

BUILDING PERMIT

Public Works & Development -- Garden Grove, Ca.

Inspector 638-6771

Information 633-6601

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.

FIRE ZONE **3** OCCU-PANCY **T** TYPE **V** OCC. LOAD FIRE SPRINK.

USE ZONE **R-1** FRONT LEFT RIGHT REAR

PARK SPACES REQUIRED

LEAVE PROJ.				
SETBACKS	20	13	5	

PLANNING ACTION **Plans**

LAND USE APPROVED BY **DB** DATE **5-24-77**

ADDRESS **11681 TRASK** PERMIT NO. **0922044**

LOT NO. **PC 24-91** TRACT NO.

OWNER **GOSPEL ASSEMBLY CHURCH** TEL. NO. **638 0815**

MAILING ADDRESS **11711 TRASK G.G.** CITY **GARDEN GROVE** ZIP **92645**

ARCH. STATE LIC. NO.
 ENGR. TEL. NO.
 MAILING ADDRESS CITY ZIP

FEEES AND BONDS

	AMOUNT	REQ'D	PROVIDED
PARCEL MAP		No	
R/W DEDICATION		No	
STREET BOND		No	
WATER BOND		YES	YES
WATER ASSMT. FEE		YES	
FIRE HYDRANT FEE		YES	
PARKWAY TREE FEE	58.40	YES	
PARK & REC. FEE (DIST. F)	325.00	YES	
DRAIN ASSMT. FEE (DIST. D)	117.30	YES	YES

CONTRACTOR **OWNER BLD'G** LIC. NO.
 MAILING ADDRESS **11711 TRASK** TEL. NO.
 VALIDATION **057 11 163 75**
137 11 348 65

PRESENT BLDG. USE PROPOSED BLDG. USE

DESCRIBE WORK TO BE DONE **SFD - W/Garage**

NEW ADD'N, ALTER. REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) **2384/512** NO. OF STORIES **1** NO. OF DWELLING UNITS **1**

REMARKS: **39% Lot Coverage**

G.G. SANT. DIS. FEE REQ'D	NO	O.C. SANT. DIS. FEE REQ'D	NO	DATE	INITIAL
				5/24/77	RDC

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
FOUNDATION & FUB.	9-23-77	JR
REINFORCING		
ROOF SHGTG.	3-23-77	
ROUGH FRAME		
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL	1-16-79	JR
UTILITY RELEASE	1-16-79	JR
VALUATION \$57,900	FEEES	
REC'D BY: RJR	PLAN CHECK \$	163 75
AUTHORIZED BY JPS	PERMIT (PR) \$	342 65
5-24-77	ISSUANCE \$	6 00
INSPECTOR	TOTAL \$	512 40

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.

Rose Olivieri L. Roy By _____ Date _____

Owner's 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

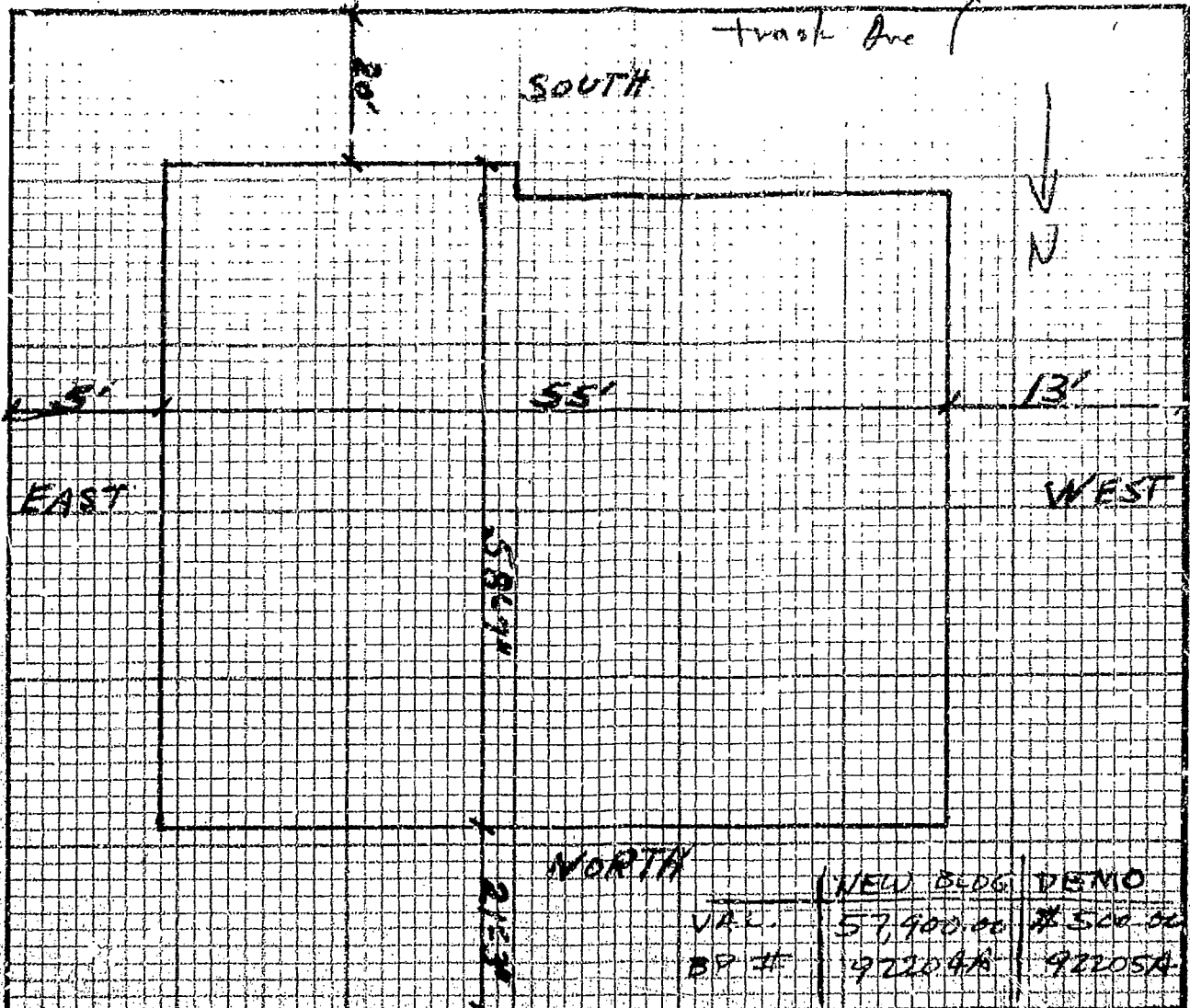
PRESENT BLDG. ADDRESS _____

MOVING CONTRACTOR ADDRESS _____

BUILDING PERMIT PLOT PLAN
 Public Works & Development Dept.
 CITY OF GARDEN GROVE

JOB ADDRESS 11681 TRASK, G. G.			PERMIT NO. SEE BELOW
ASSESSORS PARCEL NO. 100-362-30	LOT	BLOCK	TRACT
JOB DESCRIPTION (PLEASE CHECK) <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input checked="" type="checkbox"/> Demolish			PERMIT VALUE SEE BELOW
OWNER Fogel assembly church Personage	DATE 5-24-77	USE SFR w/ Garage DEMO. EXIST. HOUSE GARAGE	

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



1. Building Insp. / #2 Assessor / #3 File / #4 Permitter
 Verify the information hereon is complete and correct. By _____

BUILDING PERMIT

CITY OF GARDEN GROVE

Public Works & Development

Inspection Requests
638-6771

General Information
638-6661

FIRE ZONE	OCC. PANCY	TYPE	OCC. LOAD	FIRE SPRINK.
R-1				
USE ZONE	FRONT	LEFT	RIGHT	REAR
PARK SPACES REQUIRED	EAVE PROJ.			
	SETBACKS	13	5	21

PLANNING ACTION: PLANS Attached

LAND USE APPROVED BY: JLJ DATE 10-5-71

REMARKS:

G.C. SANT. DIS. FEE REQ'D	G.C. SANT. DIS. FEE REQ'D	DATE	INITIAL
		REQ'D	PROVIDED

PARCEL MAP

R/W DEDICATION

IDENTIFICATION CODE

VAL	CODE	AMOUNT	REC.
2400.00			
ST. BOND			
WATER BOND			
WATER ASSMT. FEE			
FIRE HYD. FEE			
PARKWAY TREE FEE			
PARK & REC. FEE (DIST.)			
DRAIN ASSMT. FEE (DIST.)			
PLAN RETENTION FEE			
BLDG. PLAN-CHECK			
BLDG. PERMIT FEE		1716	
ST. MOTION INSTR. FEE		26.00	
INSURANCE FEE		6.00	
TOTAL FEES		50.00	

AUTHORIZED BY: [Signature] DATE: 10-5-71

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

ADDRESS: 116811 TRASK PERMIT NO: 000024A

LOT NO. TRACT NO. BLK NO.

OWNER: GOSPEL ASSEMBLY TEL. NO. 638-0215

MAILING ADDRESS: 11711 TRASK G.G. CITY ZIP

ARCH
 ENGR.

MAILING ADDRESS: CITY ZIP

STATE LIC. NO. TEL. NO. CITY ZIP

CONTRACTOR: OWNER BLD'G LIC. NO. TEL. NO. CITY ZIP

MAILING ADDRESS: 11711 TRASK CITY ZIP

VALIDATION

PRESENT BLDG. USE: Res PROPOSED BLDG. USE: Res

DESCRIBE WORK TO BE DONE: Patio roof & Deck

NEW ADD'N ALTER REPAIR DEMOLISH

FLOOR AREA (SQ. FT.): 660 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.

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 F 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] Date: _____

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

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

RELOCATION

PRESENT BLDG. ADDRESS: _____

MOVING CONTRACTOR: _____ ADDRESS: _____

INSPECTION RECORD

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION	10-6-77	Jns
REINFORCING		
BRICK/CONCRETE		
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS, BROWN CT.		

