>[Signature]</i> Date <u>7-3-12</u>														
<p align="center">DECLARATION</p> <p>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.</p>																		
<p>X Applicant's Signature <i>[Signature]</i></p> <p>Print Name <u>Steve Rhee</u> Date <u>6-1-12</u></p>				<table border="1"> <tr> <td rowspan="4" style="writing-mode: vertical-rl; text-orientation: mixed;">F E E S</td> <td>Description</td> <td>Quantity</td> <td>Amount</td> </tr> <tr> <td>Service 6V ma, 200 amps max</td> <td>1</td> <td>\$30.00</td> </tr> <tr> <td>Issuance Fee</td> <td>1</td> <td>\$35.00</td> </tr> <tr> <td>TOTAL</td> <td></td> <td>\$65.00</td> </tr> </table>		F E E S	Description	Quantity	Amount	Service 6V ma, 200 amps max	1	\$30.00	Issuance Fee	1	\$35.00	TOTAL		\$65.00
F E E S	Description	Quantity	Amount															
	Service 6V ma, 200 amps max	1	\$30.00															
	Issuance Fee	1	\$35.00															
	TOTAL		\$65.00															

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: ELEC

ORIGINAL

Director

CITY OF GARDEN GROVE

ZONING AND BUILDING

Use Zone **B-4** Variance No. **3315**

Map No. Main Use Acc. Use

Set Back - C/L ST C/L ST

Side Yard Rt Projection

Side Yard Lt Projection

Rear Yard No Parking Sp. Req'd.

Zoning Approved By **BCA** Date **1-25-56**

Group **F** Type **II** Plan Ck. **BCA**

Remarks: **Bldg located in 1947**

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location		
Reinforcing		
Roof Shig.		
Rough Frame		
Lath or Drywall		
Plas. Brown Ct.		
Utility Release	2-3-58	To Godan

Remarks: **#7 See Book sheet.**

FEES

Building Permit	\$ 6.00	Rec'd By H.W.
Plan Check	\$ -	Rec'd By

Remarks:

Permit Authorized By Date

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

Permit No.

6

Job Address **13352 VERANO**

Lot No. Tract No. Blk. No.

29- Please Attach Notes & Bounds (2 Copies)

Owner **DONALD A. GARY**

Owner's Address **12822 VALENCIA WAY-G.G.**

Description of Work **NEW**

Use of Building **SALES ROOM** Sales of items of considerable value.

Area of Building **3089** Valuation \$ **1000.00**

Area of Engr. **OWNER** Address

Contractor Address

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

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

Signature of Permittee **Donald A. Gary**

Address

VALIDATION BY CASHIER

Plan Check Bldg. Pt.

RELOCATION

PRESENT BLDG. ADDRESS

MOVING CONTRACTOR ADDRESS

INSPECTION FEE RECEIPT NUMBER

SURETY DATE REC'D REC'D BY

CASH DEP. DATE REC'D REC'D BY

RELOCATION AUTHORIZED BY DATE

BUILDING PERMIT

Department of Building
B. C. Adams
Director

CITY OF
GARDEN GROVE

ZONING AND BUILDING

Use Zone R-4 Variance No. 3315
 Map No. Main Use Acc. Use
 Set Back - C/L ST C/L ST
 Side Yard Rt Projection
 Side Yard Lt Projection
 Rear Yard No Parking Sp. Req'd.
 Zoning Approved By BCA Date 1-25-56
 Group F Type IV Plan Ck. BCA
 Remarks: Bldg. located in rear

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location		
Reinforcing		
Roof Shtg.		
Rough Frame		
Lath or Drywall		
Plas. Brown Ct.		
Utility Release	<u>2-3-56</u>	<u>To J. J. J.</u>
Remarks:	<u>See Book sheets</u>	

FEES

Building Permit	\$ <u>6.00</u>	Rec'd By <u>D.W.</u>
Plan Check	\$ <u>—</u>	Rec'd By
Remarks:		
Permit Authorized By		Date

For Applicant to Fill In
Use Ink

Permit No.

Job Address 13352 VERANO 6
 Lot No. Tract No. Blk. No.
 Please Attach Notes & Bounds (2 Copies)
 Owner Donald A. GARY
 Owner's Address 12222 VALENCIA WAY-G.G.
 Description of Work NEW
 Use of Building SLEEPING ROOM Sites of memb. suitable small IS.
 Area of Building 306 sq Valuation \$ 1000.00
 Area of Esgt. Owner Address
 Contractor Address

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

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

Signature of Permittee Donald A. Gary
 Address

VALIDATION BY CASHIER

Plan Check
 Bldg. Pt.

