



General Information: 714-741-5307

CITY OF GARDEN GROVE - DEVELOPMENT SERVICES DEPARTMENT

Inspection Requests: 714-741-5332

PERMIT (PAGE 2 of 2)

PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 7142 CHAPMAN AVE
 Suite :
 PERMIT NO. : 71425
 Permit Type : BUILDING
 Type : B7
 ALTERATIONS TO OTHER BUILDINGS
 Owner : KILROY REALTY L P
 Applicant : OWNER
 Appl Address : 7142 CHAPMAN AVE
 Phone :
 Insp Dist : ZB
 Date : 10/16/03
 Parcel No : 13134406

PROPOSED WORK:

CONVERT EXISTING PORTION OF WAREHOUSE INTO OFFICE SPACE.

Value : 150000
 Floor area : 0

FEEES

111 32509 Plan Check	1	1068.89
111 32410 Permit	1	1370.37
111 32401 issuance	1	35.00
111 32435 Strong Motion Fee (C	1	31.50
942 22130 General Plan	1	177.22
080 32550 Cultural Arts	1	87.29
111 32509 PLAN CHECK FEE CREDI	1	-979.81
064 32355 Traffic mitigation f	1	7522.00
082 32350 Drainage Assessment	7610	457.06
630 32701 GG USER FEE	3	650.25
630 32709 COMM A & A AVERAGE D	0882	7345.35
TOTAL		17765.12

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Pre Inspect		
Foundation		
Concrete Floor		
Reinforcing		
Masonry		
Roof Shtg		
Rough Frame		
Insul / Energy		
Drywall		
Lath		
Plas. Brown Ct.		
Landscaping		
Pre Gunite		
Pre Deck		
Pre Plaster		
Planning Final		
Bldg Final	3/8/04	
Utility Notified		

see permit 73422 for sign off

AUTHORIZATION

Issued By: jimc Date _____

DECLARATION

I certify that I have read this application/permit and state that the information on all pages of this document is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this City and County to enter upon the above mentioned property for inspection purposes.

Applicant's Signature Billy R Thompson
 Print Name Billy Thompson Date 3/4/04

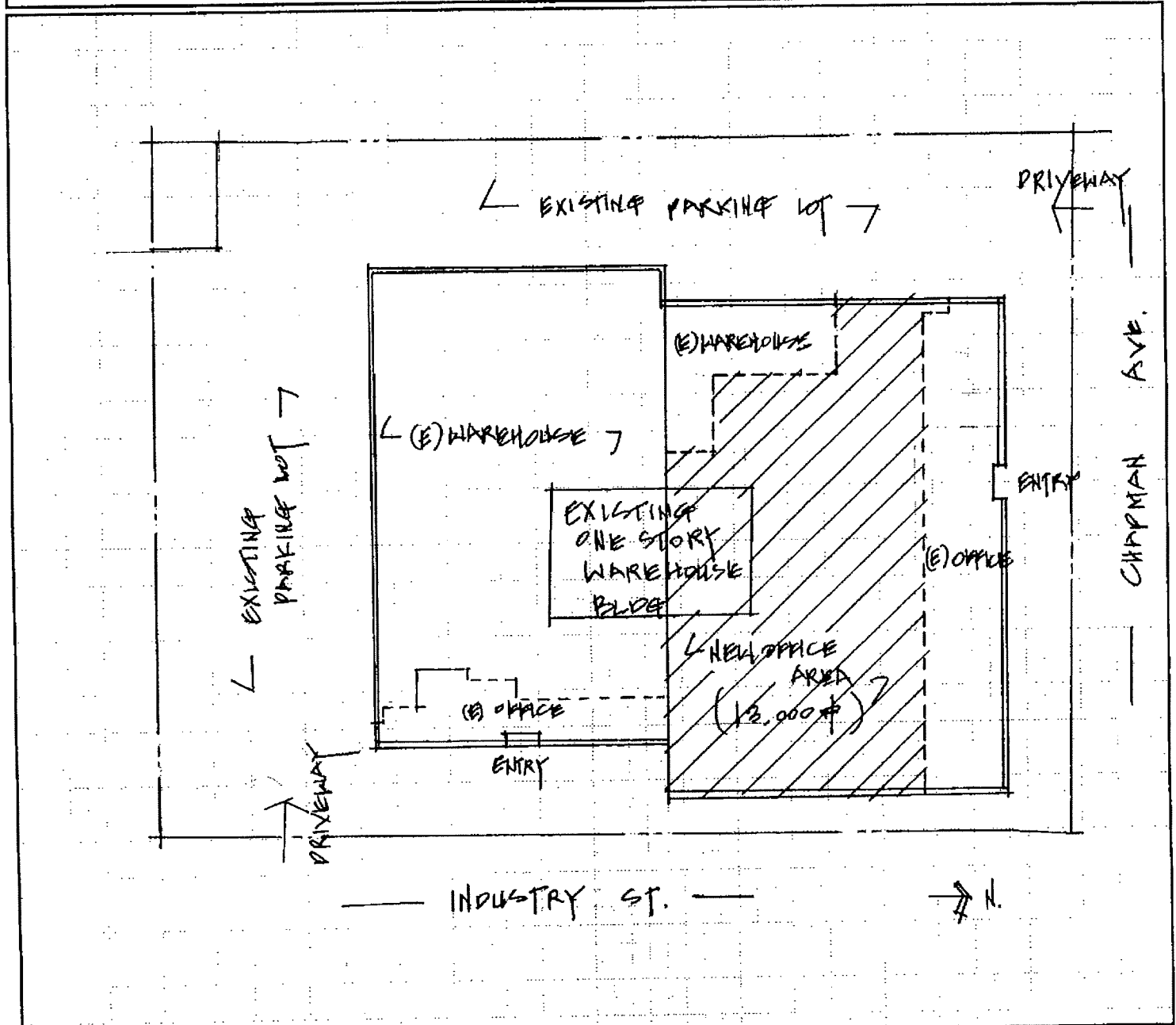
***** VALIDATION *****
 PAID ON 04 Mar 2004 AT 15:52
 RECEIVED BY LARAINEM 198.245.206.215/2 TRANS# 165
 AMOUNT PAID \$17765.12 BY CHECK#1735
 TOTAL PAID = \$17765.12

Plot Plan Form

Planning Action:	Zone:	Coverage:	Job Address: 7142 CHAPMAN AVE	Permit No.: 71425
Approved By: <i>NWS</i>	Date:	Increase:	Assessor Parcel No.: 13134406	Tract & Lot #:
Remarks: Per Deed Restriction (attached)			Occupancy: B/S-2	Const. Type: II-N
			New <input type="checkbox"/> Alter <input checked="" type="checkbox"/> Add <input type="checkbox"/> Repair <input type="checkbox"/> Demo <input type="checkbox"/>	Value: 150,000

Job Description:

CONVERT EXISTING PORTION OF WAREHOUSE AREA INTO OFFICE SPACE (13,000 #)



I certify the information hereon is complete & correct.

ERIC YU
Owner's Name (print)

[Signature]
Signature (owner/agent)

12-16-03
Date

(W)
60

G03987

208 V 3Ø4 WIRE RECESS MOUNTED 100 AMPERE MAIN 100 AMPERE BUS

DESCRIPTION	OUTLETS	Ø1 ØØ	PHASE	Ø1 ØØ	OUTLETS	DESCRIPTION	VOLTS	AMPERES
LIGHTING	11	20		22	3	RECEPTACLES	540	
	10				4		720	
	7				4		720	
	13				6		720	
	8				4		720	
RECEPTACLES	6				5		900	
	4				3		540	
	5				5		900	
	2				4		720	
	3				4		720	
DATE RECESS	2				1	REFRIGERATOR		1200
	2				2	RECEPTACLES	560	
RECEPTACLE	4				6		1080	
	3				4		720	
					4		720	
					4		720	
					4		720	
					3		720	
					3		720	
					2		360	
SUB-TOTALS							3600	5520

I W/A 30155
 ADD 1899
 W/A 32054
 AMPS 89.4

15
20

20

(S)

40

40

10

(15)

