

# BUILDING PERMIT

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

## ZONING AND BUILDING

Use Zone	Main Use	Acc. Use	Var. No.
R-1	5	S	
St. Set Back	PL 20	PL	
Side Yard	10	Projection	2
Side Yard	5	Projection	2
Rear Yard	5	No Parking Sp. Req'd.	2
Zoning Approved By	ELM	Date	2-11-60
Group	I-J	Type	II
		Plan Ck.	ELM
Remarks:	PLANS		

## INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location	2-26-60	Jan
Reinforcing	3-7-60	VEE
Roof Shtg.	3-14-60	VEE
Rough Frame	3-23-60	VEE
Lath or Drywall	2-25-60	VEE
Plas. Brown Ct.	5-11-60	Jan
Other		
Land Use		
Final	11-6-60	Jan
Utility Release	11-17-60	VEE

## FEES

Plan Check	\$20.50	Building Permit	\$41.00
Bond	\$	Expiration Date	

Permit Authorized by ELM Date 2-11-60

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

For Applicant to Fill in (Use Ink)

1

Job	11221	Permit No.	9999
Address	Barclay		
Lot No.	17	Tract No.	2383
		Bk No.	
Please Attach Meter & Bounds (2 Copies)			
Owner	Feature Builders Inc.		
Owner's Address	Box 65 Orange		
Description of Work	New <input checked="" type="checkbox"/>	Add'n <input type="checkbox"/>	Remodel <input type="checkbox"/>
		Relocate <input type="checkbox"/>	
Use of Building	Dwelling		
Area of Building	7000 sq ft	Valuation \$	21,000.00

## Validation

Arch. or Engr.	Address
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Contractor OWNER Phone

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 Anthony F. Fedala Date 2/11/60

Address Box 65 Orange Lic. No.