RELOCATION

PRESENT BLDG. ADDRESS	
MOVING CONTRACTOR ADDRESS	
INSPECTION FEE	RECEIPT NUMBER
SURETY	DATE REC'D BY
CASH DEP.	DATE REC'D BY
RELOCATION AUTHORIZED BY	DATE

ELECTRICAL PERMIT

DEPARTMENT OF BUILDING AND SAFETY

GARDEN GROVE, CALIFORNIA

PHONE: 537-4200

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

JOB ADDRESS: *13352 Euclid* ELECTRIC PERMIT NO: **032030 A**

OWNER: *Henry Samartian* PHONE: *7873016*

OWNER'S ADDRESS: *Same* CITY: _____

NEW BUILDING OR ADDITION - AREA: _____ SO. FT. EXISTING BUILT UP REMODEL AREA: _____ SO. FT. OCCUPANCY GROUP: *Residential* USE OF BUILDING AND OR NUMBER OF UNITS: _____

ELECTRICAL CONTRACTOR: *Charles Kaines Electric* PHONE: _____

ADDRESS: *Same* CITY: _____ STATE LICENSE NO.: _____

VALIDATION: *SDV 20-69 11 001 M*****4.00*

I HAVE CAREFULLY READ THE ABOVE APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF STATE AND LOCAL LAWS COVERING THIS TYPE OF CONSTRUCTION WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. NO PERSON SHALL BE EMPLOYED IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA.
SIGNATURE OF PERMITTEE: *Henry Samartian* DATE: *11-18-68*

BRANCH CIRCUIT PANEL: CIRCUITRY

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

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Underground		
Conduit		
Wiring		
Ceiling Heat Cable		
Fixtures		
Service		
Final	<i>11-26-68</i>	<i>[Signature]</i>
Utility Notified	<i>11-27-68</i>	<i>[Signature]</i>
SINGLE PHASE SERVICE SIZE	AMPS. _____ WIRE _____	RIG CONDUIT _____
THREE PHASE SERVICE SIZE	<input type="checkbox"/> 3 WIRE <input type="checkbox"/> 4 WIRE	
	<i>100</i> AMPS. <i>#1</i> WIRE <i>1 1/2"</i> RIG CONDUIT	

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

ISSUANCE OF PERMIT: 2.00

TOTAL FEE: *4.00*

INSPECTOR: _____ PERMIT AUTHORIZED BY: *[Signature]* DATE: *11-25-68*

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

ELECTRICAL PERMIT

DEVELOPMENT SERVICES DEPARTMENT

GARDEN GROVE, CALIF.

638-6771

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

LOT NO.	TRACT NO.	NUMBER	EACH	FEE
9	1253			
IF NOT LISTED BELOW SEE CODE				
Residential (I & H) sq. ft.			.015	
Garage, Resid. (J) sq. ft.			.01	
Service Meter, Single Phase			5.00	
Service Meter, Three Phase			5.00	
Temporary Power Pole			5.00	
Pole, Power, Light, etc.			3.00	
Sub-Panels 1 ϕ			2.00	
Sub-Panels 3 ϕ			2.00	
Outlets			.20	
Fixtures	2		.20	40
Fixtures, Merc. Quartz, etc.			1.00	
Heater—Not Over 1650 W			2.00	
Washer			2.00	
Dryer			2.00	
Hot Water Heaters			2.00	
Dishwasher			2.00	
Domestic Range or Oven			2.00	
Power Apparatus—H.P., K.W. or K.V.A. Motors, Transformers, etc.				
Not Over 1 each			1.50	
Over 1, Not Over 10 each			3.00	
Over 10, Not Over 30 each			5.00	
2 BALLAST 2 PAR 38 FDS				
Time Clock			1.00	
Sign	1		7.50	750
Sign Hookup	1		2.00	200
				990
ISSUANCE OF PERMIT				3 09

ADDRESS **13352 EULLIN** ELECTRIC PERMIT NO. **079590A**

OWNER **MYUNG HEE HOU** PHONE **537 3014**

OWNER'S ADDRESS **8 4810 Westminster Santa Ana** CITY

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

ELECTRICAL CONTRACTOR **Western Neon** PHONE **549 0746**

ADDRESS **1412 BORCHARD S.A.** CITY STATE LIC. NO.