APPROVAL	DATE	INSPECTOR
ROOF INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE/FINAL		
UTILITY RELEASE		

DATE	INSPECTOR'S NOTES

BLDG PERMIT # 96024A

APP	CODE	AMOUNT	REC
57000			
FEES AND BONDS			

10-11-77

IDENTIFICATION CODE

BLDG USE

DATE REC'D	DATE PROVIDED
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VALIDATION

REMARKS

11-11-77

APPROVED BY	DATE
Jns	10-2-78
ACTION	BY
REWORK	REMARKS
WORK	REMARKS
DATE	BY
DATE	BY

MAILING ADDRESS

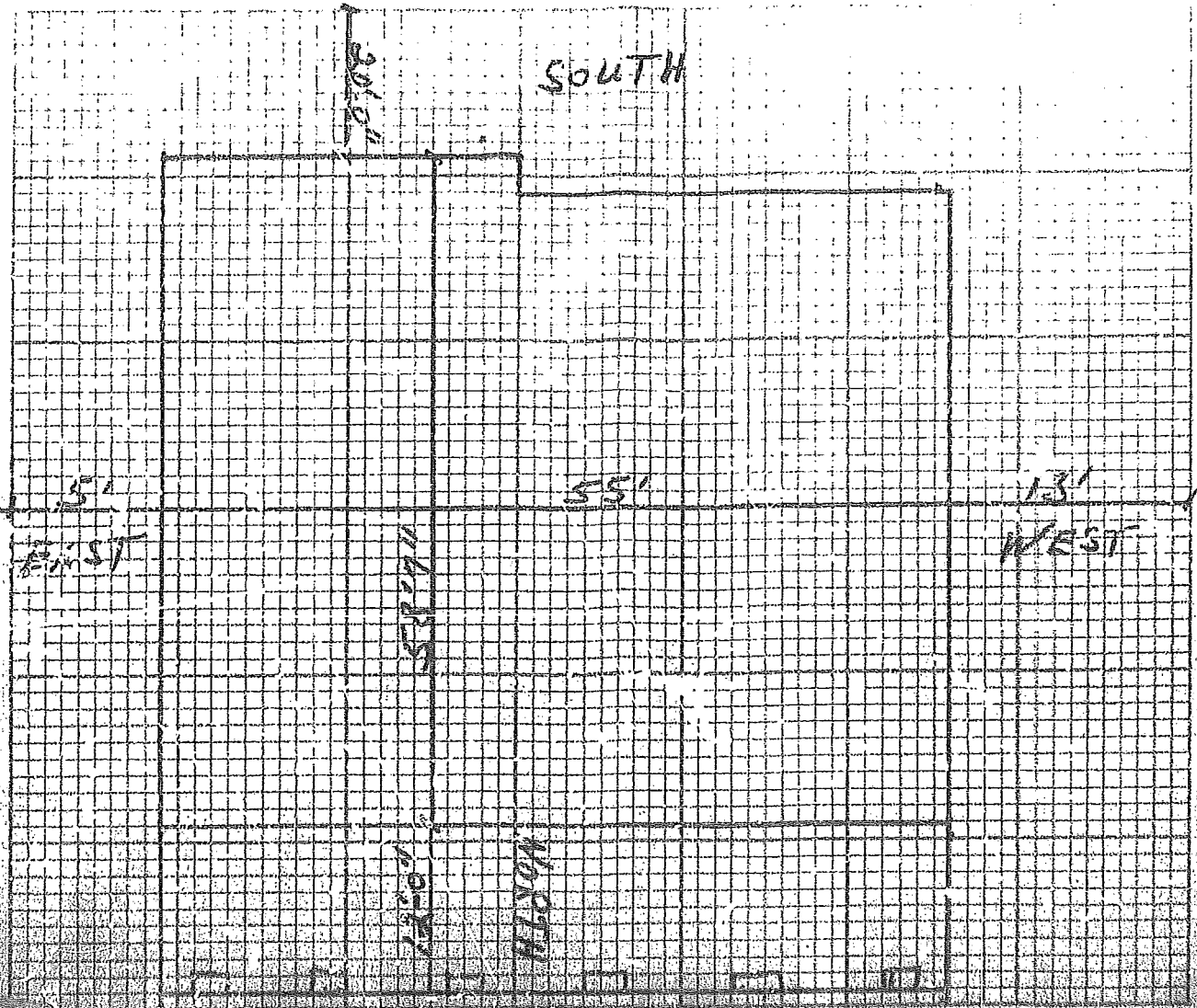
DATE	BY

MAILING ADDRESS

BUILDING PERMIT PLOT PLAN
 Public Works & Development Dept.
 CITY OF GARDEN GROVE

JOB ADDRESS 11681 TRASK C.G.			PERMIT NO. 960271A
ASSESSOR'S PARCEL NO. 100-362-30	LOT	BLOCK	TRACT
PLOT PLAN APPROVED BY		JOB DESCRIPTION (PLEASE CHECK) <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish	
OWNER Dogiel assembly church Removal	DATE 10-5-77	USE Patio Cover & Deck	PERMIT VALUE \$2400.00

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



BUILDING PERMIT

CITY OF GARDEN GROVE

Public Works & Development

Inspection
Requests
038-6771

General
Information
638-6661

FIRE ZONE 3	OCCUPANCY	TYPE	OCC. LOAD	FIRE SPRINK.
USE ZONE R-1	FRONT	LEFT	RIGHT	REAR
PARK SPACES REQUIRED	EAVER PROJ.			
	SETB. CKS			

PLANNING ACTION _____ PLANS _____

LAND USE APPROVED BY **DB** DATES **5-24-77**

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 _____

IDENTIFICATION CODE

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FEEES AND BONDS

VAL.	CODE	AMOUNT	REC.
\$500.00			
ST. BOND			
WATER BOND			
WATER ASSMT. FEE			
FIRE HYD. FEE			
PARKWAY TREE FEE			
PARK & REC. FEE (DIST.)			
DRAIN ASSMT. FEE (DIST.)			
PLAN RETENTION FEE			
BLDG. PLAN CHECK			
BLDG. PERMIT FEE			
ST. MOTION INSTR. FEE			
ISSUANCE			
TOTAL FEES		\$17.50	

AUTHORIZED BY **[Signature]** DATE **5-24-77**

INSTRUCTIONS: FILL IN AREA WITH IN HEAVY LINES
USE TYPEWRITER OR BALL POINT PEN PHRASES FINALLY BE SURE ALL COPIES ARE
LEGIBLE. NO ERASURES PERMITTED. A PENALTY FEE WILL BE CHARGED IF WORK
IS STARTED BEFORE PERMIT IS ISSUED.

ADDRESS **116 B1 TRACK** PERMIT NO. **1222001**

LOT NO. _____ TRACT NO. _____ BLK NO. _____

OWNER **GOSPOL ASS. TRUCK** TEL. NO. **891-1973**

MAILING ADDRESS _____ CITY _____ ZIP _____

11711 TRACK **ES**

ARCH
 ENGR

MAILING ADDRESS _____ CITY _____ ZIP _____

STAT. LIC. NO. _____ TEL. NO. _____

CONTRACTOR **OWNER** LIC. NO. _____

MAILING ADDRESS _____ CITY _____ ZIP _____

VALIDATION _____

PRESENT BLDG. USE _____ PROPOSED BLDG. USE _____

DESCRIBE WORK TO BE DONE **DEMOLISH SINGLE FAMILY DWELLING & DETACHED GAR.**

NEW ADD'N. ALTER. REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) _____ 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 Workmen'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.

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

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

By **[Signature]** Date _____

Owner's Signature _____ Authorized Agent _____ Date _____

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

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RELOCATION _____

MISSING BLDG. ADDRESS _____

MOVING CONTRACTOR _____ ADDRESS _____

INSPECTION RECORD

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
REINFORCING		
ROOF SHTG.		
ROUGH FRAME		
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT.		

APPROVAL	DATE	INSPECTOR
FOUND. INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL		
UTILITY RELEASE		

R1679

DATE	INSPECTOR'S NOTES

BLDG. PERMIT #
97205 A

AVL	CODE	AMOUNT	BCH

BLDG. PERMIT #	BLDG. PERMIT #

IDENTIFICATION CODE					

MAILING ADDRESS			

CITY OF CHICAGO... OFFICE OF CITY ENGINEER...

BUILDING PERMIT

CITY OF GARDEN GROVE

Public Works & Development

Inspection
Requester
638-6771

General
Information
638-6661

FIRE ZONE 3 OCCU. PANCY I TYPE V OCC. LOAD FIRE SPRINK.

USE ZONE R-1 FRONT LEFT RIGHT REAR

FURN SPACES REQUIRED EAVE PROJ. SETBACKS No CHANLES

PLANNING ACTION PLANS PROVIDED

LAND USE APPROVED BY DB DATE 11-10-77

REMARKS: SEE # 092209A

S.O. SANT. DIS. FEE REQ'D	O.C. SANT. DIS. FEE REQ'D	D.P.T.E.	INITIAL
		REQ'D.	PROVIDED
		<u>No</u>	
		<u>No</u>	

PARCEL MAP
R/W DEDICATION

IDENTIFICATION CODE

VAL	CODE	AMOUNT	REC.
<u>46,700⁰⁰</u>			
ST. BOND			
WATER BOND			
WATER ASSMT. FEE			
FIRE HYD. FEE			
PARKWAY TREE FEE			
PARK & REC. FEE (DIST.)			
DRAIN ASSMT. FEE (DIST.)			
PLAN RETENTION FEE		<u>5¹¹</u>	
BLDG. PLAN CHECK		<u>127²⁷</u>	
BLDG. PERMIT FEE		<u>199⁰⁹</u>	
ST. MOTION INSTR. FEE		<u>—</u>	
ISSUANCE		<u>6⁰⁰</u>	
TOTAL FEES		<u>337⁴⁶</u>	

AUTHORIZED BY [Signature] DATE 10 Nov 77

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 PENALTY FEE WILL BE CHARGED IF WORK
IS STARTED BEFORE PERMIT IS ISSUED.