**RELOCATION**

PRESENT BLDG. ADDRESS

MOVING CONTRACTOR ADDRESS

**PUBLIC WORKS**

Street Address OK by RD. W. 2-10-60

Record of Survey not

R/W Dedication not

Bonds not

Encroachment Permit not

Remarks

# PLOT PLAN

Department of Building  
B. C. Adams  
Director

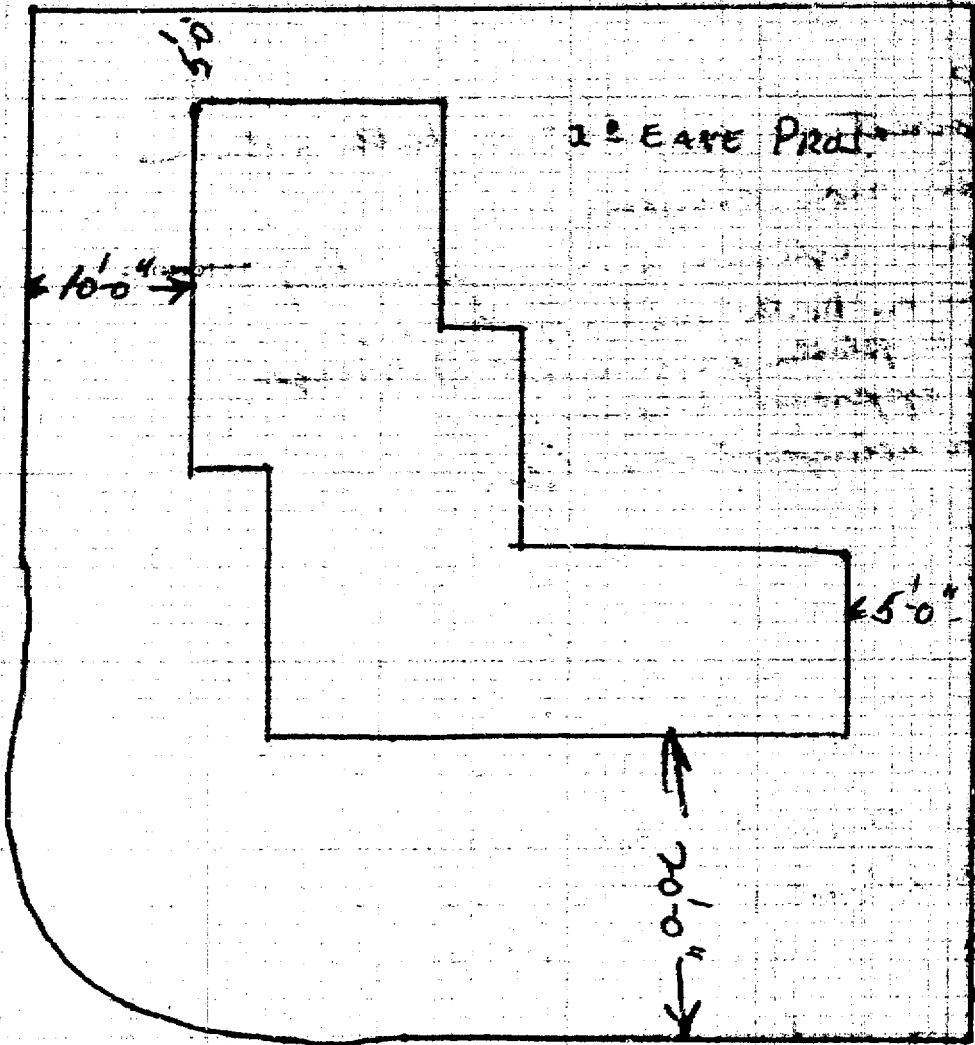
CITY OF  
GARDEN GROVE

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

Job Address	11221 Barclay	Permit Number	9999		
Lot	17	Tract	2383	Blk.	

75.01

Barclay Drive



GAMBIE AVENUE

I certify the information furnished hereon is complete and correct. By *Cathy F. Johnson*

Routing: 81 Building Inspector

82 Office File

83 Corner

APPLICATION FOR A  
**BUILDING PERMIT**

DEPARTMENT OF BUILDING, GARDEN GROVE, CALIF.

**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.

CODE **5-3-0** INFORMATION PROVIDED BY BLDG. DEPT.  
 EXTERIOR WALL MATERIAL ROOF FRAMING MATERIAL  
 PARTITIONING MATERIAL ROOF COVERING MATERIAL  
 LOT WIDTH **75** LOT DEPTH **185** NO. OF EXISTING BLDGS. ON LOT **1**  
 USE ZONE **R-1** FIRE ZONE OCCUPANCY TYPE  
 REQ'D SET BACKS **N/A** FRONT RIGHT SIDE LEFT SIDE REAR  
 SITE PLAN NO. USE PERMIT OR VARIANCE NO. PARK SPACES REQ'D **2**  
 Zoning Approved By **LRM** Date **10/31/66**  
 Remarks: **PLAN ATTACHED**

Job Address **11221 Barclay G.L.** Permit No. **019064 A**  
 Lot No. **17E** Tract No. **2383** Blk. No. **---**  
 CONTRACTOR **Raymond Delgado** STATE LIC. NO. **233188 - B-1**  
 MAILING ADDRESS **11602 STEPHANIE LANE** TEL. NO. **530-1422**  
 ARCH. STATE LIC. NO.  
 ENGR. TEL. NO.  
 OWNER **Ed Scott** TEL. NO. **539-0371**  
 MAILING ADDRESS **11221 Barclay GARDEN GROVE**  
 NEW  ADD'N  ALTER  REPAIR  DEMO: SH

**PUBLIC WORKS**  
 Street Address **OK** By **JA**  
 REQUIRED PROVIDED  
 Record of Survey **has**  
 R/W Dedication **has**  
 Bonds **has**  
 Encroachment Permit **has**  
 Remarks

FLOOR AREA (SQ. FT.) **64** NO. OF STORIES NO. OF DWELLING UNITS  
 PRESENT BLDG. USE PROPOSED BLDG. USE  
 Validation **10/31-66 11 045 M\*\*\*\*3.00**  
 DESCRIBE WORK TO BE DONE **ENCLOSE PORCH**