VALIDATION
AUG 15-75 11 369 AM *12.90**

I HAVE CAREFULLY READ THE ABOVE APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF STATE AND LOCAL LAWS COVERING THIS TYPE OF CONSTRUCTION WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. NO PERSON SHALL BE EMPLOYED IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA.
SIGNATURE OF PERMITTEE **X A. D. DUTCHELL** DATE **8-12-75**

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

INSPECTION RECORD		
APPROVAL	DATE	INSPECTOR
Underground		
Conduit		
Wiring		
Heater		
Fixtures		
Ufer		
Service		
FINAL	10-10-75	<i>[Signature]</i>
Utility Notified		

PLAN CHECK PERMIT FEE \$ **12 90**

SINGLE PHASE SERVICE SIZE UG OH

AMPS. _____ VOLTS _____ RIG. CONDUIT _____

THREE PHASE SERVICE SIZE 3 WIRE 4 WIRE UG OH

AMPS. _____ VOLTS _____ RIG. CONDUIT _____

I. INSPECTOR **ERB** PERMIT AUTHORIZED BY **ERB** DATE **8-15-75**

BUILDING PERMIT NO. _____ SIGN PERMIT NO. **79589A** VENT. HEAT. AIR COND. PERMIT NO. _____

BUILDING PERMIT

DEVELOPMENT SERVICES DEPT., GARDEN GROVE 638-6771

FIRE ZONE	OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.	
USE ZONE RC-0			FRONT	LEFT	RIGHT	REAR
PARK SPACES REQUIRED	EAVE PROJ.					
	SETBACKS		10	6		

PLANNING ACTION *Plans*

LAND USE APPROVED BY *D. Gundersman* DATE *7-27-75*

FEES AND BONDS		AMOUNT	REQ'D	PROVIDED
PARCEL MAP				
R/W DEDICATION				
STREET BOND				
WATER BOND				
WATER ASSMT. FEE				
FIRE HYDRANT FEE				
PARKWAY TREE FEE				
PARK & REC. FEE (DIST.)				
DRAIN ASSMT. FEE (DIST.)				

REMARKS:

G.G. SANT. DIS. FEE REQ'D	O.C. SANT. DIS. FEE REQ'D	DATE	INITIAL
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INSPECTION RECORD		
APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
REINFORCING		
ROOF SHTG.		
ROUGH FRAME		
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL <i>Per Photo</i>	<i>9-8-75</i>	<i>ued</i>
UTILITY RELEASE		

VALUATION NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT., ETC. \$ *800.00*

PLAN CHECK \$ *5.20* BUILDING PERMIT \$ *8.00*

PERMIT AUTHORIZED BY *[Signature]* DATE *7-22-75*

1 ORIGINAL

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

ADDRESS **13352 EUCLID, G.G.** PERMIT NO. **079097A**

LOT NO. TRACT NO. BLK. NO.

OWNER **MYUNG-HEE HOU** TEL. NO. **638-1962**

MAILING ADDRESS **4810 WESTMINSTER AVE. SANTA ANA, CA. 92703** CITY ZIP

SEARCH **ADAMS** STATE LIC. NO. **10183** TEL. NO. **539-1163** CITY ZIP

MAILING ADDRESS **12763 BROOKHURST G.G. CA** CITY ZIP

CONTRACTOR **Owner** LIC. NO. TEL. NO. CITY ZIP

MAILING ADDRESS CITY ZIP

VALIDATION

JUL 22-75 11 167 M *****5.20

JUL 22-75 11 168 M *****8.00

PRESENT BLDG. USE PROPOSED BLDG. USE

DESCRIBE WORK TO BE DONE **PLACEMENT OF A NEW PARTITION**

NEW ADD'N. ALTER. REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) **48 LF** NO. OF STORIES NO. OF DWELLING UNITS

I certify that I have read this application and state that the above information is correct. I agree to comply to all City Ordinances and State laws relating to building construction. I certify that in the performance of the above work I shall not employ any person in violation of the Labor Code of California relating to Workman's Compensation Insurance. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed relevant to this permit.