ADDRESS 11681 TRASK PERMIT NO. 097082A
LOT NO. TRACT NO. BEK NO. 2A

OWNER GOSPEL ASSEMBLY TEL. NO. 638-0215
MAILING ADDRESS CITY ZIP

11711 TRASK C.G.
 ARCH STATE LIC. NO.
 ENGR. TEL. NO.
MAILING ADDRESS CITY ZIP

CONTRACTOR OWNER BLD'G LIC. NO.
MAILING ADDRESS CITY TEL. NO. ZIP

11711 TRASK
VALIDATION

PRESENT BLDG. USE PROPOSED BLDG. USE

DESCRIBE WORK ADD 2ND STORY OF
TO BE DONE ROMPUS RM & GAME ROOMS TO EXISTING
HOUSE.

NEW ADD'N ALTER. REPAIR DEMOLISH

FLOOR AREA 1994⁰⁰ 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.

By _____
Contractor Authorized Agent Date

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

- I am the owner of the above property and will personally perform the above work.
- I am the owner of the above property and I will contract to have all of the above work performed by licensed contractors.
- I am the owner of the above property and will employ persons to perform the above work with wages as their sole compensation. I will furnish insurance for my employees as required by the Labor Code of California.

[Signature]
Owner's 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 FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

RELOCATION
PRESENT BLDG. ADDRESS

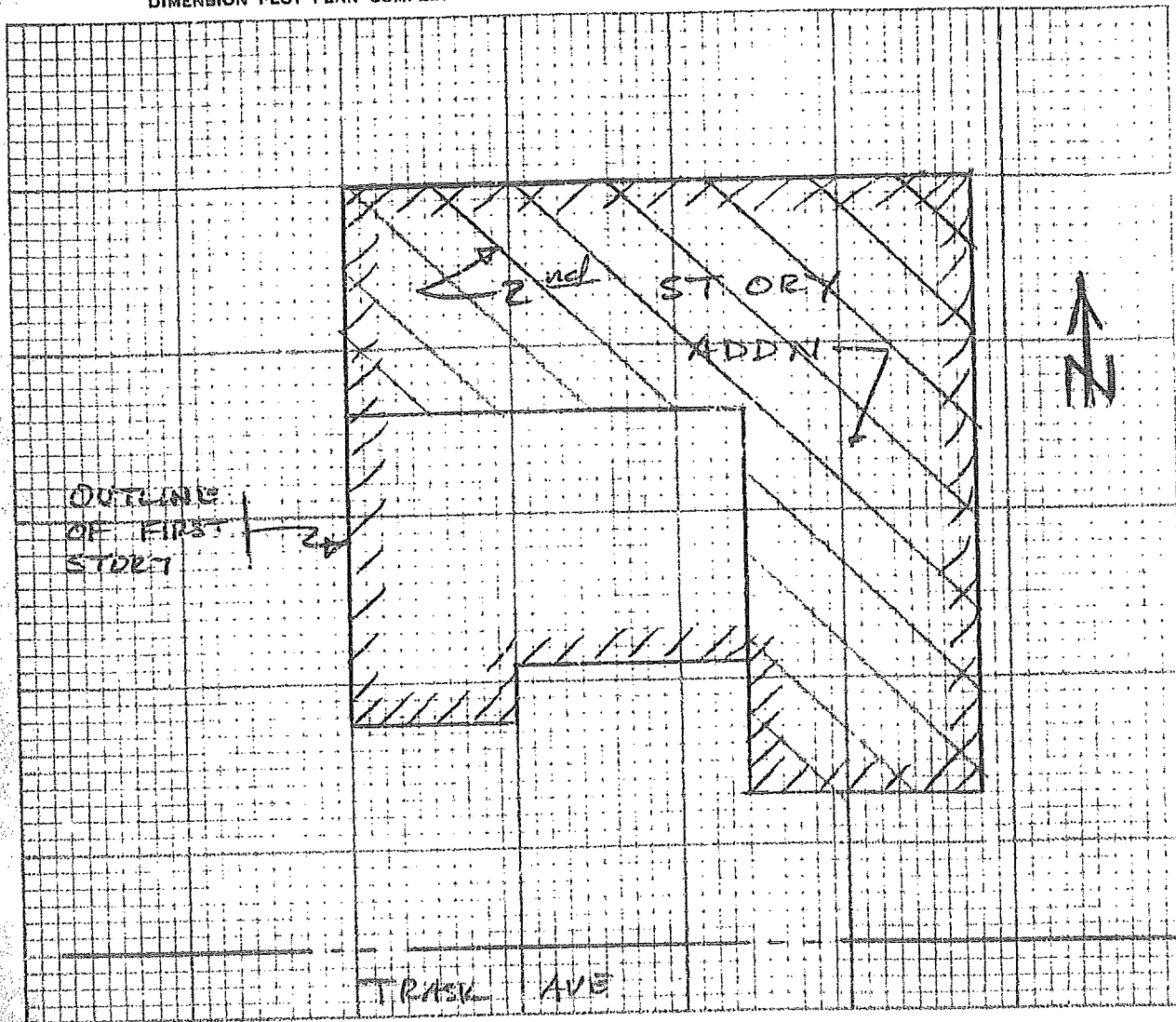
MOVING DAY CONTRACTOR ADDRESS

PLEASE USE BALL-POINT PEN

BUILDING PERMIT PLOT PLAN
Public Works & Development Dept.
CITY OF GARDEN GROVE

JOB ADDRESS 11681 TRASK			PERMIT NO. 97092A
ASSESSORS PARCEL NO. 100-362-30	LOT	BLOCK	TRACT
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 GOSPEL ASSEMBLY CHURCH PARSONAGE	DATE 10 Nov 77	USE 2nd STORY PORCH ROOMS OVER WASH & SFD	PERMIT VALUE 96,700⁰⁰

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



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

Date _____

DB-0638-3777

PLUMBING PERMIT

CITY OF GARDEN GROVE
Public Works & Development

Inspection Requests
628-6771

General Information
628-6661

FEES

INSPECTION RECORD

For Applicant to Fill In

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EACH	\$ FEE
San Fixing			Water Closet (toilet)	2	300	600
Ground Plumbing			Bath Tub	1	300	300
Plumbing			Shower	1	300	300
Gas Piping			Lavatory (Wash Basin)	2	300	600
Gas Vent			Garbage Disposal	1	300	300
Sewer			Laundry Tub or Tray			
Water Heater			Water Heater			
Main Drain and Vacuum Lines			Floor Sink			
Water Heater			Floor Drain			
Backwash			Dish Washer			
Water Lateral			Drinking Fountain			
			Urinal			
			Gas System - Outlets			
			Building Sewer (First 100 ft.)			
			Building Sewer (Add'l 100 ft.)			
			Building Sewer (ea. add'l drain)			
			Rainwater Drain			
			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)			
			SUPPLEMENTAL PERMIT			
FINAL	1/15-79	EW	ITEM	CODE	FEES	
UTILITY CO. NOTIFIED			Plan Retention Fee			
			Plan Check			
			Permit	228	2100	
			Issuance	PAID #74467A		
			TOTAL FEES			2100

ADDRESS: 11681 TRASK BLVD. TRACY, CA 95290

OWNER: GOSPEL ASSEMBLY

OWNER'S ADDRESS: 1111 TRASK G.C. 924643

EXISTING BUILDING OR ADDITION - AREA: 90. FT. I

VALIDATION: 7-678 100M 2100

PLUMBING CONTRACTOR: OWNER BLDG

STATE REG. NO. & TYPE: []

CITY: [] PHONE: []

CONTRACTOR: BY: AUTHORIZED AGENT

OWNER-BUILDER SIGN BELOW

I certify that I am exempt from the provisions of Ch. 9, Div. 3, 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 be subject to the contractor's compensation laws of the State of California.

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

W.C. # [] EXP. DATE []

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

W.C. # [] EXP. DATE []

OWNER'S SIGNATURE: [Signature]

OWNER'S NAME: [Signature]

DATE: []

IF WORK IS NOT STARTED WITHIN 120 DAYS FROM DATE OF ISSUE OR IS ABANDONED FOR MORE THAN 120 DAYS, THIS PERMIT WILL BE NULL AND VOID.

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

AUTHORIZED BY: [Signature]

DATE: 7-6-78

CONTRACTOR: [Signature]