**INSPECTION RECORD**

APPROVAL	DATE	INSPECTOR
Foundation and Location	} existing	
Reinforcing		
Roof Shng.		
Rough Frame		<b>11-12-66</b>
Lath or Drywall		
Plas. Brown Ct.		
Other		
Land Use		
Final	<b>12-9-66</b>	<b>Heller</b>
Utility Release		

OWNER-BUILDER PERMIT RESTRICTIONS: An owner-builder must reside within the building for which this permit is issued, (accessory buildings excepted). Said building may not contain more than 3 dwelling units. Otherwise, this permit can be issued only to a contractor licensed in the State of California and a business license must be procured from the City of Garden Grove.

WORKMEN'S COMPENSATION INSURANCE REQUIREMENTS: A certificate or duplicate thereof of workmen's compensation insurance must be on file with the City of Garden Grove prior to the issuance of this permit unless: 1. This permit is for less than \$100 valuation or, 2. The applicant qualifies as an owner-builder and signs the statement below -

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 California.

SIGNATURE \_\_\_\_\_  
 (or) CERTIFICATE ON FILE \_\_\_\_\_

VALUATION **\$160.00** (NOTE: INCLUDE LABOR, MATERIAL, WIRING, PLUMB, HEAT, ETC.)  
**FEES**  
 Building Permit **\$ NONE**  
 Bond **\$ 3.00**  
 Expiration Date  
 Permit Authorized By **ELM** Date **10-31-66**

APPLICANT'S CERTIFICATION: I have carefully read and examined the above application and find the same to be true and correct. All provisions of the laws and ordinances of the City of Garden Grove and State of California will be complied with whether specified herein or not.

Signature of Permittee **Raymond Delgado** Date **10/31/66** BUS. LIC. NO. \_\_\_\_\_  
 Address **11602 Stephanie G.L.**  
**RELOCATION**  
 PRESENT BLDG. ADDRESS  
 MOVING CONTRACTOR ADDRESS