15

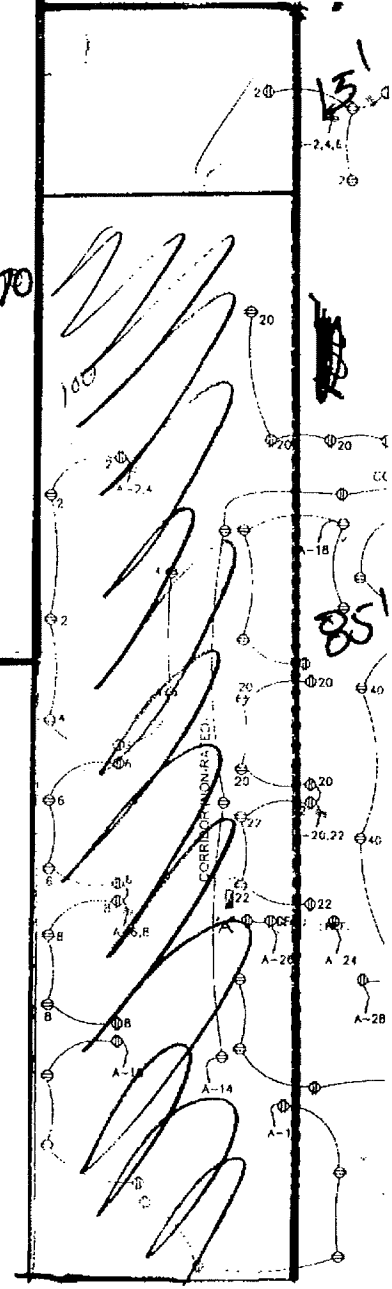
30



- Area of office conversion to warehouse = 2450 SF



- Area that was office and remains office = 1700 SF



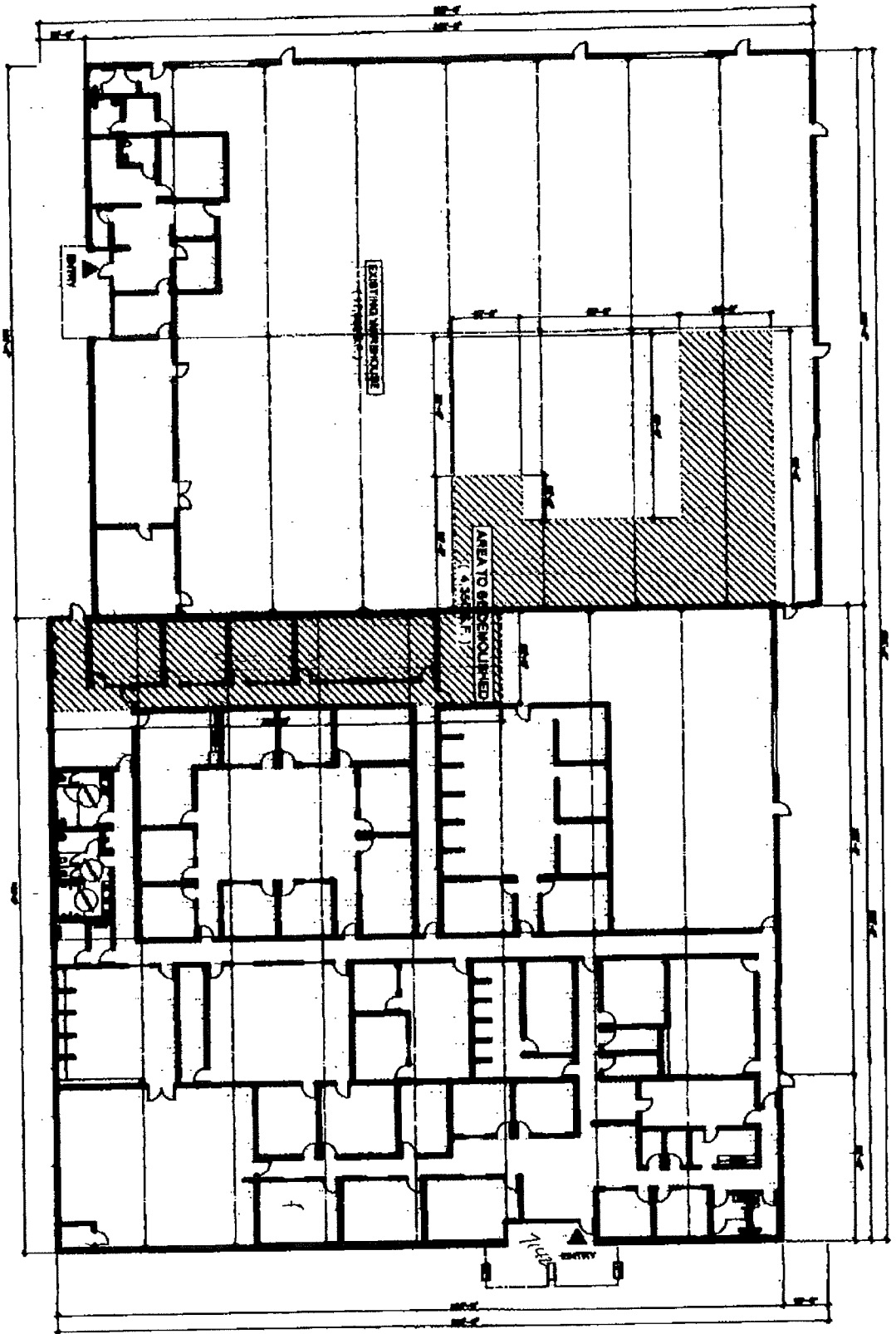
G03987

RECESS MOUNTED 100 AMPERE MAIN 100 AMPERE BUS

DESCRIPTION	OUTLETS	Ø1 ØØ	PHASE	Ø1 ØØ	OUTLETS	DESCRIPTION	VOLTS	AMPERES

(E)

7142 CHADMAN Av.
G. G.



DEMOLITION PLAN

- Legend
- Existing Walls
- Area to be Demolished
- North Arrow



General Information: 714-741-5307

CITY OF GARDEN GROVE - DEVELOPMENT SERVICES DEPARTMENT

Inspection Requests: 714-741-5332

PERMIT (PAGE 2 of 2)

PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 7142 CHAPMAN AVE
 Suite :
 PERMIT NO. : 73422
 Permit Type : BUILDING
 Type : B7
 Owner : KILROY REALTY L P
 Applicant : OWNER
 Appl Address : 7142 CHAPMAN AVE
 Phone :
 Insp Dist : H9
 Date : 07/15/04
 Parcel No : 13134406

PROPOSED WORK:

SUPPLEMENT TO PERMIT #71425/CHANGE OF CO
 TRACTOR/CONVERT EXIST. PORTION WAREHOUSE

FEES

111 32401 issuance	1	35.00
TOTAL		35.00

Value : 150000
 Floor area : 0

INSPECTION RECORD

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

AUTHORIZATION

Issued By: janetw _____ Date _____

DECLARATION

I certify that I have read this application/permit and state that the information on all pages of this document is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this City and County to enter upon the above mentioned property for inspection purposes.

Applicant's Signature Don Crowl

Print Name DON CROWL Date 7-14-04

***** VALIDATION *****
 PAID ON 15 Jul 2004 AT 16:31
 RECEIVED BY CAROLE 198.245.206.215/2 TRANS# 182
 AMOUNT PAID \$383.60 BY CHECK#7161
 TOTAL PAID = \$383.60



PERMIT (PAGE 2 of 2)

PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 7142 CHAPMAN AVE
 Suite :
 PERMIT NO. : 74637
 Permit Type :
 Type : H
 Owner : KILROY REALTY L P
 Applicant : CASCO CONTRACTORS INC
 Appl Address : 18 TECHNOLOGY STE 170
 IRVINE, CA 92618
 Phone : 949 679 6880
 Insp Dist : ZH
 Date : 07/15/04
 Parcel No : 13134406

PROPOSED WORK:

MECH FOR T.I. WAREHOUSE TO OFFICE SPACE.

FEES

111 32503 PLAN CHECK (\$60.00 M	1	60.00
111 32418 HEAT PUMPS TO 100,00	9	81.00
942 22130 GENERAL PLAN	1	2.00
080 32550 CULTURAL ARTS	1	1.00
111 32401 Issuance	1	35.00
111 32503 PLAN CHECK FEE CREDI	1	-60.00
TOTAL		119.00

APPROVAL DATE INSPECTOR
 INSPECTION RECORD

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

MAINS OK TO INSULATE 8/12/04

SOUTH OFFICE AREAS PHASE II 1-20-05 Amy
ROUGH DUCTS / DIFFUSERS OK

FINAL *2/1/05 [Signature]*
 Utility Notified _____

AUTHORIZATION

Issued By: janetw Date _____

DECLARATION

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Applicant's Signature [Signature]
 Print Name JEN CROWL Date 7-14-04

***** VALIDATION *****
 PAID ON 15 Jul 2004 AT 16:31
 RECEIVED BY CAROLE 198.245.206.215/2 TRANS# 182
 AMOUNT PAID \$383.60 BY CHECK#7161
 TOTAL PAID = \$383.60



General Information: 714-741-5307

CITY OF GARDEN GROVE - DEVELOPMENT SERVICES DEPARTMENT

Inspection Requests: 714-741-5332

PERMIT (PAGE 2 of 2)

PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 7142 CHAPMAN AVE
 Suite :
 PERMIT NO. : 74635
 Permit Type :
 Type : P

Owner : KILROY REALTY L P
 Applicant : CASCO CONTRACTORS INC
 Appl Address : 18 TECHNOLOGY STE 170
 IRVINE, CA 92618
 Phone : 949 679 6880

Insp Dist : ZP
 Date : 07/15/04
 Parcel No : 13134406

PROPOSED WORK:

PLBG FOR T.I. WAREHOUSE TO OFFICE SPACE.

FEES

111 32415 WATER CLOSET, BIDET	5	42.50
111 32415 Lavatory	4	34.00
111 32415 Laundry Tub or Tray	1	8.50
111 32415 Floor Drain	2	17.00
111 32415 Urinal	4	34.00
111 32501 PLAN CHECK (\$60.00 M	1	115.60
111 32501 PLAN CHECK FEE CREDI	1	-60.00
111 32401 Issuance	1	35.00
942 22130 GENERAL PLAN	1	2.00
080 32550 CULTURAL ARTS	1	1.00
TOTAL		229.60

APPROVAL DATE INSPECTOR
 Soil Piping 8/3/04 Anton
 Ground Plumbing _____
 Rough Plumbing 8/11/04 Anton
 Gas Piping _____
 Gas Vent _____
 Sewer _____
 Main Drain _____
 Vacuum Lines _____
 Water Heater _____
 Backwash _____
 Water Lateral _____

AUTHORIZATION

Issued By: janetw Date _____

DECLARATION

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Applicant's Signature Don Crowl

Print Name DON CROWL Date 7-14-04

***** VALIDATION *****
 PAID ON 15 Jul 2004 AT 16:31
 RECEIVED BY CAROLE 198.245.206.215/2 TRANS# 182
 AMOUNT PAID \$383.60 BY CHECK#7161
 TOTAL PAID = \$383.60



PERMIT (PAGE 2 of 2)

PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 7142 CHAPMAN AVE
 Suite :
 PERMIT NO. : 72787
 Permit Type :
 Type : E
 Owner : KILROY REALTY L P
 Applicant : TOPS ELECTRIC
 Appl Address : 2224 W JEFFERSON BLVD
 LOS ANGELES, CA 90018
 Phone : 323-732-0909
 Insp Dist : ZE
 Date : 04/01/04
 Parcel No : 13134406

PROPOSED WORK:

ELEC FOR T.I. WAREHOUSE TO OFFICE SPACE.