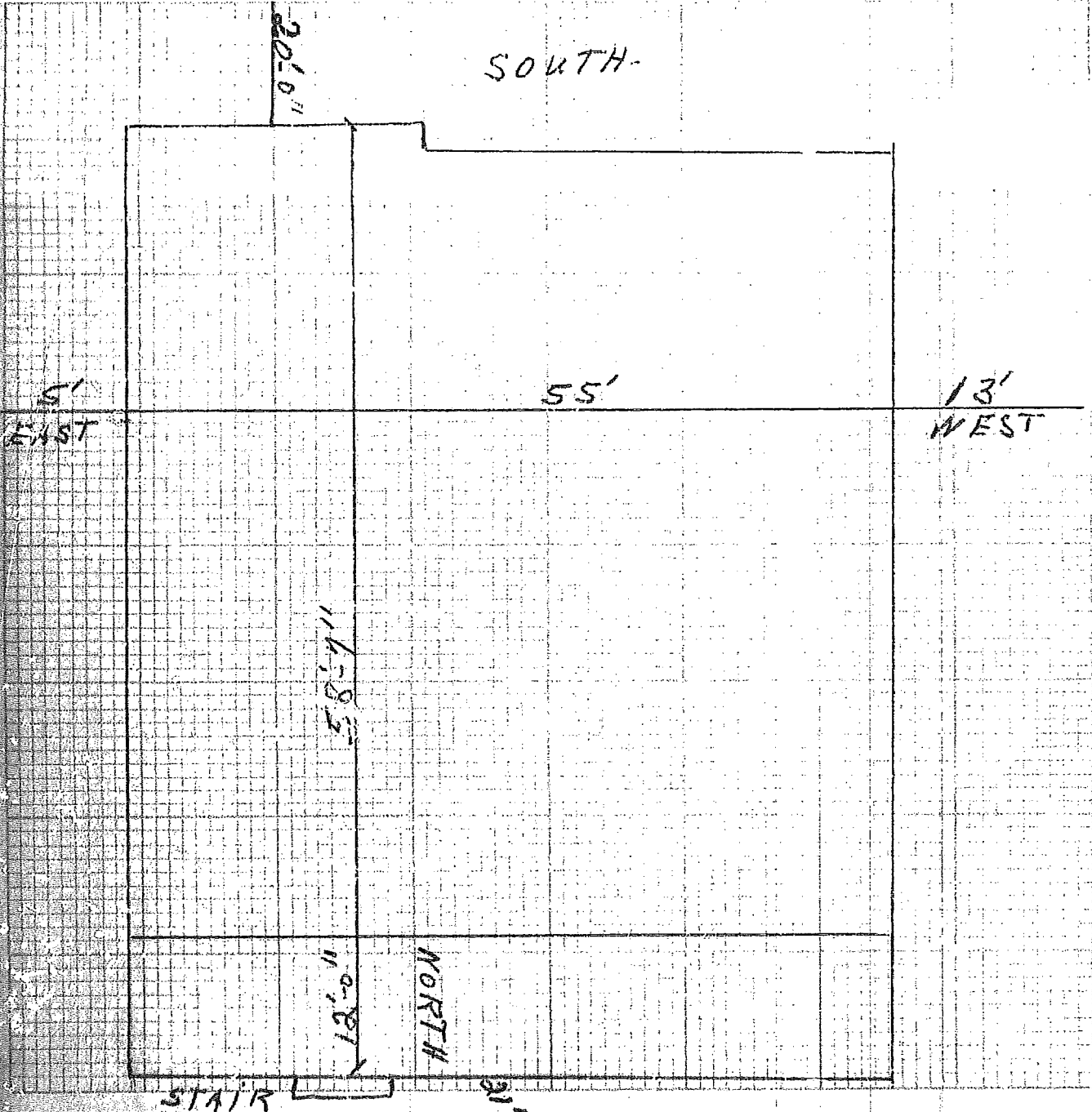
For Applicant to Fill in

P.C. #		OC/LOAD		FIRE SPRINK.		INSPECTION RECORD		ADDRESS		PERMIT NO.	
OCUPANCY	TYPE	FRONT	LEFT	RIGHT	REAR	APPROVAL	DATE	INSPECTOR	1681 TRASK	134261A	
USE ZONE	Edv Prol.					FOUNDATION & LOCATION			CONTRACT NO.	TRACT NO.	
FIRE ZONE	Setbacks					CONCRETE FLOOR REINFORCING			OWNER	TEL. NO.	
PLANNING ACTION						ROOF SHGTG			COPELA ASSEMBLY	134261A	
LAND USE APPROVED BY						ROUGH FRAME			MAILING ADDRESS	CITY	
REMARKS:						INSULATION, ENERGY LATH OR DRYWALL			1111 TRASK CB	92683	
						PLAS. BROWN CT.			ARCH	ZIP	
						SOUND INSULATION			ENGR.		
						SMOKE DETECTOR			MAILING ADDRESS	CITY	
						PARKING			TEL. NO.	STATE LIC. NO. & TYPE	
						LANDSCAPING					
						UTILITY RELEASE			B-PLAN 374		
						IDENTIFICATION CODE	4-4-84		B-PER 11.50		
						WORKER'S COMPENSATION REQUIREMENTS			ISS 10.00		
						State Compensation Insurance Policy No. _____			147500A 3-12-84	CHECK 25.24	
						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.			OWNER BLDG		
						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 be deemed to have complied with the provisions of Section 3700 or his permit shall be deemed void.			1111 TRASK	92683	
						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 building 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 by me or my employees.			TEL. NO.	STATE LIC. NO.	
						_____ PERMIT APPLICANT SIGNATURE _____ DATE _____			CONTRACTOR	PROPOSED BLDG. USE	
						BUSINESS TAX CERTIFICATE INFORMATION			OWNER BLDG		
						I certify that the following Contractor's License No. _____ and Classification _____ is in full force and effect.			1111 TRASK	92683	
						(PRINT) CONTRACTOR _____ (SIGNATURE) CONTRACTOR _____ DATE _____			MAILING ADDRESS	CITY	
						BUSINESS TAX CERTIFICATE NO. _____ EXPIRATION DATE _____			TEL. NO.	STATE LIC. NO.	
						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: _____			PRESENT BLDG. USE		
						Owner: Section 7044 _____ Minor work under \$100: Section 7.48 _____			DESCRIBE WORK TO BE DONE		
						Other: _____			STAIRS & RAIL.		
									NEW ADDN ALTER REPAIR DEMOLISH		
									FLOOR AREA NO. OF STORIES NO. OF DWELLING UNITS		
									(SQ. FT.)		
									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		

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		
BLDG. PLAN CHECK		374
BLDG. PERMIT FEE		1150
ISSUANCE		10.00
VALUATION		
500.00	TOTAL FEES	2524
AUTHORIZER		
[Signature]		
I. INSPECTOR		
[Signature]		
		2-12-24

OWNER <i>Doppel Assembly Church Censervage</i>	JOB ADDRESS <i>11681 TRASK G.G.</i>	PERMIT NO. <i>134261A</i>	
NAME OF CONSTRUCTION LEADER & BRANCH	ASSESSORS PARCEL NO.	LOT	BLOCK TRACT
	<i>100-362-30</i>		
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	JOB DESCRIPTION	PERMIT VALUE
	<i>3-12-84</i>	<i>Stairs</i>	<i>500⁰⁰</i>

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 _____

PLUMBING PERMIT

CITY OF GARDEN GROVE
Public Works & Development

General
Information
638-6661

IDENTIFICATION CODE

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

For Applicant to Fill In (Please Print)

Address: 11681 TRASK Permit No. 094487A
Lot No. _____ Tract No. _____

PERMIT FEES

NO.	TYPE OF FIXTURE OR ITEM	EACH	\$ FEE
3	Water Closet (toilet)	3 ⁰⁰	9 ⁰⁰
1	Bath Tub	3 ⁰⁰	3 ⁰⁰
1	Shower	3 ⁰⁰	3 ⁰⁰
4	Lavatory (Wash Basin)	3 ⁰⁰	12 ⁰⁰
1	Kitchen Sink	3 ⁰⁰	3 ⁰⁰
1	Garbage Disposal	3 ⁰⁰	3 ⁰⁰
	Laundry Tub or Tray		
1	Water Heater	3 ⁰⁰	3 ⁰⁰
	Floor Sink		
	Floor Drain		
1	Dish Washer	3 ⁰⁰	3 ⁰⁰
	Drinking Fountain		
	Urinal		
1	Gas System - Outlets	3 ⁰⁰	3 ⁰⁰
1	Building Sewer (First 100 ft.)	6 ⁰⁰	6 ⁰⁰
	Building Sewer (Add'l 100 ft.)		
	Building Sewer (ea. add'l drain)		
	Rainwater Drain		
	Swimming Pool Piping		
	Sand Traps/Receptors		
1	Automatic Washing Machine	3 ⁰⁰	3 ⁰⁰
	Water Softeners		
	Backwash - Trap		
	Water Lateral		
	Backflow Protective Devices		
	Water Piping (ea. 100 ft.)		
	Lawn Sprinklers (Single Dwelling - Only)		
	Lawn Sprinklers (other)		

FEES

ITEM	CODE	
Plan Check		
Permit	228	57 00
Inspection	535	6 00
TOTAL FEES		57 00
Authorized By	<u>18</u>	Date <u>8-12-77</u>

Owner: BOGSEL ASSEMBLY CHURCH
Owner's Address: 11711 TRASK
Plumbing Contractor: OWNER BLDG'S
Contractor's Address: 11711 TRASK City _____
Phone _____ State License No. _____
Occupancy: S.F.D. NEW
New Bldg. VALIDATION
Add'n. 12-77 11 291 11 291
Exist. Bldg. 12-77 11 290 11 290

I hereby acknowledge that I have read this application and state that the above is correct and agree to comply with all ordinances and State laws regulating plumbing.
I hereby certify that I am properly registered with and/or licensed as required by the City of Garden Grove and/or State of California, or that I am the legal owner of the above described property, and I certify that in the performance of the work for which this permit is issued I shall not employ any person in violation of the workmen's compensation laws of the State of California.

Signature of Permittee: Rev. Calvin L. Ray Date 8-12-77

INSPECTION RECORD

APPROVALS	DATE	INSPECTOR
Soil Piping	<u>8-23-77</u>	<u>ELG</u>
Ground Plumbing		
Rough Plumbing	<u>7-26-78</u>	<u>ELG</u>
Gas Piping	<u>1-15-79</u>	<u>ELG</u>
Gas Vent		
Sewer		
Main Drain and Vacuum Lines		
Water Heater		
Backwash		
Water Lateral		
FINAL	<u>1-15-79</u>	<u>ELG</u>
UTILITY CO. NOTIFIED	<u>1-16-79</u>	<u>RSK per Gartin request E. Kline</u>

Bldg. Permit # 92204A

For Applicant to Fill In

INSPECTION RECORD

ADDRESS: 11881 TRASK BLVD. TRACT NO. 135000A
 CITY: BAY CITY ZIP: 48066
 OWNER: REV. ALVIN L. BAY
 MAILING ADDRESS: 638 0915 ZIP: 48066
 STATE LIC. NO. & TYPE: B-2-LAW 44,53
 B-PER 69,03
 ISS 10,90
 CHECK 123.56
 VALIDATION: 1#5082A 5-01'84
 CONTACTOR: Owner
 MAILING ADDRESS: CITY: ZIP:
 STATE LIC. NO. & TYPE:
 PRESENT BLDG. USE: PROPOSED BLDG. USE:
 DESCRIBE WORK new deck
 BELOW addition
 NEW ADD'N ALTER REPAIR DEMOLISH
 FLOOR AREA: 195 NO. OF STORIES: NO. OF DWELLING UNITS:
 If work is not started within 180 days from date of issue or if abandoned for more than 180 days, this permit will be null and void.
 A FEE MAY BE CHARGED FOR RE INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
CONCRETE FLOOR REINFORCING		
ROOF SHTG	6-19-84	[Signature]
ROUGH FRAME		
INSULATION, ENERGY LATH OR DRYWALL		
PLAS BROWN CT		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL	9-4-84	[Signature]
FINAL		
UTILITY RELEASE		
IDENTIFICATION CODE		