# PLOT PLAN

Department of Building

CITY OF  
GARDEN GROVE

Job Address

1221 BARCLAY

Permit Number

19064

Lot

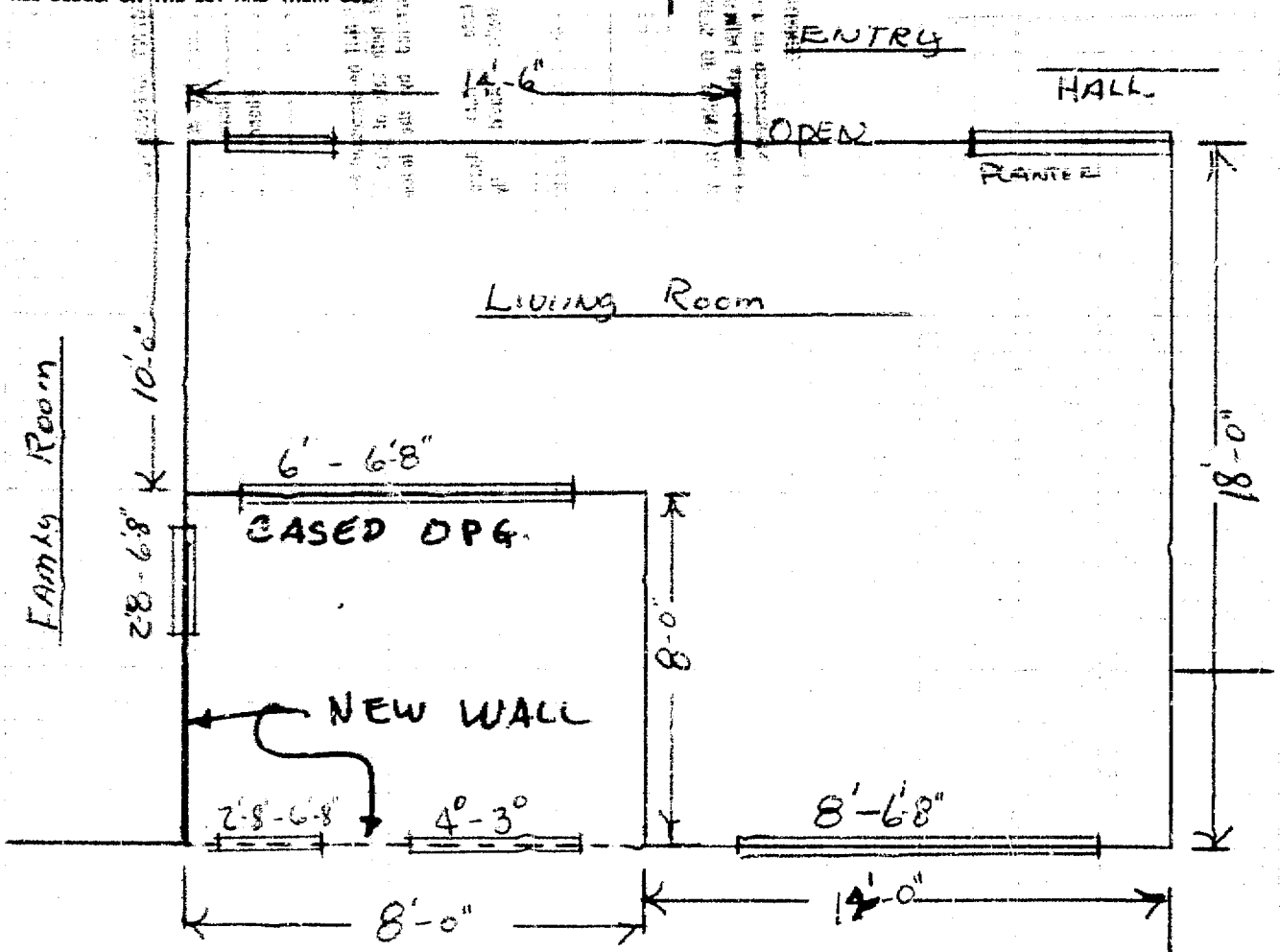
17

Tract

2383

Blk.

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



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

By \_\_\_\_\_ Date \_\_\_\_\_

# BUILDING PERMIT

DEPARTMENT OF BUILDING &amp; SAFETY, GARDEN GROVE PH. 537-0280

FIRE ZONE OCCUPANCY I TYPE II OCC. LOAD 1REMARKS STD. PLAN  
PLANNINGUSE ZONE R2-1 SETBACKS FRONT LEFT RIGHT REAR  
EAVE PROJ. - - + 7' -PLANNING ACTION 0 PARK. SPACES REQUIRED 0Zoning Approved By [Signature] Date 3-7-68Remarks: PUBLIC WORKS OK SQU

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

NOT RECD

Remarks

## INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location		
Reinforcing		
Roof Shtg.		
Rough Frame		
Lath or Drywall		
Plas. Brown Ct.		
Other		
Final	<u>3-2-68</u>	<u>[Signature]</u>
Utility Release		

VALUATION NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT, ETC. \$370.00

## FEES

Plan Check \$ 1.50 Building Permit \$ 3.00  
Bond \$ \_\_\_\_\_ Expiration Date \_\_\_\_\_Permit Authorized By ELM Date 3-7-68  
1 Bldg. Inspector

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

Job Address 11221 Barclay Permit No. 026998 A  
Lot No. 18 Tract No. 2383Owner E. S. SCOTT Tel. No. 539-0371  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip No. \_\_\_\_\_ Arch. Paeny State Lic. No. \_\_\_\_\_  
 Engr. \_\_\_\_\_ Tel. No. \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip No. \_\_\_\_\_Contractor Alum Kool Lic. No. \_\_\_\_\_  
Mailing Address 37635 Hill Tel. No. Rise 2-4611 City LA Zip No. \_\_\_\_\_