FEEES

111 32412 SUB-PANEL	2	40.00
111 32412 OUTLETS 1-10	10	9.00
111 32412 OUTLETS, OVER 10	187	121.55
111 32412 Fixtures 1-10	10	9.00
111 32412 fixtures over 10	120	78.00
111 32412 PWR APPAR 1-10 HP	8	96.00
111 32412 Time Clock	1	4.50
111 32505 PLAN CHECK (\$60.00 M	1	304.34
111 32505 PLAN CHECK FEE CREDI	1	-60.00
111 32401 Issuance	1	35.00
942 22130 GENERAL PLAN	1	2.00
080 32550 CULTURAL ARTS	1	1.00
TOTAL		640.39

APPROVAL _____ DATE _____ INSPECTOR _____
INSPECTION RECORD
 Underground _____
 Conduit _____
 Wiring - Rough 2-2-05 T.H
 Heater _____
 Fixtures & Trim _____
 Motors _____
 Ufer _____
 Service _____

AUTHORIZATION

Issued By: valq _____ Date _____

DECLARATION

I certify that I have read this application/permit and state that the information on all pages of this document is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this City and County to enter upon the above mentioned property for inspection purposes.

Applicant's Signature Jay Woo

Print Name JAY WOO Date 4-1-04

***** VALIDATION *****
 PAID ON 01 Apr 2004 AT 14:40
 RECEIVED BY CAROLE 198.245.206.215/2 TRANS# 97
 AMOUNT PAID \$640.39 BY CHECK#3559
 TOTAL PAID = \$640.39



PERMIT (PAGE 2 of 2)

PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 7142 CHAPMAN AVE
 Suite :
 PERMIT NO. : 74642
 Permit Type :
 Type : E
 Owner : TIME WARNER
 Applicant : FUNK E INC
 Appl Address : 31500 GRAPE ST 3-316
 LAKE ELSINORE, CA 92532
 Phone : 909 246 2751
 Insp Dist : ZE
 Date : 07/16/04
 Parcel No : 13134406

PROPOSED WORK:

CHANGE OF CONTRACTOR/SUPPLEMENT TO PERMIT #72787/CONVERT PORTION OF WH

FEEES

111 32401 Issuance	1	35.00
TOTAL		35.00

APPROVAL _____ DATE _____ INSPECTOR _____
INSPECTION RECORD
 Underground _____
 Conduit _____
 Wiring - Rough 2-2-05
 Heater _____
 Fixtures & Trim _____
 Motors _____
 Ufer _____
 Service _____

FINAL 2-8-05 T.H
 Utility Notified _____

***** VALIDATION *****
 PAID ON 16 Jul 2004 AT 13:17
 RECEIVED BY CAROLE 198.245.206.215/2 TRANS# 94
 AMOUNT PAID \$35.00 BY CHECK#2425
 TOTAL PAID = \$35.00

AUTHORIZATION

Issued By: janetw Date _____

DECLARATION

I certify that I have read this application/permit and state that the information on all pages of this document is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this City and County to enter upon the above mentioned property for inspection purposes.

Applicant's Signature [Signature]
 Print Name John BERRY Date 7-16-04

CERTIFICATE OF OCCUPANCY

2

DEPARTMENT OF BUILDING

CITY OF GARDEN GROVE

HARRY R. PEIRCE, Director

11391 ACACIA

JOB ADDRESS 7142 Chapman Ave. PERMIT NO. 40212-A

USE OF BUILDING Industrial GROUP F-2 TYPE III-M

USE-ZONE M-2 APPROVED BY W. E. Miller DATE 3/23/71

ZONING REMARKS V-117-59

Floor load sign installed per Section 2308 Yes No

Room capacity sign installed per section 3301 (1) Yes No

The above described building has been inspected and found to comply with the provisions of the Uniform Building Code.

ISSUED TO Assoc. Southern Invest. Co. ADDRESS 100 Long Beach Blvd., L.B.

Authorized By D. R. Minley, P.E., Insp. Inspector DATE April 23, 1971

Notice! Post in a Conspicuous Place on the Premises

BUILDING PERMIT

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

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

FIRE ZONE **K** OCCU. PANCY **F-2** TYPE **III** OCC. LOAD **IV**

Job Address **7142 Chapman** Permit No. **40212A**
Lot No. _____ Tract No. **P.C. 21805**

REMARKS **Plans**

Owner **ASSO SO. INV. Co** Tel. No. **612 55338**

USE ZONE	SETBACKS	PARK SPACES REQUIRED			
		FRONT	LEFT	RIGHT	REAR
M-P	EAVE PROJ.				

Mailing Address **100 LONG BEACH BLVD Long Beach** City **Long Beach** Zip No. _____
State Lic. No. **025101** Tel. No. **6345057**

PLANNING ACTION _____ PARK SPACES REQUIRED _____

Arch. Engr. **RP ZAMBONI** City _____ Zip No. _____
Mailing Address _____ City _____ Zip No. _____

Zoning Approved By **[Signature]** Date **6-15-70**

Contractor **WILKATLAND Const** Lic. No. **160623**
Tel. No. **02-8-7541** City _____ Zip No. _____

Remarks: **V-117-69 L.S. 107-70**

Mailing Address **PO Box 808 PERRIS** City **PERRIS** Zip No. **90723**

PUBLIC WORKS

PRESENT BLDG. USE _____ PROPOSED BLDG. USE **F2**

	Amount	Req'd	Provided
Parcel Map		Yes	Yes
R/W Dedication		Yes	Yes
Bonds			
Street Bond		Net	
Water Bond		Net	
Water Assmt. Fee		Net	
Fire Hydrant F.F. Fee		Net	
Parkway Tree Fee	74.34	Yes	Yes
Landscape Bond		Net	

Validation **[Signature]** **11 000**

Remarks _____

DESCRIBE WORK TO BE DONE **New Ind. Bldg**

INSPECTION RECORD

NEW ADD'N ALTER. REPAIR DEMOLISH

APPROVAL	DATE	INSPECTOR
Foundation and Location		[Signature]
Reinforcing		
Roof Shtg.	9-2-70	[Signature]
Rough Frame	8-2-70	[Signature]
Lath or Drywall	9-21-70	[Signature]
Plas. Brown Ct.	10-8-70	[Signature]
Other		
Final	3-29-71	[Signature]
Utility Release	3-30-71	[Signature]

FLOOR AREA (SQ. FT.) **41,800** 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.
Wilkatland Const By **[Signature]** Date **6/15/70**
Contractor Authorized Agent

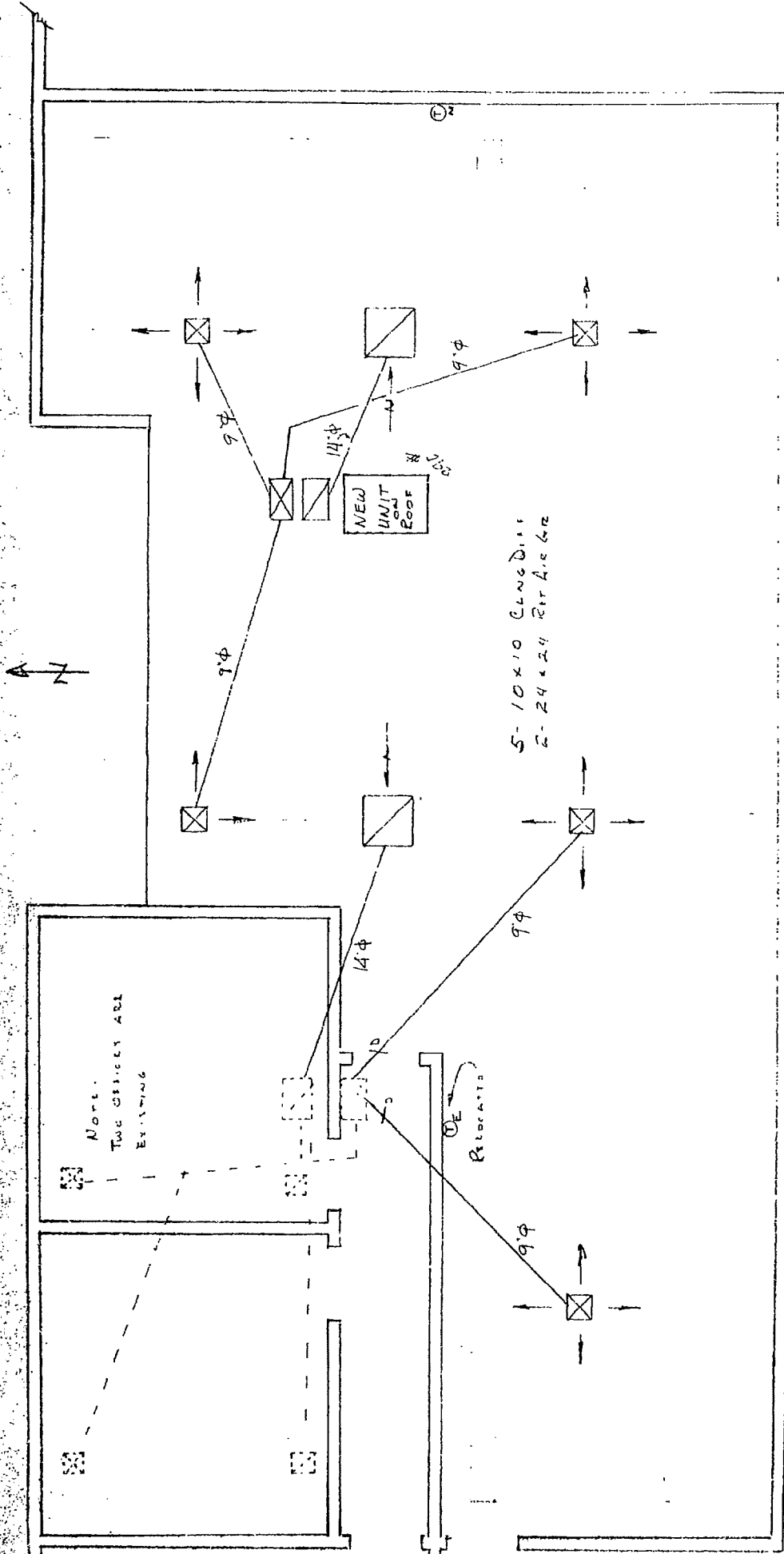
OWNER-BUILDER SIGN BELOW
I certify that I am exempt from the provisions of Ch. 9, Div. 3, B and P, Code (Contractor's License Law) because (check one):
 I am the owner of the above property and will personally perform the above work.
 I am the owner of the above property and I will contract to have all 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.