WORKER'S COMPENSATION REQUIREMENTS

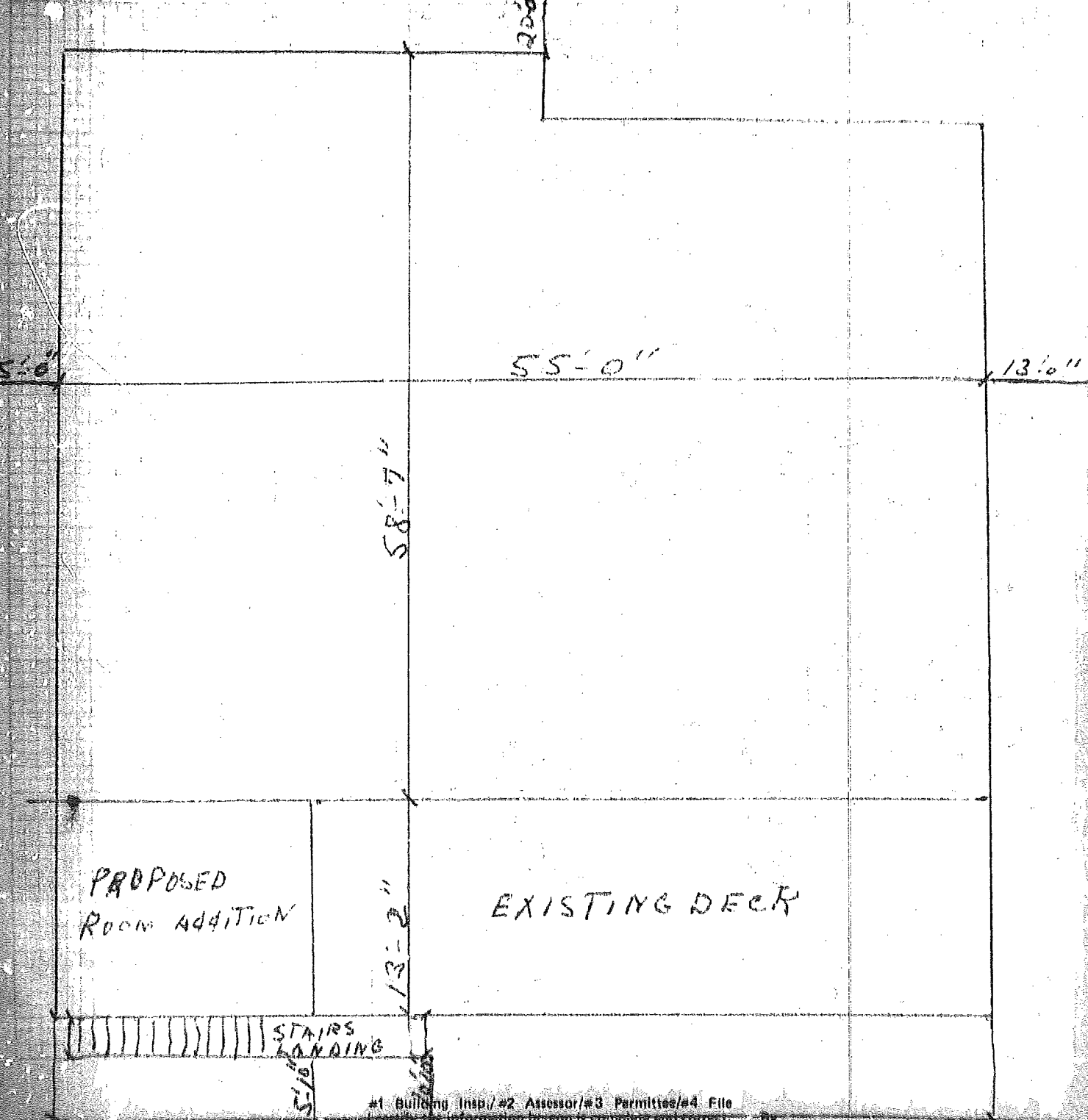
State Compensation Insurance Policy No. _____ Expiration Date _____
 I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.
 NOTE: If, after making such certificate, the applicant for the permit should become subject to the Worker's Compensation provisions of this code, he shall forthwith comply with the provisions of Section 3700 or his permit shall be deemed revoked.
 I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed pursuant to this permit.
 [Signature] DATE 7-30-84
 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, C. Contractors' License Law, under the following Section:
 Owner, Section 7044 Minor work under \$100; Section 7048 Employee working for wages only; Section 7053
 [Signature] (PRINT) PROPERTY OWNER (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT DATE

TYPE	LOAD	FRONT	LEFT	RIGHT	REAR	FIRE SPRINK
PLAN						
PLANNING ACTION	NONE	SEE PLOT PLAN PROVIDED				
LAND USE APPROVED BY	[Signature]	DATE 7-30-84				
REMARKS:						
G.G. SANT. DIS FEE REQ'D.		O.C. SANT. DIS. FEE REQ'D.		DATE	INITIAL	
PARCEL MAP		REQ'D	PROVIDED			
FEES AND BONDS						
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						
BLDG. PLAN CHECK			44	53		
BLDG. PERMIT FEE				69	03	
ISSUANCE				10	10	
VALUATION						
TOTAL FEES						123 56
7433						
AUTHORIZED BY	[Signature]					DATE 7-30-84

CON. ALVIN L. RAY
 OWNER BLDGER.
 11681 TRASK
 ADDRESS: Garden Grove CITY: CA 92683

PERMIT NO. 135000A
 11681 TRASK
 ASSESSOR PARCEL NO. LOT BLOCK TRACT
 100-362-30
 PLEASE CHECK ONE OR MORE
 New Addition Alteration Repair Move Demolish
 DATE: 4/30/84 JOB DESCRIPTION: NEW DECK PERM ADD PERMIT VALUE: 7423.00

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



PLOT PLAN APPROVED BY _____

#1 Building Insp./#2 Assessor/#3 Permitted/#4 File
 I 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 300 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 11711 Trask Ave. PERMIT NO 66235-A

USE OF BLDG. Church GROUP B-2 TYPE V-1-M

BLDG. APPROVED BY Mr. K. Miller DATE 12/2/75 USE ZONE R-1

ZONING REMARKS 94 Parking Spaces Required

BLDG. OWNER Gospel Assembly Church ADDRESS 6592 Sutton Ave., Westminster

H.R. Poirce BY D.R. Nibley, Supv. of Insp. DATE 12/5/75

BLDG. OFFICIAL

POST IN A CONSPICUOUS PLACE

BUILDING PERMIT

DEVELOPMENT SERVICES DEPT., GARDEN GROVE 638-6771

ZONE **3** OCC. R-2 TYPE **V-I-H** OCC. LOAD **352**
 USE ZONE **R-1** FRONT LEFT RIGHT REAR
 EAVE PROJ. SETBACKS **15 79 25 192**
 PARK SPACES REQUIRED **94**
 PLANNING ACTION **Plans**
 Land Use Approved By **DJS** Date **11-2-73**

FEES AND BONDS

AMOUNT	REQ'D	PROVIDED
PARCEL MAP	No	
R/W DEDICATION	No	11-1-73 P.M.
STREET BOND	No	
WATER BOND	Yes	
WATER ASSMT. FEE	Yes	Yes
FIRE HYDRANT FEE	Yes	Yes
PARKWAY TREE FEE	No	
PARK R. REC. FEE (DIST.)	No	
DRAIN ASSMT. FEE (DIST.)	Yes	Yes

Remarks: **PLANS**

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location	12-7-73	<i>[Signature]</i>
Reinforcing		
Roof Shtg.	11-22-74	<i>[Signature]</i>
Rough Frame		
Lath or Drywall	1-2-75	<i>[Signature]</i>
Mrs. Brown Ct.	1-3-75	<i>[Signature]</i>
Parking	12/1/75	<i>Greg LaPierre</i>
Landscaping	12/1/75	<i>Greg LaPierre</i>
Land Use Cond.	12/1/75	<i>Greg LaPierre</i>
Final	12-2-75	<i>[Signature]</i>
Utility Release	12-2-75	<i>[Signature]</i>

VALUATION: NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT, ETC. **123,000.00**

FEES

Plan Check \$ **124.75** Building Permit \$ **249.50**
 Permit Authorized By *[Signature]* Date **11-2-73**

INSTRUCTIONS: 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 **11711 Trask** Permit No. **06623E**
 Lot No. Tract No. Blk. No. **P.C. 2186**
 Owner **Wespal assembly church** Tel. No. **8972473**
 Mailing Address **6592 Sutton ave Westminster 92683** City Zip No.
 Arch. State Lic. No.
 Engr. Tel. No.
 Mailing Address City Zip No.

Contractor **owner** Lic. No. **8972473**
 Mailing Address **6592 Sutton ave Westminster 92683** City Zip No.
 PRESENT BLDG. USE PROPOSED BLDG. USE

Validation **SEP-7-73** **11 064 M***12475**
NOV-2-73 **11 065 M***24950**

DESCRIBE WORK TO BE DONE **New Church**

NEW . ADD'N . ALTER. . REPAIR . DEMOLISH

FLOOR AREA (SQ. FT.) **682** NO. OF STORIES **1** NO. OF DWELLING UNITS

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

CONTRACTORS SIGN BELOW

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

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 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 the sole compensation. I will furnish insurance for my employees as required by the Labor Code of California.

[Signature]
Owner's Signature Authorized Agent Date

If work is not started within 60 days from date of issue or if abandoned for more than 120 days, this permit will be null and void.