CONTRACTORS SIGN BELOW

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

Contractor _____ By _____ Authorized Agent _____ Date _____

OWNER-BUILDER SIGN BELOW

I certify that I am exempt from the provisions of Ch. 9, Div. 3, B and P. Code (Contractor's License Law) because (check one):

I am the owner of the above property and will personally perform the above work.

I am the owner of the above property and I will contract to have all of the above work performed by licensed contractors.

I am the owner of the above property and will employ persons to perform the above work with wages as their sole compensation. I will furnish insurance for my employees as required by the Labor Code of California.

Owner's Signature *[Signature]* Authorized Agent _____ Date _____

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

A \$10.00 FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

RELOCATION

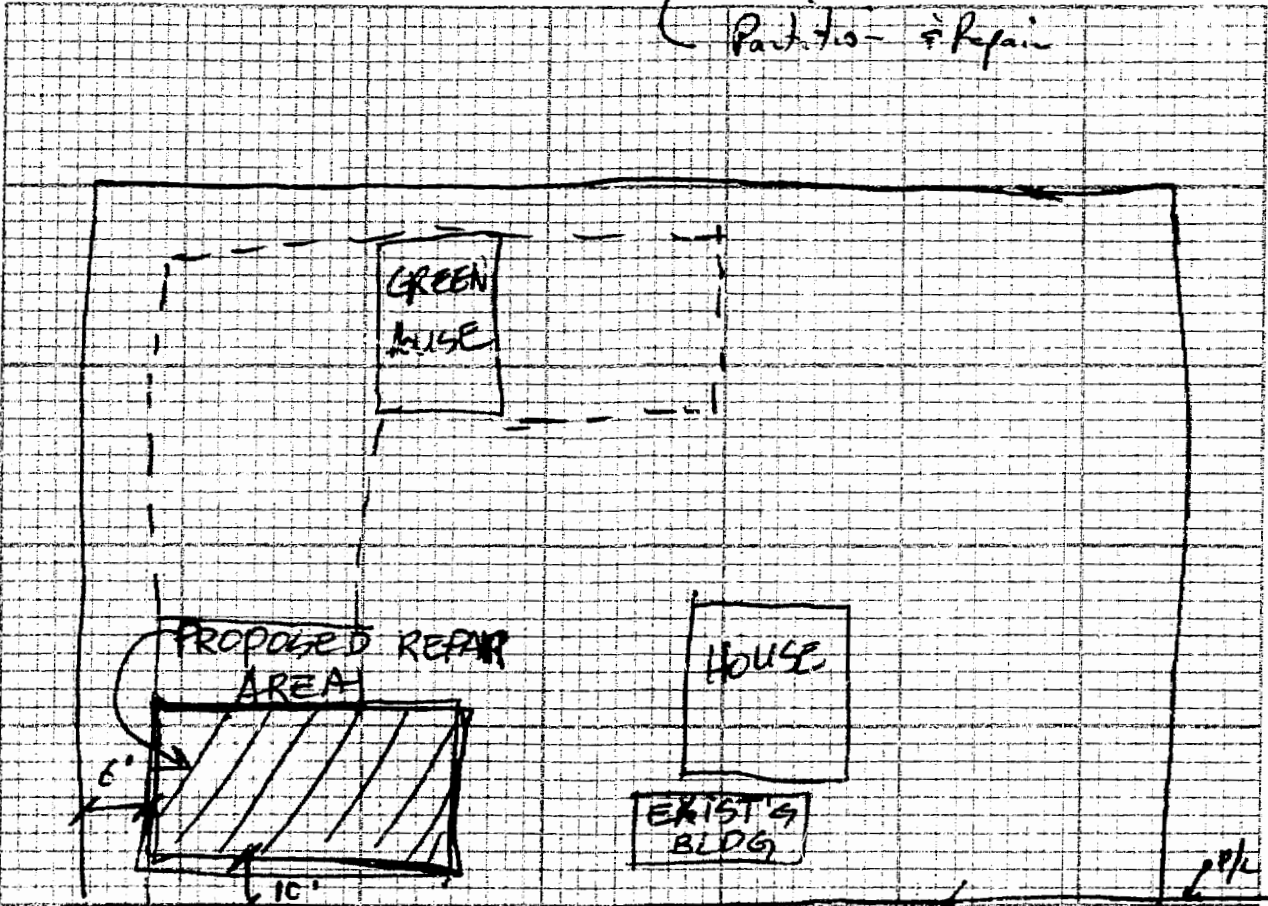
PRESENT BLDG. ADDRESS MOVING CONTRACTOR ADDRESS

BUILDING PERMIT PLOT PLAN
Development Services Department
CITY OF GARDEN GROVE

JOB ADDRESS 13352 Euclid			PERMIT NO. 79097A
ASSESSORS PARCEL NO. 100-103-43	LOT	BLOCK	TRACT
PLOT PLAN APPROVED BY			JOB DESCRIPTION (PLEASE CHECK) <input type="checkbox"/> New <input checked="" type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish
OWNER MYUNG-HEE HOU	DATE 7-22-75	USE Wholesale sale of Retail Nursery	PERMIT VALUE 500.00

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

Part to Repair



Euclid ST
13352 Euclid st G.G.

INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.	
		FRONT	LEFT	RIGHT	REAR
USE ZONE					
FIRE ZONE	Eav Prot.				
	Setbacks				
PLANNING ACTION	PLANS FILE				
LAND USE APPROVED BY					DATE
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					
BLDG. PLAN CHECK		520	17.95		
BLDG. PERMIT FEE		226	26.90		
ISSUANCE		535	6-		
VALUATION		TOTAL FEES		50.85	
• 2500 ⁰⁰				DATE	
AUTHORIZED BY				DATE	
<i>[Signature]</i>				10-31-78	

APPROVAL	DATE	INSPECTOR
FOUNDATION & <i>Note</i>	1-16-79	<i>[Signature]</i>
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	1-30-79	<i>[Signature]</i>
UTILITY RELEASE		
IDENTIFICATION CODE		

WORKMEN'S COMPENSATION REQUIREMENTS