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

Validation 4R-7-68 11 051 U\*\*\*\*\*1.50  
4R-7-68 11 052 U\*\*\*\*\*3.00DESCRIBE WORK TO BE DONE Alum Potted COVER  
NEW  ADD'N  ALTER  REPAIR  DEMOLISH FLOOR AREA (SQ. FT.) R2 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.  
Alum Kool By [Signature] Date \_\_\_\_\_  
Contractor Authorized Agent

### OWNER-BUILDER SIGN BELOW

I certify that I am exempt from the provisions of Ch. 9, Div. 3, 5 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 at their sole compensation. I will furnish insurance for any employees as required by the Labor Code of California.Owner's Signature \_\_\_\_\_ By \_\_\_\_\_ Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_  
If work is not started within 60 days from date of issue or if abandoned for more than 120 days, this permit will be null and void.

## RELOCATION

PRESENT BLDG. ADDRESS \_\_\_\_\_  
MOVING CONTRACTOR ADDRESS \_\_\_\_\_

# PLOT PLAN

Department of Building

CITY OF  
GARDEN GROVE

Job Address

11221 Barclay

Permit Number

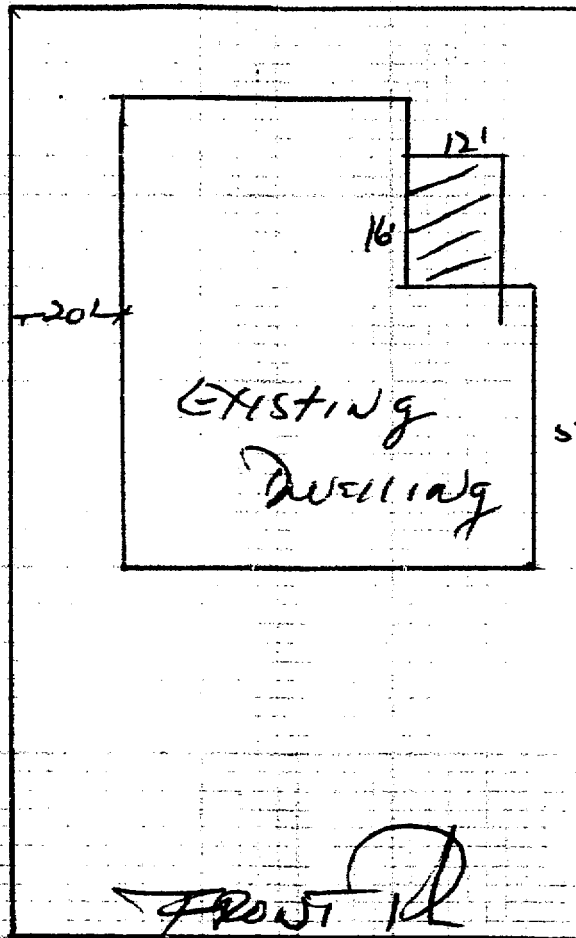
26998A

Lot

Tract

Blk.

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



I certify the information hereon is complete and correct.

Rating: #1 Building Inspector #2 Office File #3 Owner

By

Date

# CITY OF GARDEN GROVE, CALIFORNIA

Development Services Department

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



Address : 11221 BARCLAY DR  
 Parcel No: 13209317 Type: B33

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Owner : DRAPER, EVERETT J (JT)  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_

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Architect: \_\_\_\_\_  
 Address : \_\_\_\_\_

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LIC: \_\_\_\_\_ EXP: \_\_\_\_\_ PH: \_\_\_\_\_

Suite: \_\_\_\_\_ PERMIT NO.: 14679  
 Date : 09/23/92 Insp Dist : M5

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Applicant: SOUTHLAND ROOFING  
 Address : 21681 IMPALA LN  
 HUNTINGTON BEACH CA 92646  
 Phone: 761-8214

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Engineer: \_\_\_\_\_  
 Address : \_\_\_\_\_

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LIC: \_\_\_\_\_ EXP: \_\_\_\_\_ PH: \_\_\_\_\_

### WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 0112190 Expiration Date 9-30-97

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]* 9/23/92  
PERMIT APPLICANT SIGNATURE DATE

### BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 450353 and Classification 9-23 is in full force and effect.

*[Signature]* 9/23/92  
(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 7055  Other: \_\_\_\_\_

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

Proposed Work: TO/ 1/2" CDX/1 #30 FELT & DURA LITE CON CRETE TILE

Value : 10000  
 Floor Area: 3000

Plan Check	1	
Permit	1	118.27
Issuance	1	10.00
PRE INSPECTION	1	15.00
GENL. PLAN/CULT ART	1	19.50

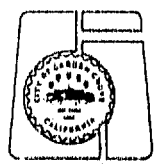
B PER 118.27  
 ISS 10.00  
 INSPCT 15.00  
 MISC. 19.50  
 0#1883A 9-23'92 CHECK 162.77

3200	34.50
3226 BLDG PERM &	118.27
3517 ISSUANCE FEE	10.00
3527 BLDG PLAN CK	0.00

Authorized by: *[Signature]* TOTAL FEES 162.77

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.

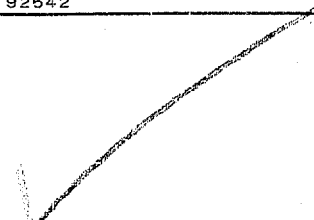
### INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Pre Inspect	10-2-92	<i>[Signature]</i>
Foundation		
Concrete Floor		
Reinforcing		
Masonry		
Roof Shtg	10-6-92	<i>[Signature]</i>
Rough Frame		
Insul / Energy		
Drywall		
Lath		
Plas. Brown Ct.		
Landscaping		
Pre Gunite		
Pre Deck		
Pre Plaster		
Planning Final		
Bldg Final	10/21/92	<i>[Signature]</i>
Utility Notified		

# CITY OF GARDEN GROVE, CALIFORNIA

Development Services Department

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



**PERMIT NO. :** 14498  
**Type :** P  
**Date Issued :** 08/25/92  
**Title :** REPIPE  
**Desc :**  
**Location :** 11221 BARCLAY DR  
**Suite :**  
**Parcel number :** 13209317  
**Occupancy :**  
**Applicant :** ALBANO'S PLUMBING  
 20024 STATE RD.  
 CERRITOS CA 90701

**Inspector area:** M5  
  
**Owner:** DRAPER, EVERETT J (JT)  
  
**Phone Number :** 527-5300

**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.

Water Piping (ea. 100')	3	9.00
Issuance	1	10.00
GENL. PLAN/CULT ART	1	3.00

*[Signature]* 8/25/92  
PERMIT APPLICANT SIGNATURE DATE

**BUSINESS TAX CERTIFICATE INFORMATION**

I certify that the following Contractor's License No. 458625  
 and Classification Plumbing is in full force and effect.  
PLUMBING CONTRACTOR 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 S200: Section 7048  Employee working for wages only: Section 7053  Other: \_\_\_\_\_  
OWNER/PROPERTY OWNER CONTRACTOR/PROPERTY OWNER OR AUTHORIZED AGENT DATE

P PER 9.00  
 MISC. 3.00  
 ISS 10.00

# 602A 8-25-92 CHECK 22.00

**INSPECTION RECORD**

**APPROVAL DATE INSPECTOR**

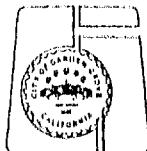
Soil Piping \_\_\_\_\_  
 Ground Plumbing \_\_\_\_\_  
 Rough Plumbing 9-15-92  
 Gas Piping \_\_\_\_\_  
 Gas Vent \_\_\_\_\_  
 Sewer \_\_\_\_\_  
 Main Drain \_\_\_\_\_  
 Vacuum Lines \_\_\_\_\_  
 Water Heater \_\_\_\_\_  
 Backwash \_\_\_\_\_  
 Water Lateral \_\_\_\_\_

3200 3.00  
 3228 PLUMBING PER 9.00  
 3517 ISSUANCE FEE 10.00

Authorized by: *[Signature]* **TOTAL FEES** 22.00

**Inspection Requests**

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 9-15-92

Utility Notified \_\_\_\_\_