VALUATION NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT, ETC. \$ **220,000.00**

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.

FEES	
Plan Check	\$ 273.25
Bond	\$ _____
Building Permit	\$ 546.50
Expiration Date	
Permit Authorized By	[Signature]
Date	6-15-70

RELOCATION
PRESENT BLDG. ADDRESS _____
MOVING CONTRACTOR ADDRESS _____



Note:
TWO OFFICES ARE
EXISTING

NEW UNIT
ROOF

5-10x10 CONDENSERS
2-24x24 RETURN AIR GR

RELOCATE

MODIFICATION OF OFFICES FOR
ASSOCIATED ENTERPRISE INV CO.
7142 CHADWICK AVE GARDEN GROVE
BUILDING #2 BY HOBART MFG CO.
CIMCO AIR CONDITIONING SYSTEMS
9226 NORWALK BLVD
SANTA FE SPRINGS
FEB. 23, 1971 PHONE (213) 692-0969
JOB NO 124B

EQUIPMENT SCHEDULE
1- LENOX MODEL CHPA-201 208-230VOLT 1φ 17.9 FLAMP

BUILDING PERMIT PLOT PLAN

Department of Building
CITY OF GARDEN GROVE

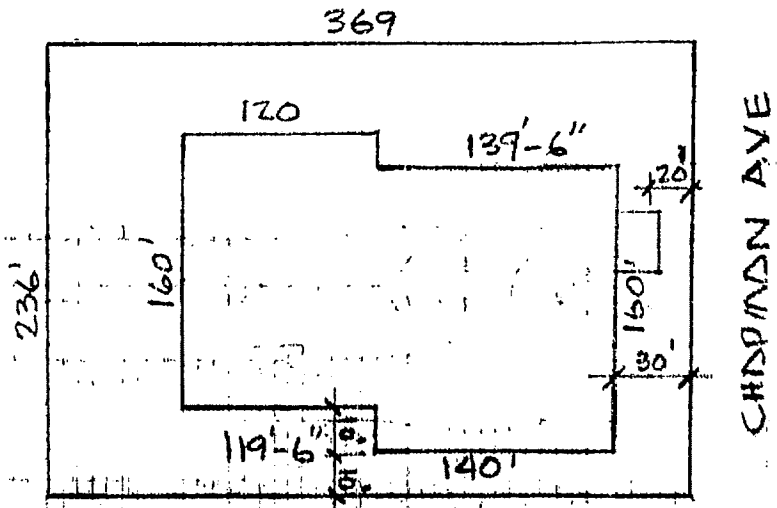
1

ASSESSOR'S PARCEL NO. 131-341-06	DATE 6-15-70	PERMIT NO. 40212A
JOB ADDRESS AND CITY 7142 Chapman		
NAME OF CONSTRUCTION LENDER & BRANCH	LEGAL DESCRIPTION TRACT	LOT BLOCK
ADDRESS CITY	JOB DESCRIPTION (PLEASE CHECK) <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish	
PLANNING DEPT. APPROVAL <i>[Signature]</i>	DATE 6-15-70	OWNER Asso. So. Inv. Co. <i>[Signature]</i>
		PERMIT VALUE \$220,000.00

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

New
Ind.
Bldg.

P.C. 1895



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

Date _____



General Information: 714-741-5307

CITY OF GARDEN GROVE - DEVELOPMENT SERVICES DEPARTMENT

Inspection Requests: 714-741-5332

PERMIT (PAGE 2 of 2)

PROJECT/SITE/BUILDING DESCRIPTION

JOB Address : 7142 CHAPMAN AVE
 Suite :
 PERMIT NO. : 94526
 Permit Type : DEMO
 Type : B15
 DEMOLITIONS - OTHERS
 Owner :
 Applicant :
 Phone :
 Contractor : QUALITY CARPENTRY & CONSTRUCTI
 Address : 424 SOUTH COOKS CORNER RD.
 CityStZip : ANAHEIM, CA 92808
 Phone : 714-469-6413
 Insp Dist : ZB
 Date : 05/15/08
 Parcel No : 13134406 13134408
 Value : 4000
 Floor area : 0

PROPOSED WORK:

O38 - DEMO OTHER
 REMOVE AWNING FROM COMMERCIAL BUILDING

FEES

111 32410 Permit	1	120.87
111 32401 issuance	1	35.00
942 22130 General Plan	1	6.03
080 32550 Cultural Arts	1	2.97
TOTAL		164.87

APPROVAL	DATE	INSPECTOR
Pre Inspect		
Foundation		
Concrete Floor		
Reinforcing		
Masonry		
Roof Shtg		
Rough Frame		
Insul / Energy		
Drywall		
Lath		
Plas.Brown Ct.		
Landscaping		
Pre Gunite		
Pre Deck		
Pre Plaster		
Planning Final		
Bldg Final	5/22/08	[Signature]
Utility Notified		

AUTHORIZATION

Issued By: yoavs. Date

DECLARATION

I certify that I have read this application/permit and state that the information on all pages of this document is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this City and County to enter upon the above mentioned property for inspection purposes.

Applicant's Signature [Signature]

Print Name TIME RADULOVICH Date 5-15-08

***** VALIDATION *****
 PAID ON 15 May 2008 AT 09:38
 RECEIVED BY YESENIAV 198.245.206.215/2 TRANS# 39
 CASH PAID = \$164.87 CASH RETURNED = \$0.00
 TOTAL PAID = \$164.87



**CITY OF GARDEN GROVE
BUILDING SERVICES**

General Info : 714-741-5307
Inspection Requests : 855-380-8758

7142 CHAPMAN AVE

PERMIT#:15-3225

ISSUED:12/1/15

Owner			Telephone	Zip	Building Address		
THE REALTY ASSOC FUND X/TIME WARNER			(714) 540-5655	92707	7142 CHAPMAN AVE		
Address			City	State	Suite/Unit/Building		
201 E SANDPOINTE SUITE 470			SANTA ANA	CA	TIME WARNER		
Applicant			Telephone	Zip	TYPE		ISSUED BY
BISHOFF, RYAN			(949) 862-8515	92612	Tenant Improvement		Lizabeth Vasquez
Address			City	State	Inspector Dist.	Parcel Number	LOT
18831 VON KARMAN AVE #240			IRVINE	CA	H9	13134408	
Contractor			Telephone	Zip	Valuation		
GAGNIER CONSTRUCTION COMPANY INC			(951) 789-1123	92504	\$20,000.00		
Address			City	State	Final		
16702 FOX GLEN ROAD STE A			RIVERSIDE	CA	Inspector's Signature <i>[Signature]</i>		
State Licence			Expires	City Licence	Expires	Date <u>3-3-16</u>	
467205			12/31/16				
Floor Area(sq. ft.)		Residential/Commercial					
		Commercial					
Job Description							
VOLUNTARY SEISMIC RETROFIT-ROOF/INCLUDES ADDTN OF CONCRETE WALL TO ROOF FRAMING ANCHORS & TIES							
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 <i>[Signature]</i>							
Print Name <u>Tommy Green</u> Date <u>12/1/15</u>							
F E E S				Description		Quantity	Amount
				General Plan Update Fee, Valuation			\$24.67
				Cultural Arts Fee, Valuation			\$12.33
				One-Stop Permit Center Surcharge			\$6.61
				Building Permit Fee			\$330.50
				Issuance Fee		1	\$35.00
				BSASRF State Fee			\$1.00
				Plan Retention		4	\$16.00
				Building Technology Fee		1	\$10.00
				Building Permit Document Retention Fee		1	\$5.00
Plan Check Fee - Disabled Access (Commercial)		1	\$21.91				
Plan Check Fee			\$219.12				
TOTAL			\$682.14				

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: BLDG

ORIGINAL

BUILDING PERMIT

DEVELOPMENT SERVICES DEPT., GARDEN GROVE 537-4200

FIRE ZONE	OCCUPANCY	E-2 TYPE V				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

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

Handwritten notes: NOT, REQ'D

Remarks:
NO PLANS

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location		
Reinforcing		
Roof Shtg.		
Rough Frame	7/9/71	EB
Lath or Drywall		
Plas. Brown Ct.		
Other		
Final	5-26-71	LL
Utility Release		

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

FEES

Plan Check \$ **25.00** Building Perr' \$ **5.00**
 Permit Authorized By **E.L.M.** Date **2-9-71**
 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.