I certify that I have read this application and state that the above information is correct. I agree to comply to all City Ordinances and State laws relating to building construction. I certify that in the performance of the above work I shall not employ any person in violation of the Labor Code of California relating to Workman's Compensation Insurance. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed relevant to this permit.

CONTRACTORS SIGN BELOW

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

W.C. # _____ EXP. DATE _____

By _____ DATE _____

CONTRACTOR _____ AUTHORIZED AGENT _____

OWNER-BUILDER SIGN BELOW

I certify that I am exempt from the provisions of Ch. 9, Div. 3, B and P Code (Contractor's License Law) because (check one):

"I am the owner of the above property and will personally perform the above work. I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workmen's compensation laws of the State of California.

I am the owner of the above property and I will contract to have all of the above work performed by licensed contractors.

W.C. # _____ EXP. DATE _____

I am the owner of the above property and will employ persons to perform the above work with wages as their sole compensation. I will furnish insurance for my employees as required by the Labor Code of California.

W.C. # _____ EXP. DATE _____

By *[Signature]* DATE _____

OWNER'S SIGNATURE _____ AUTHORIZED AGENT _____ DATE _____

ADDRESS	PERMIT NO.
13352 Euclid St	05289A
LOT NO.	TRACT NO.
OWNER	TEL. NO.
PETER Rhee	638-5115
MAILING ADDRESS	CITY ZIP
13352 Euclid St Garden Grove	
<input type="checkbox"/> ARCH	
<input type="checkbox"/> ENGR.	
MAILING ADDRESS	CITY ZIP
TEL. NO.	STATE LIC. NO. & TYPE
VALIDATION	
	091M 6.00
	090M 17.95
10/31/78	089M 26.90
CONTRACTOR	
OWNER	
MAILING ADDRESS	CITY ZIP
TEL. NO.	STATE LIC. NO.
PRESENT BLDG. USE	PROPOSED BLDG. USE
Con	Con.
DESCRIBE WORK TO BE DONE	
ALTERATION TO EXIST. SALES BLDG. (NEW FRONT)	
NEW <input type="checkbox"/> ADD'N <input type="checkbox"/> ALTER. <input checked="" type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>	
FLOOR AREA (SQ. FT.)	NO. OF STORIES
NO. OF DWELLING UNITS	
If work is not started within 120 days from date of issue or if abandoned for more than 120 days, this permit will be null and void.	
A FEE MAY BE CHARGED FOR REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.	
RELOCATION	
PRESENT BLDG. ADDRESS	
MOVING CONTRACTOR	
ADDRESS	