RELOCATION

PRESENT BLDG. ADDRESS

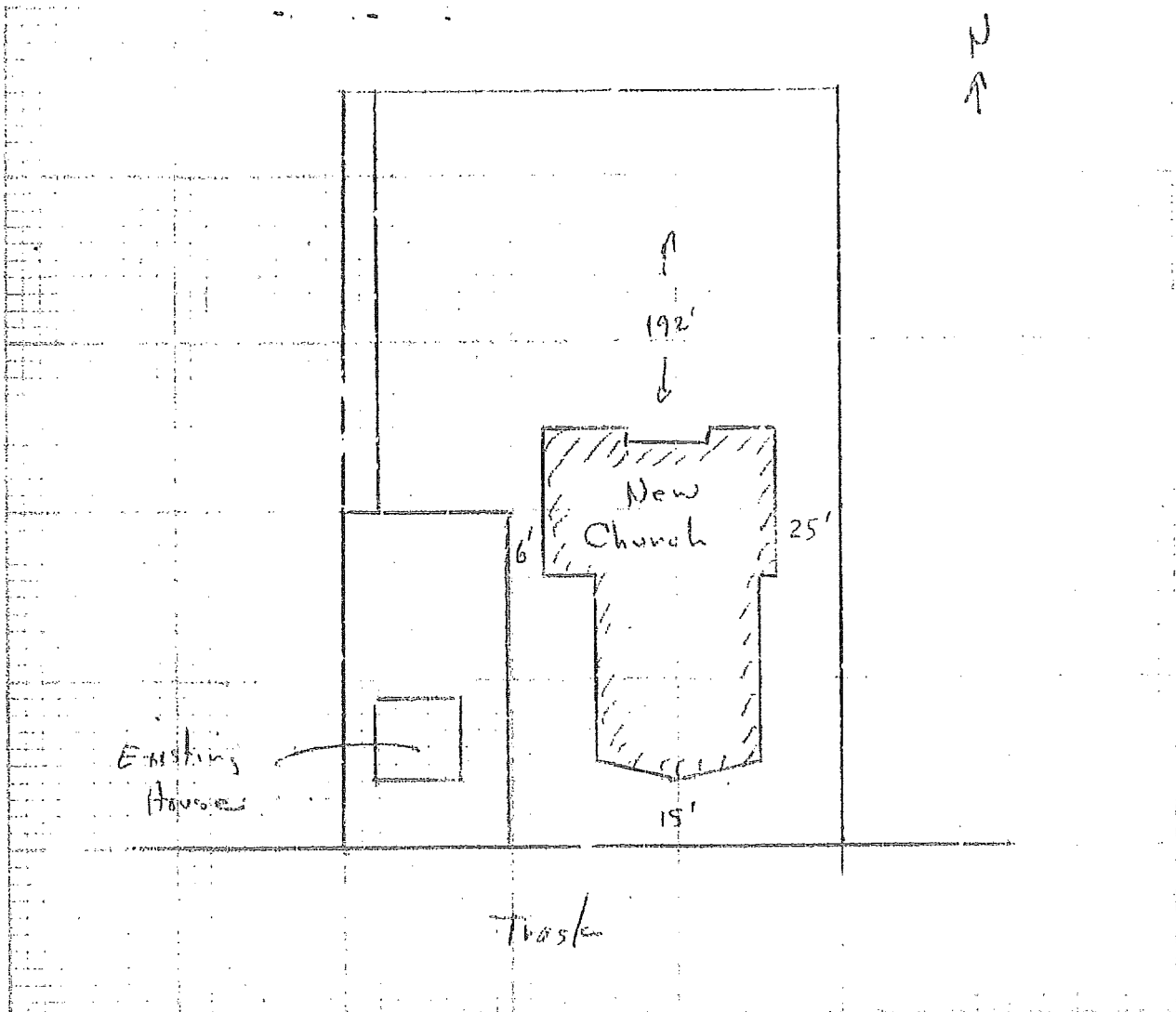
MOVING CONTRACTOR ADDRESS

ORIGINAL

BUILDING PERMIT PLOT PLAN
 Development Services Department
 CITY OF GARDEN GROVE

JOB ADDRESS <i>11711 Trask</i>			PERMIT NO. <i>66235A</i>
ASSESSORS PARCEL NO. <i>100-362-22</i>	LOT	BLOCK	TRACT
PLOT PLAN APPROVED BY <i>[Signature]</i>			JOB DESCRIPTION (PLEASE CHECK) <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish
OWNER <i>GOSPEL ASSEMBLY CHURCH</i>	DATE <i>11-2-73</i>	USE <i>New Church</i>	PERMIT VALUE <i>\$123000</i>

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



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

Date _____

BUILDING PERMIT

DEVELOPMENT SERVICES DEPT., GARDEN GROVE 638-6771

FIRE ZONE	OCCU. PANCY	TYPE				OCC. LOAD
USE ZONE		FRONT	LEFT	RIGHT	REAR	
PARK SPACES REQUIRED	EAVE PROJ. SETBACKS	No Change				
PLANNING ACTION	Land Use Approved By _____ Date _____					

	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. 1)			
DRAIN ASSMT. FEE (DIST. 1)			

Not Required

Remarks: _____

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and location		
Reinforcing		
Roof Shtg.		
Rough Frame		
Lath or Drywall		
Plas. Brown Ct.		
Parking		
Landscaping		
Land Use Cond.		
Final	12-17-73	[Signature]
Utility Release		

VALUATION NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT., ETC. \$ 500.00

FEES

Plan Check \$ _____ Building Permit \$ 500

Permit Authorized By [Signature] Date 9-21-73

INSTRUCTIONS: 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 11711 Trask
 Permit No. 65214 A
 Lot No. _____ Tract No. _____ Blk. No. _____

Owner [Signature]
 Mailing Address 6597 Sulton
 City Westminister
 State Lic. No. _____
 Tel. No. 8972473
 Zip No. 92683

Contractor [Signature]
 Mailing Address _____
 Lic. No. _____
 Tel. No. _____
 City _____ Zip No. _____

PRESENT BLDG. USE House
 PROPOSED BLDG. USE _____

Validation SEP 21-73 11 084 M *****5.00

DESCRIBE WORK TO BE DONE demo house

NEW ADD'N ALTER REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) _____ 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.
 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 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 60 days from date of issue or if abandoned for more than 120 days, this permit will be null and void.

RELOCATION

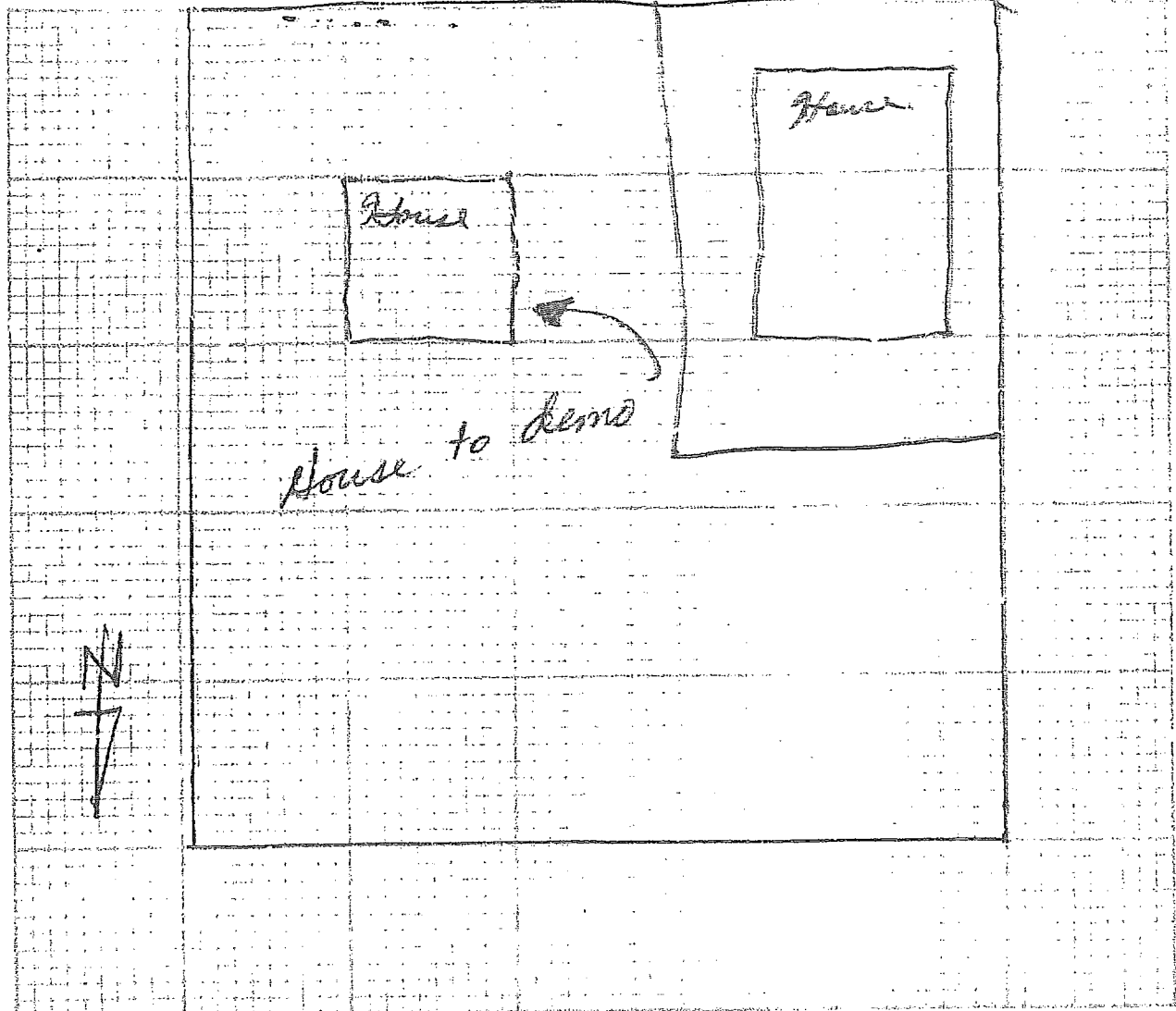
PRESENT BLDG. ADDRESS _____

MOVING CONTRACTOR ADDRESS _____

BUILDING PERMIT PLOT PLAN
 Development Services Department
 CITY OF GARDEN GROVE

JOB ADDRESS 81711 <i>Truck</i>			PERMIT NO. 65214 A
ASSESSORS PARCEL NO. 100-362-22	LOT	BLOCK	TRACT
JOB DESCRIPTION (PLEASE CHECK) <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input checked="" type="checkbox"/> Demolish			PERMIT VALUE \$500.00
PLOT PLAN APPROVED BY		DATE 9-21-73	USE House
OWNER			