Job Address **7142 CHAPMAN** Permit No. **046677 A**

Lot No. _____ Tract No. _____

Owner **ASSOC. S. IN...** Tel. No. _____

Mailing Address **LONG BEACH RD LONG BEACH** City **LONG BEACH** Zip No. _____

Arch. **ZAMBONA** State Lic. No. _____
 Engr. _____ Tel. No. _____

Mailing Address _____ City _____ Zip No. _____

Contractor _____ Lic. No. _____
 Tel. No. _____

Mailing Address _____ City _____ Zip No. _____

PRESENT BLDG. USE _____ PROPOSED BLDG. USE **TOILET ROOM**

Validation **2-9-71 11 017 H*****5.00**

Validation **2-9-71 11 016 H*****2.50**

DESCRIBE WORK TO BE DONE **ADD 5'x5' TOILET ROOM**

NEW ADD'N ALTER. REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) **25** 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.
 W. DEATLAND CONSULT By *[Signature]*
 Contractor Authorized Agent Date

OWNER-BUILDER SIGN BELOW

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

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

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 _____

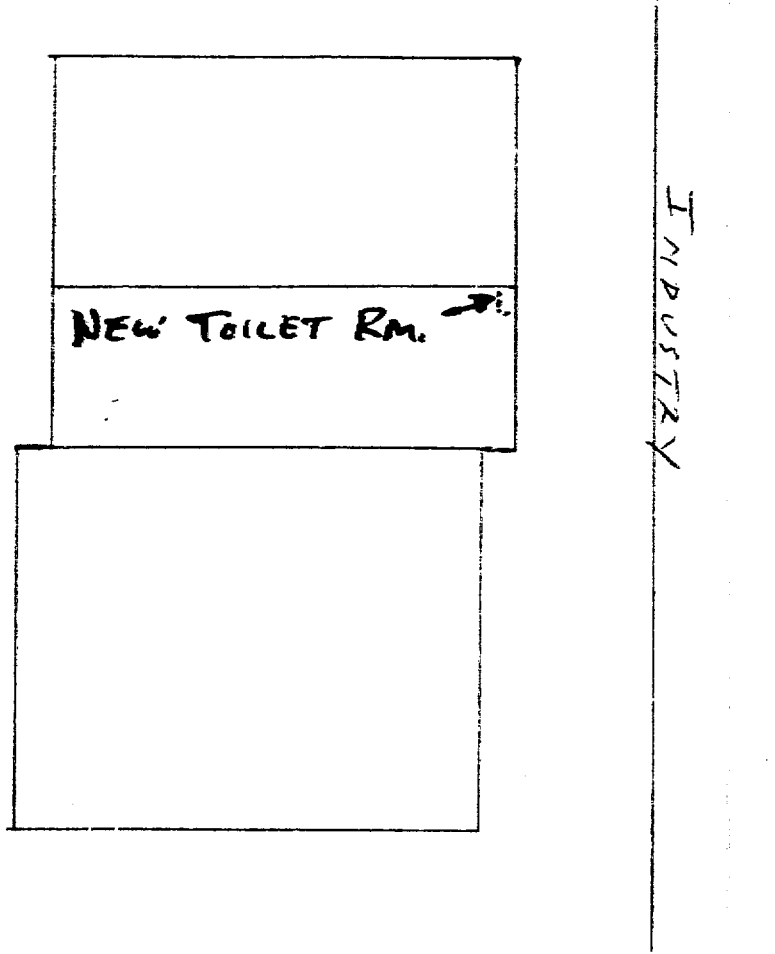
MOVING CONTRACTOR ADDRESS _____

BUILDING PERMIT PLOT PLAN
Development Services Department
CITY OF GARDEN GROVE

JOB ADDRESS 7142 CHAPMAN		PERMIT NO. 46677
ASSESSORS PARCEL NO. 131-341-06	TRACT	LOT
PLOT PLAN APPROVED BY		JOB DESCRIPTION (PLEASE CHECK) <input type="checkbox"/> New <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish
OWNER ASSO. S. INVEST CO.	DATE 7-9-71	USE TOILET RM, PERMIT VALUE \$400

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

CHAPMAN



BUILDING PERMIT

DEVELOPMENT SERVICES DEPT., GARDEN GROVE

537-4200

FIRE ZONE	OCCUPANCY	F-2 TYPE	TYPE	OCC. LOAD
USE ZONE	FRONT	LEFT	RIGHT	REAR
MP	EAVE PROJ.			
PARK SPACES REQUIRED	SETBACKS	NO CHANGE		
PLANNING ACTION				
Land Use Approved By	Eln		Date 8-3-71	

FEES AND BONDS

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

Remarks:

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location		
Reinforcing		
Roof Shgt.		
Rough Frame	11-12-71	WOT
Lath or Drywall	11-12-71	WOT
Plas. Brown Ct.		
Other		
Final	12-22-71	WOT
Utility Release		

VALUATION NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT., ETC. \$3400.00

FEES

Plan Check	\$13.00	Building Permit	\$26.00
Permit Authorized By	Eln		Date 8-3-71
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.

Job Address 7142 C. HAYDEN PERMIT NO. 047288
GARDEN GROVE

Lot No. Tract No.

Owner HSSOC SO INV Tel. No.

Mailing Address City Zip No.

Arch. AMY JOHNSON State Lic. No.
Engr. Tel. No.

Mailing Address City Zip No.

Contractor BILL MILLER Lic. No. 262811-B-1
Tel. No.

Mailing Address City Zip No.
10512 TIBBS GROVE AVE 92640

PRESENT BLDG. USE PROPOSED BLDG. USE

Aug-3-71 11 201 H***13.00

Validation Aug-3-71 11 202 H***26.00

DESCRIBE WORK TO BE DONE STORAGE (OVER 2)

NEW ADD'N ALTER. REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) 340 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 Bill Miller Authorized Agent Date Aug 3-71

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 _____
Owner's Signature Authorized Agent Date
If work is not started within 60 days from date of issue or if abandoned for more than 120 days, this permit will be null and void.

RELOCATION

PRESENT BLDG. ADDRESS

MOVING CONTRACTOR ADDRESS

BUILDING PERMIT

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

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 OCCUPANCY F-2 TYPE W-N OCC. LOAD
 REMARKS Plans

Job Address 7742 CHALMERS Permit No.
 Lot No. Tract No.

PLANNING
 USE ZONE N-P SETBACKS FRONT NO LEFT CHANGE RIGHT REAR
 PLANNING ACTION PARK SPACES REQUIRED
 Zoning Approved By [Signature] Date 2-19-71
 Remarks:

Owner ASSO. S. INVEST CO. Tel. No.
 Mailing Address 100 BONG BEACH BLVD. LONG BEACH City Zip No.
 Arch. State Lic. No.
 Engr. Tel. No.
 Mailing Address City Zip No.
 Contractor WHEATLAND CONST. Lic. No. Tel. No. OX 87901
 Mailing Address 11438 E. LAMONT RD. WHITTIER City Zip No.

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

PRESENT BLDG. USE PROPOSED BLDG. USE
 Validation 10-10-71 11 032
 10-10-71 11 031

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location		
Reinforcing		
Roof Shgt.		
Rough Frame		
Lath or Drywall	<u>3-1-71</u>	<u>[Signature]</u>
Plas. Brown Ct.		
Other		
Final	<u>3-29-71</u>	<u>[Signature]</u>
Utility Release		

DESCRIBE WORK TO BE DONE REMOVE OFFICE AREA INSTALL CEILING WALL
 NEW ADD'N ALTER REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) 906 SFT 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.
WHEATLAND CONST. By [Signature] 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 _____ Date

VALUATION NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT., ETC. \$ 2000.00

FEES
 Plan Building Permit \$ 10.00 \$ 20.00
 Check
 Bond \$ Expiration Date

Owner's Signature _____ Authorized Agent _____ Date _____
 If work is not started within 60 days from date of issue or if abandoned for more than 120 days, this permit will be null and void.

Permit Authorized By [Signature] Date 2-19-71
 1 Bldg. Inspector

RELOCATION
 PRESENT BLDG. ADDRESS
 MOVING CONTRACTOR ADDRESS

BUILDING PERMIT PLOT PLAN

Department of Building
CITY OF GARDEN GROVE

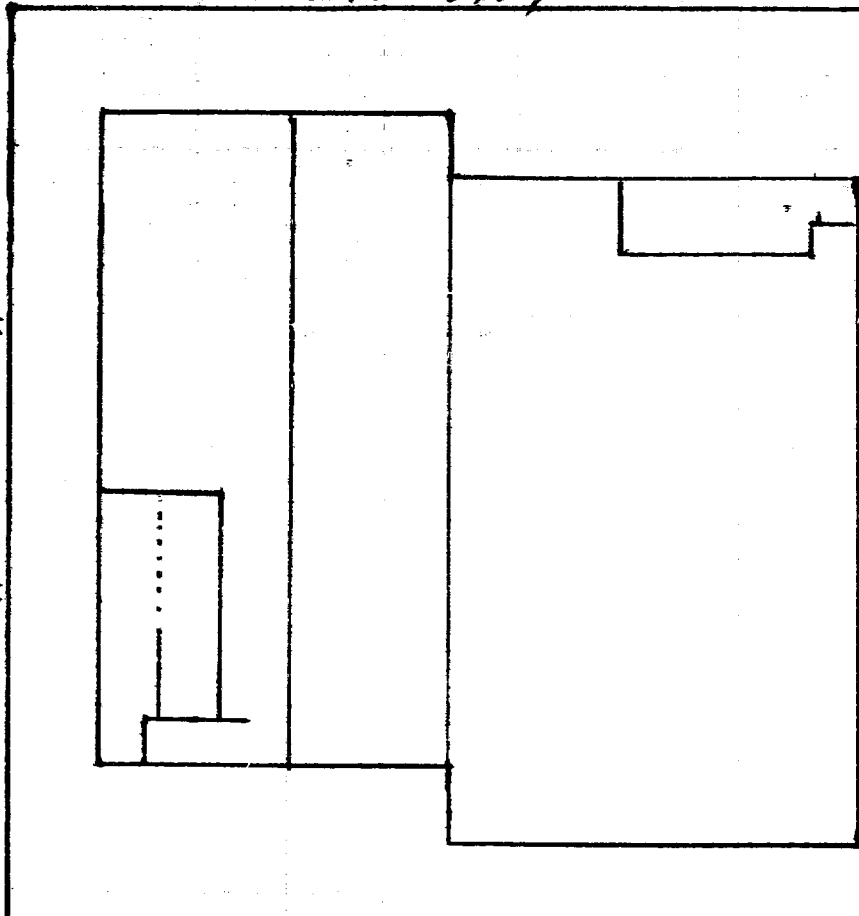
ASSESSORS PARCEL NO. 131-341-06	DATE 2-19-71	PERMIT NO. 43763A
JOB ADDRESS AND CITY 7142 CHAPMAN AVE. G-6.		
NAME OF CONSTRUCTION LENDER & BRANCH	LEGAL DESCRIPTION TRACT	LOT BLOCK
ADDRESS CITY	JOB DESCRIPTION (PLEASE CHECK) <input type="checkbox"/> New <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish	
PLANNING DEPT. APPROVAL <i>[Signature]</i>	DATE 2-19-71	OWNER ASSO. S. ENVEST. CO.
		PERMIT VALUE 2000.00

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

INDUSTRY

Interior Walls

CHAPMAN AVE



BUILDING PERMIT

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

FIRE ZONE: OCCUPANCY: F-2 TYPE III - IV OCC. LOAD: REMARKS: Plans

PLANNING
 USE ZONE: M.P. SETBACKS: FRONT: LEFT: RIGHT: REAR: EAVE PROJ.

PLANNING ACTION: PARK SPACES REQUIRED: Zoning Approved By: [Signature] Date: 6-15-70
 Remarks: V-117-69 L.S. 107-70

PUBLIC WORKS

Parcel-Map	Amount	Req'd	Provided
R - W Dedication		Yes	Yes
Bonds:			
Street Bond		Not	
Water Bond		Not	
Water Assmt. Fee		Not	
Fire Hydrant F.F. Fee		Not	
Parkway Tree Fee	74.34	Yes	Yes
Landscape Bond		Not	

REMARKS:

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location		[Signature]
Reinforcing		
Roof Shtg.	9-27-70	[Signature]
Rough Frame	8-8-70	[Signature]
Lath or Drywall	9-21-70	[Signature]
Plas. Brown Ct.	10-8-70	[Signature]
Other		
Final	9-29-71	[Signature]
Utility Release	3-30-71	[Signature]

VALUATION NOTE: INCLUDE LABOR, MAT. WIRING, PLUMB., HEAT., ETC. \$ 220,000.00

FEES

Plan Check	\$ 273.25	Building Permit	\$ 546.50
Bond	\$	Expiration Date	

Permit Authorized By: [Signature] Date: 6-15-70
 1 Bldg. Inspector

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

Job Address: 7142 Chapman Permit No. 40212A
 Lot No. Tract No. PC-E 1835

Owner: ASSO SO. INV. CO Tel. No. GE 55338
 Mailing Address: 100 LONG BEACH BLVD Long Beach City Zip No. 90723
 Arch. Engr. R.P. ZAMBONI State Lic. No. C24101 Tel. No. 6345057

Mailing Address: PO BOX 808 PERRIS CALIF 90723 City Zip No. 90723
 Contractor: WHEATLAND Const Lic. No. 105623 Tel. No. 02-8-7741 City Zip No. Whittier

PRESENT BLDG. USE: PROPOSED BLDG. USE: F2 - INDUSTRIAL

Validation: \$200,000.00
 DESCRIBE WORK TO BE DONE: New Ind. Bldg
 NEW ADD'N ALTER REPAIR DEMOLISH
 FLOOR AREA (SQ. FT.): 41,800 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.
 [Signature] Contractor Authorized Agent Date: 6/15/70

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

RELOCATION
 PRESENT BLDG. ADDRESS: MOVING CONTRACTOR ADDRESS:

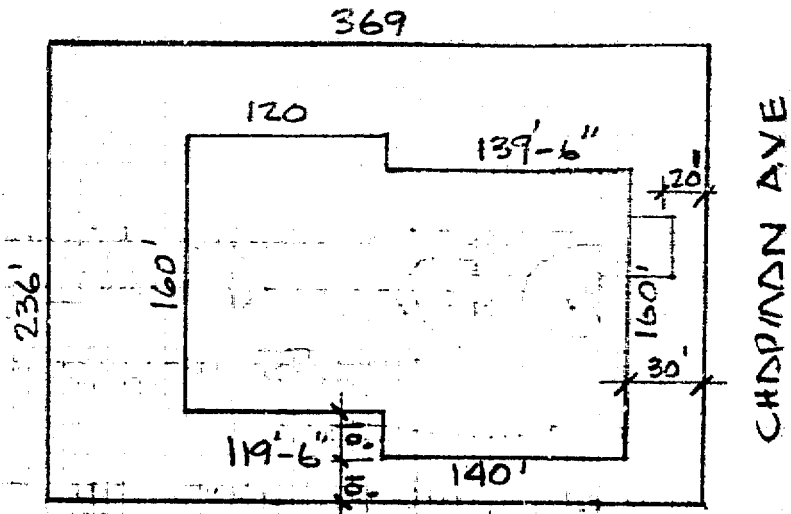
BUILDING PERMIT PLOT PLAN

Department of Building
CITY OF GARDEN GROVE

ASSESSOR'S PARCEL NO. 131-341-06	DATE 6-15-70	PERMIT NO. 40212A
JOB ADDRESS AND CITY 7142 Chapman		
NAME OF CONSTRUCTION LENDER & BRANCH	LEGAL DESCRIPTION: TRACT	LOT BLOCK
ADDRESS	JOB DESCRIPTION (PLEASE CHECK) <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish	
PLANNING DEPT. APPROVAL <i>[Signature]</i>	DATE 6-15-70	OWNER Asso. So. Inv. Co.
		PERMIT VALUE \$220,000.00

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

New Ind. Bldg.
P.C. 1895



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

Date _____

PLUMBING PERMIT

CITY OF
GARDEN GROVE

537-4200

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

For Applicant to Fill in. Permit No.

PERMIT FEES

No.	TYPE OF FIXTURE OR ITEM	EACH	\$ FEE
6	Water Closet (Toilet)	\$1.50	9 00
	Bath Tub	1.50	
	Shower	1.50	
2	Lavatory (Wash Basin)	1.50	3 00
	Kitchen Sink	1.50	
	Garbage Disposal	1.50	
3	Laundry Tub or Tray	1.50	4 50
2	Water Heater	1.50	3 00
	Slop Sink	1.50	
	Floor Sink	1.50	
6	Floor Drain	1.50	9 00
	Dish Washer	1.50	
3	Drinking Fountain	1.50	4 50
3	Urinal	1.50	4 50
	Gas System - Outlets	1.50	
	House Sewer	5.00	
	Lawn Sprinklers (Single Dwelling) Only	2.00	
	Swimming Pool Piping	1.50	
	Sand Traps	1.50	
	Automatic Washing Mach.	1.50	
	Water Softeners	1.50	
	Backwash - Trap	1.50	
	Water Lateral	1.50	
	Backflow Protective Devices	2.00	

Job
Address *7142 Chapman*

Lot No. Tract No. Blk. No.

Owner *Garden Grove Industrial Complex*

Owner's Address

Plumbing Contractor *Lee's Plumbing Co.*

Contractor's Address *2407 W. Lee Ave.*

Phone *213-444-0521* City Lic. No.

Use of Bldg. *Commercial*

New Bldg. Old Bldg.

Validation *MS 22-70 11 130 1144*39.50*

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, and I certify 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 *James Lee Fisher* Date *6-22-70*

Address

APPROVALS	DATE	INSPECTOR
SOIL PIPING	<i>7/10/70</i>	<i>BY</i>
GROUND PLUMBING		
ROUGH PLUMBING	<i>9/22/70</i>	<i>BY</i>
GAS PIPING		
GAS VENT		
SEPTIC TANK or Cesspool		
SEWER		
GAS TEST		
MAIN DRAIN AND VACUUM LINES		
WATER HEATER		
BACKWASH		
WATER LATERAL		
FINAL	<i>3 29-71</i>	<i>BY</i>
UTILITY CO. NOTIFIED		

Issuance of Permit 2 00

TOTAL FEE \$ *39 50*

Permit Authorized By *[Signature]* Date *6-22-70*

1. INSPECTOR *COVERLI*

Bldg. Permit # *40212A*

PLUMBING PERMIT

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

For Applicant to Fill In

Permit No.

Job
Address 7142 Chapman 040311 A

Lot No. Tract No. Blk. No.

Owner Garden Grove Ind. Complex
Owner's Address

Plumbing Contractor Lee's Plumbing Co.

Contractor's Address 2407 N. Lee Ave.

Phone 53444-0528 City Lic. No.

Use of Bldg. Common

New Bldg. Old Bldg.

Validation SEP 24-70 11 032 M*****1.50

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 James Lee Eubank Date 10-23-70

Address

APPROVALS	DATE	INSPECTOR
SOIL PIPING		
GROUND PLUMBING		
ROUGH PLUMBING	<u>9/24/70</u>	<u>LF</u>
GAS PIPING		
GAS VENT		
SEPTIC TANK or Cesspool		
SEWER		
GAS TEST		
MAIN DRAIN AND VACUUM LINES		
WATER HEATER		
BACKWASH		
WATER LATERAL		
FINAL	<u>3/29/71</u>	<u>LF</u>
UTILITY CO. NOTIFIED		

CITY OF GARDEN GROVE 537-4200

PERMIT FEES

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

3 ROOF DRAIN SUPPLEMENT 4.50

Issuance of Permit Add To 41567A 2 00

TOTAL FEE \$ 4 50

Permit Authorized By _____ Date _____

1. INSPECTOR

Bldg. Permit # 40212A

ELECTRICAL PERMIT

DEPARTMENT OF DEVELOPMENT SERVICES

GARDEN GROVE, CALIFORNIA

PHONE: 537-4200

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

JOB ADDRESS
Northend of 7242 CHAPMAN

ELECTRIC PERMIT NO. *17*

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	
Service, Three Phase <i>V</i>	<i>1</i>	<i>1</i>	<i>1.00</i>	<i>1.00</i>
Meters, Single Phase			1.00	
Meters, Three Phase	<i>1</i>	<i>1</i>	<i>1.00</i>	<i>1.00</i>
Pole, Power, Light, etc.			2.00	
Sub-Panels 1 φ			1.00	
Sub-Panels 3 φ	<i>1</i>	<i>1</i>	<i>1.00</i>	<i>1.00</i>
Outlets 1st 20	<i>20</i>		<i>.20</i>	<i>4.00</i>
Outlets Over 20	<i>20</i>		<i>.10</i>	<i>2.00</i>
Fixtures 1st 20	<i>20</i>		<i>.20</i>	<i>4.00</i>
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	
<i>Air Cond</i>	<i>2</i>	<i>2.00</i>	<i>4.00</i>	
<i>V. G. Pools</i>	<i>1</i>	<i>1.00</i>	<i>1.00</i>	
Time Clock			1.00	
Sign, 1 Tran. or 1 Ballast			2.00	
Each Additional Tran. or Ballast			1.00	
Sign Hookup			1.00	

OWNER
ASSO. S. INVEST CO.