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



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

**PROVIDING PERMIT
DEVELOPMENT SERVICES DEPT.
GARDEN GROVE, CAL. 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.

For Applicant to Fill in (Please Print)

PERMIT FEES

NO.	TYPE OF FIXTURE OR ITEM	EACH	\$ FEE
6	Water Closet (toilet)	\$1.50	9 00
	Bath Tub	1.50	
2	Shower	1.50	3 00
6	Lavatory (Wash Basin)	1.50	9 00
1	Kitchen Sink	1.50	1 50
1	Garbage Disposal	1.50	1 50
	Laundry Tub or Tray	1.50	
1	Water Heater	1.50	1 50
	Floor Sink	1.50	
8	Floor Drain	1.50	4 50
1	Dish Washer	1.50	1 50
2	Drinking Fountain	1.50	3 00
1	Urinal	1.50	1 50
1	Gas System - Outlets	1.50	1 50
1	Building Sewer (First 100 ft.)	5.00	5 00
	Building Sewer (Add'l 100 ft.)	2.00	
	Building Sewer (ea. add'l drain)	2.00	
	Rainwater Drain	2.00	
	Swimming Pool Piping	1.50	
	Sand Traps/Receptors	1.50	
	Automatic Washing Machine	1.50	
	Water Softeners	1.50	
	Backwash - Trip	1.50	
1	Water Lateral	1.50	1 50
	Backflow Protective Devices	2.00	
	Water Piping (ea. 100 ft.)	2.00	
	Lawn Sprinklers (Single Dwellings Only)	2.00	
	Lawn Sprinklers (other)	5.00	

Address **11711 TRASK** Permit No. **66978A**

Lot No. _____ Tract No. _____

Owner **GOSPEL ASSEMBLY CHURCH**

Owner's Address **11711 TRASK**

Plumbing Contractor **OWNER**

Contractor's Address _____ City _____

Phone **897-2473** State License No. _____

Occupancy **B-2**

New Bldg. VALIDATION

Exist. Bldg. **DEC 11-73 11 057 N 44447.00**

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

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

Signature of Permittee **Rev. Alvin L. Ray** Date **12-11-73**

INSPECTION RECORD

APPROVALS	DATE	INSPECTOR
Soil Piping	12-18-73	UD
Ground Plumbing		
Rough Plumbing	5/16/74	UD
Gas Piping		
Gas Vent		
Sewer		
Main D. and Vacuum Lines		
Water Heater		
Backwash		
Water Lateral		

ISSUANCE OF PERMIT 3 00

FEES

Plan Check \$ _____ Plumbing Permit \$ **47 00**

Permit Authorized By **RJR** Date **11 Dec 73**

FINAL **12-17-73** **UD**

UTILITY CO. NOTIFIED **12-2-73** **UD**

I, INSPECTOR

Bldg. Permit # **66235A**

BUILDING PERMIT

DEVELOPMENT SERVICES DEPT., GARDEN GROVE 630-6771

FIRE ZONE	OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.	
USE ZONE		FRONT	LEFT	RIGHT	REAR	
PARK SPACES REQUIRED	EAVE (PROJ.) SETBACKS					

PLANNING ACTION: *Std plan*

LAND USE APPROVED BY: _____ DATE: _____

FEES AND BONDS *ok g/j*

	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.S. SANT. DIS. FEE REQ'D	O.C. SANT. DIS. FEE REQ'D	DATE	INITIAL

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION	<i>9/16/75</i>	
REINFORCING		
ROOF SHTG.		
ROUGH FRAME		
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL	<i>9-20-75</i>	<i>WJ</i>
UTILITY RELEASE		

NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT., ETC. \$ *4500.00*

FEES

PLAN CHECK \$ *16.00* BUILDING PERMIT \$ *3200*

PERMIT AUTHORIZED BY: *RJ* DATE: *9-15-75*
 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: *11711 Trook ave* PERM: *580213A*
 LOT NO. TRACT NO. BLK NO.

OWNER: *Rev Alvin Ray* TEL. NO. *897-2473*
 MAILING ADDRESS: _____ CITY: _____ ZIP: _____

11711 Trook ave, Garden Grove
 ARCH STATE LIC. NO. _____
 ENGR. TEL. NO. _____
 MAILING ADDRESS: _____ CITY: _____ ZIP: _____

CONTRACTOR: *Modern Const. Co.* LIC. NO. _____
 MAILING ADDRESS: _____ TEL. NO. *92203*
 CITY: _____ ZIP: _____

VALIDATION: _____

SEP 15-75 11 006 M***16.00
 SEP 15-75 11 005 M***32.00

PRESENT BLDG. USE: *6" block* PROPOSED BLDG. USE: _____

DESCRIBE WORK TO BE DONE: *6" block wall*

NEW ADD'N. ALTER. REPAIR DEMOLISH

FLOOR AREA (SQ. FT.): _____ 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.
Modern Const. Co. By *E. R. Owen*
 Contractor Authorized Agent Date: _____

OWNER-BUILDER SIGN BELOW

I certify that I am exempt from the provisions of Ch. 9, Div. 3, B and P Code (Contractor's License Law) because (check one):
 I am the owner of the above property and will personally perform the above work.
 I am the owner of the above property and I will contract to have all of the above work performed by licensed contractors.
 I am the owner of the above property and will employ persons to perform the above work with wages as their sole compensation. I will furnish insurance for my employees as required by the Labor Code of California.

Owner's Signature: _____ By *E. R. Owen* 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 REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

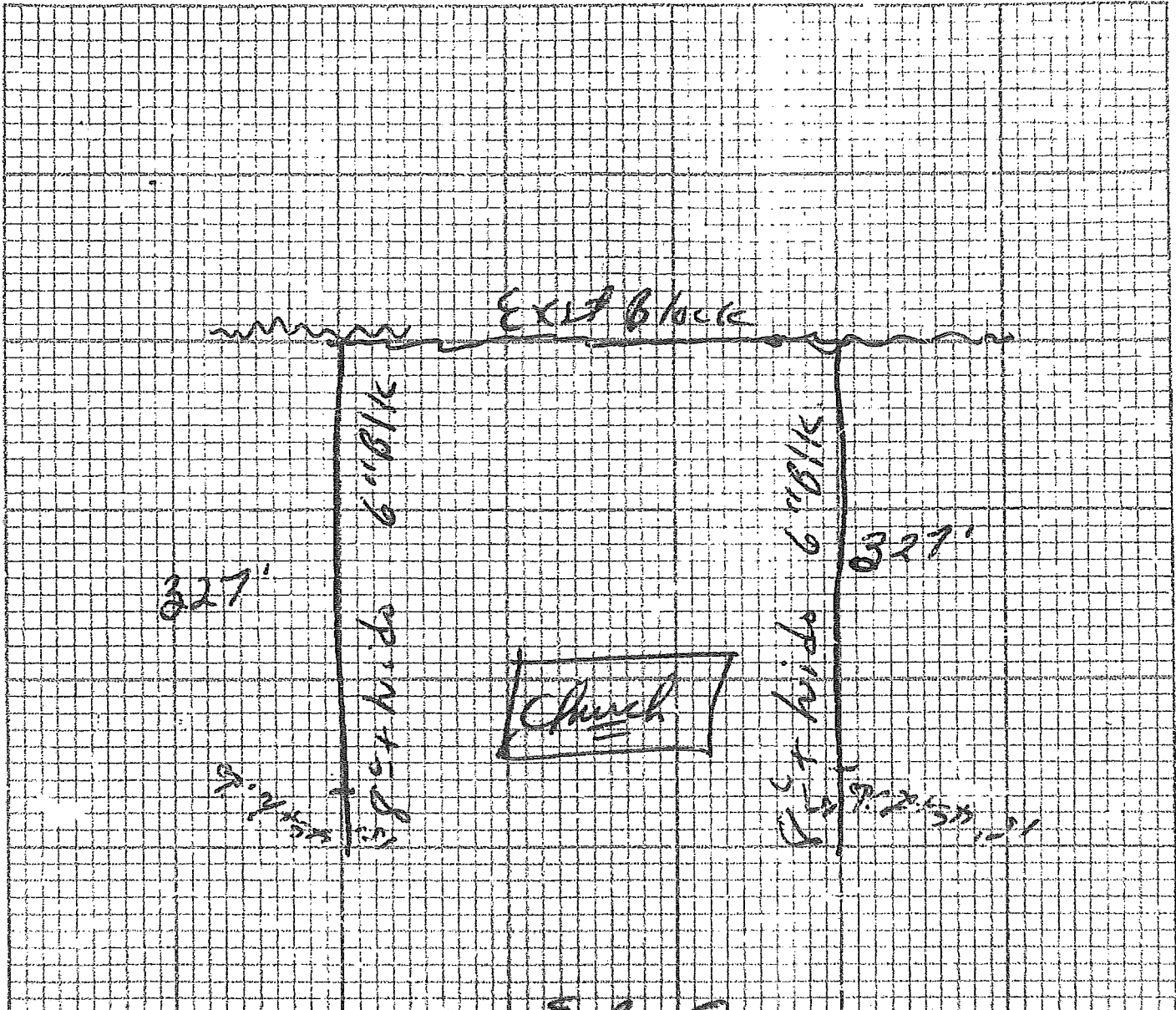
RELOCATION

PRESENT BLDG. ADDRESS: _____
 MOVING CONTRACTOR ADDRESS: _____

BUILDING PERMIT PLOT PLAN
Development Services Department
CITY OF GARDEN GROVE

JOB ADDRESS <i>11711 Trask Ave.</i>		PERMIT NO. <i>80213 A</i>	
ASSESSORS PARCEL NO. <i>100-362-34</i>	LOT	BLOCK	TRACT
JOB DESCRIPTION (PLEASE CHECK) <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish			
OWNER <i>Rev Alvin Ray</i>	DATE <i>9-15-75</i>	USE <i>6 5/8" H. 6" thick Block wall 6" thick</i>	PERMIT VALUE <i>\$4500.00</i>