PHONE

OWNER'S ADDRESS

CITY

NEW BUILDING OR ADDITION - AREA

EXISTING BUILDING REMODEL AREA

OCCUPANCY GROUP

USE OF BUILDING AND OR NUMBER OF UNITS

SO. FT. *11,700* SO. FT. *F-2*

ELECTRICAL CONTRACTOR
K. D. Miller Electric - Whittier

PHONE *698-3756*

WHITFIELD CONST.

ADDRESS *13438 E. LAMBERT RD* CITY *WHITTIER*

STATE LICENSE NO. *0A8790*

VALIDATION *SEP 19-71 11 033 M***\$20.00*

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 *X Guy R. Titman* DATE *2-19-71*

BRANCH CIRCUIT PANEL: CIRCUITRY

CIR. NO.	BRKR. 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	<i>2-26-71</i>	<i>RAT</i>
Wiring		
Ceiling Heat Cable		
Fixtures		
Service		
FINAL	<i>3-19-71</i>	<i>[Signature]</i>
Utility Notified	<i>3-30-71</i>	

ISSUANCE OF PERMIT

2 00

SINGLE PHASE SERVICE SIZE

AMPS. WIRE RIG. CONDUIT

TOTAL FEE

20.00

THREE PHASE SERVICE SIZE *3* WIRE 4 WIRE

400 AMPS. *12/2* WIRE *1/2* RIG. CONDUIT

I INSPECTOR

PERMIT AUTHORIZED BY *[Signature]*

DATE *2-19-71*

BUILDING PERMIT NO. *43763A*

SIGN PERMIT NO.

VENT. HEAT. AIR COND. PERMIT NO.

CERTIFICATE OF OCCUPANCY

2

DEPARTMENT OF BUILDING

CITY OF GARDEN GROVE

HARRY R. PEIRCE, Director

11391 ACACIA

JOB ADDRESS 7142 Chapman Ave. PERMIT NO. 40212-A
USE OF BUILDING Industrial GROUP F-2 TYPE III-M
USE ZONE M-2 APPROVED BY W. E. Miller DATE 3/29/71
ZONING REMARKS V-117-69

Floor load sign installed per Section 2308 Yes No

Room capacity sign installed per section 3301 (I) Yes No

The above described building has been inspected and found to comply with the provisions of the Uniform Building Code.

ISSUED TO ASSOC. Southern Invest. Co. ADDRESS 100 Long Beach Blvd., L.B.

Authorized By D. A. Hblay, Prin. Bldg. Inspector DATE April 23, 1971

Notice! Post in a Conspicuous Place on the Premises

BUILDING PERMIT

Public Works & Development -- Garden Grove, Ca.

Inspection 638-6771

Information 638-6661

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	OCCUPANCY	F2	TYPE	TEN	OCC. LOAD	FIRE SPRINK.
USE ZONE	PUD	FRONT	LEFT	RIGHT	REAR	
PARK SPACES REQUIRED	EAVE PROJ.					
	SETBACKS	No	CHANGE			
PLANNING ACTION	Plans					
LAND USE APPROVED BY	[Signature]					DATE
						20 MAY 77

ADDRESS	PERMIT NO.
7142 CHAPMAN AVE.	0020721
LOT NO.	TRACT NO.
OWNER	TEL. NO.
4990C Co. Inv. Co.	(714) 892-4122
MAILING ADDRESS	CITY ZIP
7495 ANACOUA AVE. G.G.	92641
<input type="checkbox"/> ARCH	STATE LIC. NO.
<input type="checkbox"/> ENGR.	TEL. NO.
MAILING ADDRESS	CITY ZIP

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

NOT REQ'D

CONTRACTOR	LIC. NO.
ADVANCE FIRE PROT.	6233
MAILING ADDRESS	TEL. NO.
1451 W. LAMBERT RD. LA HABRA	691-0918
VALIDATION	CITY ZIP
	20-77 11 059 M *** 107.97
	20-77 11 089 M *** 174.76
PRESENT BLDG. USE	PROPOSED BLDG. USE
LEASED TENENTS	

REMARKS: ASSOC. SO. BLDG #2

G.G. S.A.N.T. DIS. FEE REQ'D	O.C. S.A.N.T. DIS. FEE REQ'D	DATE	INITIAL

DESCRIBE WORK TO BE DONE	NEW <input checked="" type="checkbox"/> ADD'N <input type="checkbox"/> ALTER. <input checked="" type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>	
INSTALL FIRE SPRINKLERS		
FLOOR AREA (SQ. FT.)	NO. OF STORIES	NO. OF DWELLING UNITS
4,520	1	

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		
UTILITY RELEASE		

CAPT. FRANK COFF

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.
 ADVANCE FIRE PROT. [Signature] 5/17/77
 Contractor Authorized Agent Date

OWNER-BUILDER SIGN BELOW
 I certify that I am exempt from the provisions of Ch. 9, Div. 3, 8 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 _____ 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.

VALUATION	\$37,500.00	FEES	
REC'D BY:	PLAN CHECK \$	107.97	
AUTHORIZED BY [Signature]	PERMIT \$	168.76	
DATE 20 MAY 77	ISSUANCE \$	6.00	
INSPECTOR	TOTAL \$		

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

PRESENT BLDG. ADDRESS	RELOCATION
MOVING CONTRACTOR ADDRESS	

PLUMBING PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EACH	\$ FEE
Soil Piping			Water Closet (toilet)			
			Bath Tub			
Ground Plumbing			Shower			
			Lavatory (Wash Basin)			
Rough Plumbing	4/22/81	RY	Kitchen Sink	1		3.00
			Garbage Disposal			
Gas Piping			Laundry Tub or Tray			
			Water Heater	1		3.00
Gas Vent			Floor Sink			
			Floor Drain			
Sewer			Dish Washer			
			Drinking Fountain			
Main Drain and Vacuum Lines			Urinal			
			Gas System - Outlets	1		3.00
Water Heater			Building Sewer (First 100 ft.)			
			Building Sewer (Add'l 100 ft.)			
Backwash			Building Sewer (ea. add'l drain)			
			Hotwater Drain			
Water Lateral			Swimming Pool Piping			
			Sand Traps/Receptors			
			Automatic Washing Machine			
			Water Softeners			
			Backwash - Trap			
			Water Lateral			
			Backflow Protective Devices			
			Water Piping (ea. 100 ft.)			
			Lawn Sprinklers (S.F.D. Only)			
			Lawn Sprinklers (other)			
FINAL	7.17.81	RY				
UTILITY CO. NOTIFIED						
IDENTIFICATION CODE						
BUILDING PERMIT NO.	ELECTRICAL PERMIT NO.					
119504A						
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.						

Handwritten note: KITCHEN SINK NOT INSTALLED AT THIS TIME

Handwritten note: (over)

ITEM	CODE	FEES
Plan Retention Fee		
Plan Check		
Permit	3228	95.00
Issuance	3517	0.00
TOTAL FEES		15.00

LAND USE	AUTHORIZED BY BUILDING	DATE
	jm	3.30.81

ADDRESS: 7142 Chapman Ave

LOT NO. 13; BLK NO. 341; TRACT NO. 72; PERMIT NO. 119504A

OWNER: Hobart; PHONE: 11950042

OWNER'S ADDRESS: 7147 Chapman Ave G.G.

NEW BUILDING OR ADDITION - AREA: SQ. FT. 3300; EXISTING BUILDING REMOVED AREA: SQ. FT. ; OCCUPANCY GROUP: ; USE OF BUILDING AREA OR NUMBER OF UNITS: offices

VALIDATION: 03/30/81; PLUMBER: B.; ISSUANCE: 6.00; CHECK: 15.00

PLUMBING CONTRACTOR: B.S. Priest Const.; STATE LIC. NO. & TYPE: 338885

ADDRESS: 704 N. Valley Unit #118 Anaheim; PHONE: 520-0152

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 466273-88; Expiration Date 10-11-81

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

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

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

Permit Applicant Signature: [Signature]; DATE: 3-26-81

BUSINESS TAX CERTIFICATE INFORMATION

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

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

BUSINESS TAX CERTIFICATE NO. _____ EXPIRATION DATE: _____

I certify that I am exempt from Section 7031.5 of the Business and Professional Code, Division 3, Chapter 9, Contractors' License Law, under the following Section:

Owner: Section 7044 Minor work under \$100: Section 7048 Employee working for wages only: Section 7053 Other: _____

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

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

INSPECTION RECORD

For Applicant to Fill in

P.L. # _____

OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.	
USE ZONE		FRONT	LEFT	RIGHT	REAR
FIRE ZONE	Eav Proj. Setbacks		<i>NC</i>		
PLANNING ACTION			<i>on file</i>		
LAND USE APPROVED BY	<i>jm</i>		<i>3-30-81</i>		
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					
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		<i>3527</i>	<i>17</i>	<i>95</i>	
BLDG. PERMIT FEE		<i>3226</i>	<i>26</i>	<i>90</i>	
ISSUANCE		<i>3577</i>	<i>6</i>	<i>00</i>	
VALUATION	TOTAL FEES	<i>50</i>	<i>85</i>		
<i>\$ 2,539⁰⁰</i>					
AUTHORIZED BY	DATE				
<i>[Signature]</i>	<i>3-30-81</i>				