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



#1 Building Insp. / #2 Assessor / #3 File / #4 Permittee
 I certify the information hereon is complete and correct. By *E.R. Owen* Date *9-15-75*

For Applicant to Fill In

E.C. # 2011

USE ZONE	R1	FRONT	10'	LEFT	10'4"	RIGHT	10'	REAR	
FIRE ZONE	3	Eav Proj.							
PLANNING ACTION	NA	Satback	10'						
LAND USE APPROVED BY	D.B.	DATE	1-22-80						
REMARKS:	Winon. Mod - NO Parking lot Landscaping features per S.W. & D.B. 1-22-80								
PARCEL MAP		O.C. SANT. DIS. FEE REQ'D.		O.C. SANT. DIS. FEE REQ'D.		DATE		DATE	
REV. CODE		REQ'D	NO	PROVIDED		DATE		DATE	
AMOUNT		REQ'D	NO	PROVIDED		DATE		DATE	
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	529								27 40
BLDG. PLAN CHECK	520								165 62
BLDG. PERMIT FEE	226								248 26
ISSUANCE	535								6 00
VALUATION	67400.00								447 28
TOTAL FEES									
AUTHORIZED BY	J.P.Y.								1-23-80

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION	3/10/80	
CONCRETE FLOOR		
REINFORCING		
ROOF SHTG	5-13-80	W.F.
ROUGH FRAME		
INSULATION, ENERGY		
LATH OR DRYWALL	11-21-80	
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL	2-22-80	
UTILITY RELEASE		

IDENTIFICATION CODE

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. _____ Expiration Date _____

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

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

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

PERMIT APPLICANT SIGNATURE: Geo. Wm. & Gay DATE: 1-23-80

BUSINESS TAX CERTIFICATE INFORMATION

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

(PRINT) CONTRACTOR: _____ DATE _____

(SIGNATURE) CONTRACTOR: _____ DATE _____

(PRINT) PROPERTY OWNER: _____ DATE _____

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

ADDRESS: 1711 TRASK AVE. B. B.

OWNER: CHURCH. M. J. & S.

MAILING ADDRESS: GOSPEL ASSEMBLY 638 0215

MAILING ADDRESS: S.A.M.E.

ARCH ENGR. BARNET ADAMS

MAILING ADDRESS: 12753 BROOKHURST G6 92640

STATE LIC. NO. & TYPE: CE 10183

TEL. NO.: 636-0294

VALIDATION: 12/1/77

CONTRACTOR: OWNER

MAILING ADDRESS: Garden Grove

STATE LIC. NO.: 638-0215

PROPOSED BLDG. USE: REPAIR

DESCRIBE WORK MULTIPLE PURPOSE: RM WITH OFFICES OVER

NEW ADD'N ALTER. REPAIR DEMOLISH

FLOOR AREA (SQ. FT.): <u>2400</u>	NO. OF STORIES: <u>2</u>	NO. OF DWELLING UNITS: <u>0</u>
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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

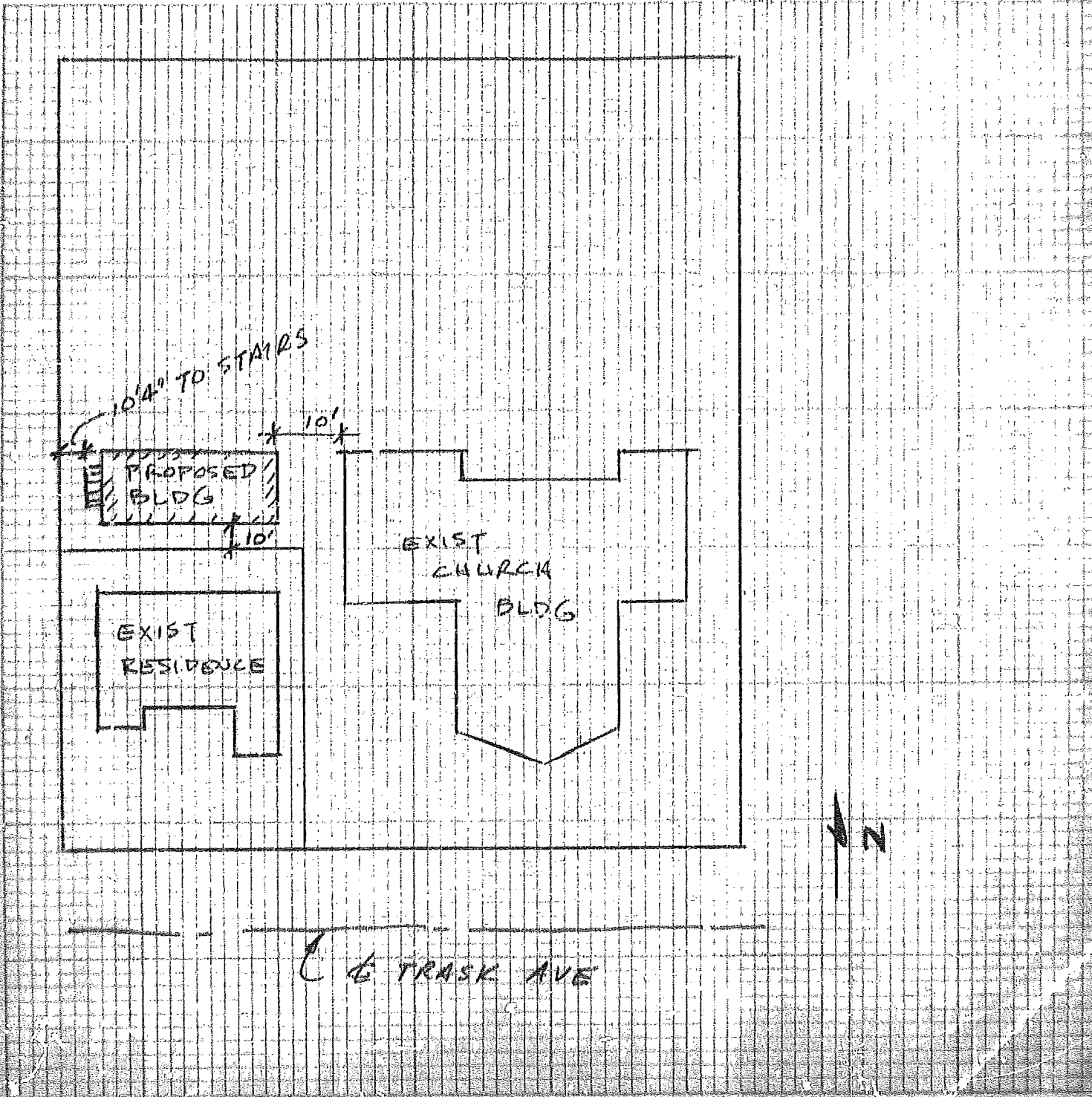
PRESENT BLDG. ADDRESS: _____

MOVING CONTRACTOR: _____

ADDRESS: _____

OWNER GOSPEL ASSEMBLY CHURCH		JOB ADDRESS 11711 TRASK AVE		PERMIT NO. 113995A
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSOR'S PARCEL NO. 100-362-24	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	CITY	DATE 1-23-80	JOB DESCRIPTION MULTIPURPOSE ROOM WITH OFFICES	PERMIT VALUE 67,900.00

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.





**CITY OF GARDEN GROVE
BUILDING SERVICES**

11711 TRASK AVE

PERMIT#:10-0909

ISSUED:4/13/10

General Info : 714-741-5307

Inspection Requests : 714-741-5332

Owner		Telephone	Zip	Building Address																							
SOUTHEASTERN CA CONFERENC ADVENTISTS,E SEVENTH-DAY			92843	11711 TRASK AVE																							
Address		City	State	Suite/Unit/Building																							
11711 TRASK AVE		Garden Grove	CA	TYPE Reroof																							
Applicant		Telephone	Zip	ISSUED BY Yoav Shernock																							
OSSCIN INC DBA ROYAL ROOFING CO		521-0100		Inspector Dist.	Parcel Number																						
Address		City	State	Q14	10036234																						
8111 COMMONWEALTH AVE				LOT	TRACT																						
State Licence		Expires	City Licence	Valuation																							
678705 C39		N/A		\$20,000.00																							
Contractor		Telephone	Zip	Final																							
OSSCIN INC DBA ROYAL ROOFING CO		521-0100		Inspector's Signature _____																							
Address		City	State	Date _____																							
8111 COMMONWEALTH AVE				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="6" style="font-size: 2em; vertical-align: middle; text-align: center;">F E E S</td> <td>Description</td> <td>Quantity</td> <td>Amount</td> </tr> <tr> <td>BSASRF State Fee</td> <td></td> <td>\$1.00</td> </tr> <tr> <td>Issuance Fee</td> <td>1</td> <td>\$35.00</td> </tr> <tr> <td>Reroof Permit Fee</td> <td></td> <td>\$330.50</td> </tr> <tr> <td>One-Stop Construction Services Center Surchage</td> <td></td> <td>\$6.61</td> </tr> <tr> <td>Reroof Valuation</td> <td>20000</td> <td>\$20,000.00</td> </tr> <tr> <td>TOTAL</td> <td></td> <td>\$373.11</td> </tr> </table>		F E E S	Description	Quantity	Amount	BSASRF State Fee		\$1.00	Issuance Fee	1	\$35.00	Reroof Permit Fee		\$330.50	One-Stop Construction Services Center Surchage		\$6.61	Reroof Valuation	20000	\$20,000.00	TOTAL		\$373.11
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TOTAL		\$373.11																									
State Licence		Expires	City Licence																								
678705 C39		N/A																									
Floor Area(sq. ft.)		Residential/Commercial																									
		Commercial																									
Job Description																											
ON LOW-SLOPE ROOF AT CHURCH, T/O EX. BUILT UP ROOF. INSTALL 1/2 CDX, 28# BASE, HOT MOP, WHITE CAPSHEET.																											
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																											
Print Name <u>RUSTY HARRIS</u> Date <u>4.13.10</u>																											

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.

EXPIRED

Permit Type: BLDG

ORIGINAL