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
CONCRETE FLOOR		
REINFORCING		
ROOF SHTG		
ROUGH FRAME	<i>4/22/81</i>	<i>[Signature]</i>
INSULATION, ENERGY	<i>4/22/81</i>	<i>[Signature]</i>
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL	<i>7/7/81</i>	<i>[Signature]</i>
UTILITY RELEASE		
IDENTIFICATION CODE		

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. *466273-80* Expiration Date *10-11-81*

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

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

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

PERMIT APPLICANT SIGNATURE _____ **DATE** _____

BUSINESS TAX CERTIFICATE INFORMATION

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

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

BUSINESS TAX CERTIFICATE NO. _____ EXPIRATION DATE _____

I certify that I am exempt from Section 7031.5 of the Business and Professional Code, Division 3, Chapter 9, Contractors' License Law, under the following Section:

Owner: Section 7044 Minor work under \$100: Section 7043
Employee working for wages only: Section 7053

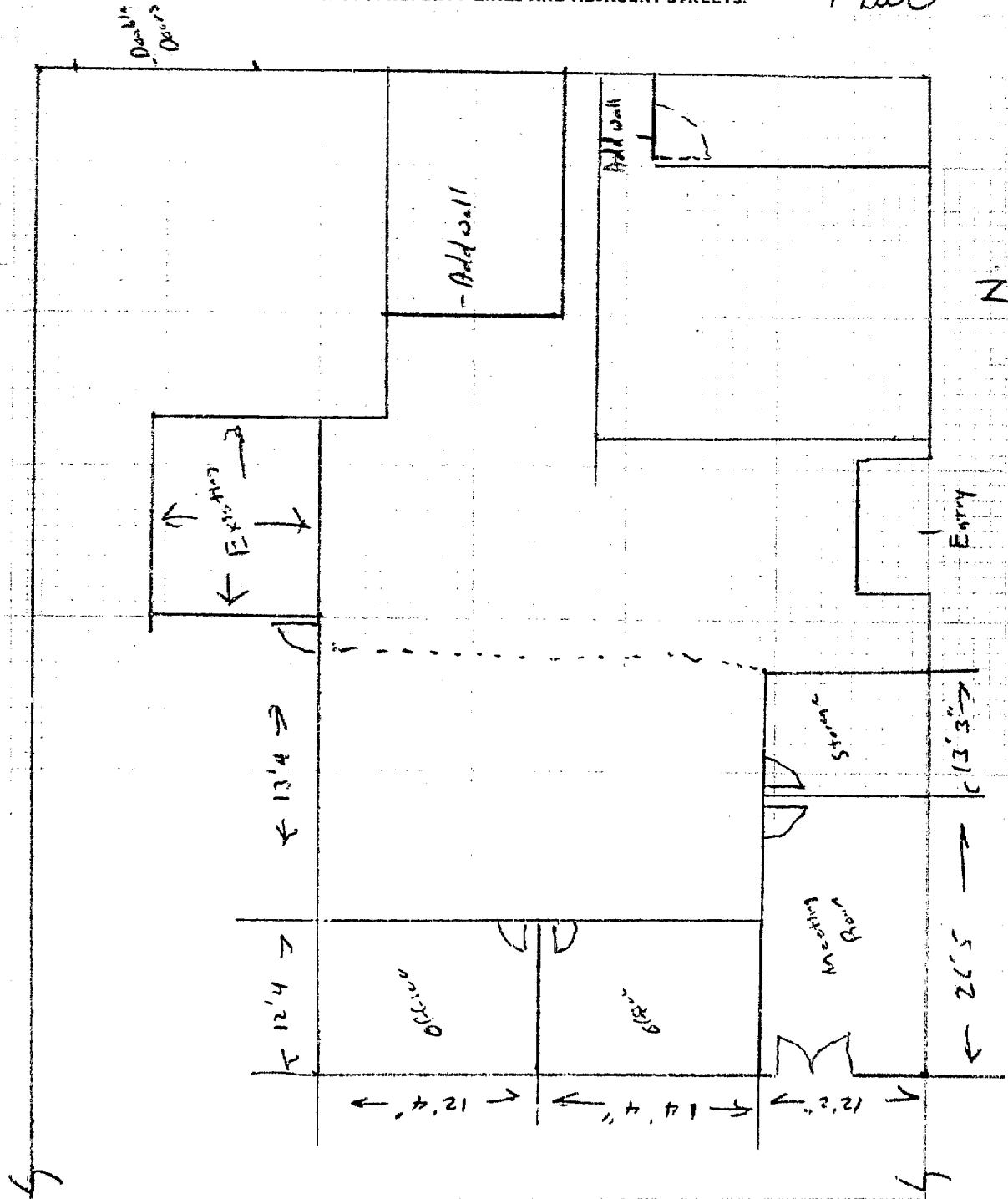
Other: _____

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

ADDRESS			
<i>7142 Champman ave</i>			
LOT NO.	BLK NO.	TRACT NO.	PERMIT NO.
<i>131</i>	<i>341</i>	<i>72</i>	<i>1195041</i>
OWNER	MAILING ADDRESS		TEL. NO.
<i>Hobart Kitchen</i>	<i>7142 Champman G.G. 92645</i>		
<input checked="" type="checkbox"/> ARCH	MAILING ADDRESS		CITY
<input checked="" type="checkbox"/> ENGR. <i>Robert P. Zamboni</i>	<i>8008 Jackson St. Paramount</i>		STATE LIC. NO. & TYPE
	<i>634-5057</i>		
VALIDATION			
CONTRACTOR			
<i>B.S. Priest Architects 92801</i>			
MAILING ADDRESS		CITY	ZIP
<i>704 N. Valley unit A+B Anaheim</i>		<i>92801</i>	
TEL. NO.	STATE LIC. NO.		
<i>520-0152</i>	<i>338885</i>		
PRESENT BLDG. USE	PROPOSED BLDG. USE		
<i>Warehouses</i>	<i>offices</i>		
DESCRIBE WORK TO BE DONE			
<i>Interior part walls</i>			
<i>Remolding adding offices</i>			
<i>3162 ST Bar</i>			
NEW	ADD'N	ALTER.	REPAIR
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
FLOOR AREA (SQ. FT.)	NO. OF STORIES	NO. OF DWELLING UNITS	
<i>3300</i>	<i>1</i>		
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 Hobart		JOB ADDRESS 7142 Chapman			PERMIT NO. 119504A	
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSORS PARCEL NO. 131	LOT 341	BLOCK 72	TRACT	
PLEASE CHECK ONE OR MORE						
<input type="checkbox"/> New <input type="checkbox"/> Addition <input checked="" type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish						
ADDRESS 7142 Chapman		CITY G.G.		DATE 3-30-81	JOB DESCRIPTION Adding offices 202 ft. wall 346 ft 1 Floor	PERMIT VALUE 25,000.00

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



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

By

INSPECTION RECORD

For Applicant to Fill in

PC #	FZ				
OCCUPANCY TYPE	OCC. LOAD		FIRE SPRINK.		
USE ZONE	FRONT	LEFT	RIGHT	REAR	
FIRE ZONE	Eav Proj.				
	Setbacks				
PLANNING ACTION	PLANS DATE				
LAND USE APPROVED BY					
REMARKS:					
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. D.S. 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					
BLDG. PERMIT FEE	2206	195	07		
ISSUANCE	2517	10	-		
VALUATION		TOTAL FEES	205	07	
729540 ⁰⁰					
AUTHORIZED BY	DATE				
JR	2-4-83				

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
CONCRETE FLOOR		
REINFORCING		
ROOF SHTG		
ROUGH FRAME		
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
	OK TO ISSUE	
	2/3/83	
LAND USE FINAL		
FINAL	4/5/83	
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.

Christina J. Chennet 1/31/83
PERMIT APPLICANT SIGNATURE DATE

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 3242 and Classification *C-29* is in full force and effect.

Over Roofing Co. 1/31/83
(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE

BUSINESS TAX CERTIFICATE NO. _____ **EXPIRATION DATE** _____

I certify that I am exempt from Section 7031.5 of the Business and Professional Code, Division 3, Chapter 9, Contractors' License Law, under the following Section:
Owner: Section 7044 Minor work under \$100: Section 7048
Employee working for wages only: Section 7053

Other: _____

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

ADDRESS		
7142 Chagman Ave.		
LOT NO.	BLK NO.	PERMIT NO.
		128544A
OWNER		TEL. NO.
Associated Southern Investment		848-8716
MAILING ADDRESS		CITY ZIP
7495 Amnonda Ave., G.G. 92241		
<input type="checkbox"/> ARCH	MAILING ADDRESS CITY ZIP	
<input type="checkbox"/> ENGR.		
TEL. NO.	STATE LIC. NO. & TYPE	
0270481	#2035	
VALIDATION	ISSUE	
	1983 07	
	CHECK 10.00	
	#470107	
CONTRACTOR		
Over Roofing Co.		
MAILING ADDRESS	CITY	
1236 S. Compton, L.A. 90027		
841 E. Washington Ave., S.G. 92201		
TEL. NO.	STATE LIC. NO.	
835-4671	3242	
PRESENT BLDG. USE	PROPOSED BLDG. USE	
Manufacturing	Home	
DESCRIBE WORK TO BE DONE		
Reroof/Builtup		
NEW <input type="checkbox"/> ADD'N <input type="checkbox"/> ALTER. <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>		
FLOOR AREA (SQ. FT.)	NO. OF STORIES	NO. OF DWELLING UNITS
22,300		
If work is not started within 180 days from date of issue or if abandoned for more than 180 days, this permit will be null and void.		
A FEE MAY BE CHARGED FOR RE INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.		
RELOCATION		
PRESENT BLDG. ADDRESS		
MOVING CONTRACTOR		
ADDRESS		