

MONARCH

012632

1

STREET NAM

ADDRESS

APT. NO.

CARD NO.

See BP/8094A - This permit is, even though here are P.O.'s
under this number, (1966)

OTHERS

February 6, 1973

Fairfield - Tomlinson, Inc.
13700 Broadway
Cleveland, Ohio 44125

Attention: Mr. John A. Chernak
President

Dear Mr. Chernak:

Subject: Building Modification/Addition at 12632 Monarch St., Garden Grove

In response to your letter, dated January 17, 1973, there exists two separate water services for 12632 Monarch Street as follows:

1. An 8" fire service for the fire sprinkler system.
2. A 2" water meter for domestic water supply.

A 2" domestic water meter will supply approximately 160 gpm (21.39 cu. ft./min. = 924,800 cu. ft./month capability). You stated that you need 15,000 cu. ft./month. If you feel your needs may require a larger domestic water meter, we will be happy to inform you of the requirements.

Separately, the use of domestic water to cool hydraulic power packs and to process steam may require a back flow prevention device. Uses such as equipment cooling can represent a potential hazard to the water system via a "cross connection", therefore we will need to review a plan of your proposed plumbing modifications as well as inspect the premises. Plans and requests for inspection should be processed through this office with attention directed to a Mr. Johnson.

The Garden Grove Water Department and the Garden Grove Sanitary District are not a combined department. However, we have contacted them on your behalf and their comments are attached.

If we can be of any further assistance, please don't hesitate to contact us at (714) 638-6682.

Very truly yours,

Michael P. Lord
Associate Civil Engineer

MDK:bb
Attachment

cc: Mrs., Cowter, R.A. Smith, J. Johnson

FAIRFIELD-TOMLINSON, INC.

SUBSIDIARY OF TOMLINSON INDUSTRIES, INC.

OFFICES: 13700 BROADWAY • CLEVELAND, OHIO 44125

CABLE: NO-DRIP TELEPHONE 216 587-3450 TELEX 98-5409

PLANT:

5433 PERKINS ROAD

CLEVELAND (BEDFORD HEIGHTS), OHIO 44146

TELEPHONE: 216 438-4242

January 17, 1973

City Water Department
11391 Acacia Parkway
Garden Grove, California 92640

Gentlemen:

We are planning on opening a branch plant at 12632 B
Monarch Street, Garden Grove. At the present time, there
is a very limited installation in what is basically a
warehouse. We will be manufacturing at this location and
will be adding toilet facilities. We will also require
water for cooling our hydraulic power packs and for process
steam. We project our monthly usage to be in the range of
15,000 cubic feet.

Will you please advise whether the connecting lines are
sufficient to cover our requirements. Would you also
advise what steps must be taken to tie in with the sewer
system.

Thank you for your cooperation.

Very truly yours,

FAIRFIELD-TOMLINSON, INC.

JAC/ar

John A. Chernak
President

RECEIVED
JAN 19 1973
WATER DEPT.

CITY OF GARDEN GROVE
Public Works & Development

ELECTRICAL PERMIT

Inspection Requests
638-6771

General Information
638-6661

For Applicant to Fill in

INSPECTION RECORD

SINGLE PHASE SERVICE SIZE	VOLTS	RIG. CONDUIT
THREE PHASE SERVICE SIZE	VOLTS	RIG. CONDUIT
AMPS	VOLTS	INSPECTOR
APPROVAL	DATE	INSPECTOR
Underground		
Conduit		
Wiring - Raceway		
Heating		
Fixtures & Trim		
Motors		
Other		
Service	2-23-81	EW

IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE
Residential (R 1 & R 3) sq. ft.			
Garage, Resid. (A1) sq. ft.			
Service Meter, Single Phase			
Service Meter, Three Phase			
Add'l Meter, Three Phase			
Temporary Power Pole			
Pole, Power, Light, etc.			
Sub-Panels 1 @	1		5-
Sub-Panels 3 @			
Outlets			
Fixtures			
Fixtures, Merc. Quartz, etc.			
Washer - Not Over 1050 W			
Washer			
Dryer			
Hot Water Heater			
Dishwasher			
Domestic Range or Oven			
Disposal			
Power Apparatus - H.P., K.W. or K.V.A. Motors, Transformers, etc.			
Not Over 1 each			
Over 1, Not Over 10 each			
Over 10, Not Over 30 each			
Trdy. Circuits			
Time Clock			
Sign			
Sign Hookup			

ADDRESS
12632 Monarch HB
LOT NO. BLK NO. TRACT NO. ELECTRIC PERMIT NO. 1189594

OWNER
North American Systems
OWNER'S ADDRESS
12632 Monarch HB
SQ. FT. 12000

VALIDATION
ELECTRICAL CONTRACTOR
Complete Electric 1010 311248
8542 Amy St. G.G. 537-2211
STATE LIC. NO. 41785 CD
CITY PHONE

WORKERS 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 of his permit shall be deemed revoked.
I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed on want to this permit.
Aphwinda [Signature] 2-17-81
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 Professions Code, Division 3, Chapter 9, Contractors' License Law, under the following Section:
Owner, Section 7044 [] Minor work under \$100, Section 7048 []
Employee working for wages only, Section 7053 []
Other: _____
(PRINT) PROPERTY OWNER (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT DATE

IDENTIFICATION CODE

ITEM	CODE	FEE
Plan Retention Fee		
Plan Check		
Permit Issuance	3227	5-
	3517	60-
TOTAL FEES		11 00

AUTHORIZED BY [Signature] DATE 2-17-81

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

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

BUILDING PERMIT

Inspection Requests
638-6771

General Information
638-6661

For Applicant to Fill in

INSPECTION RECORD

P.C. #	OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.	
			FRONT	LEFT	RIGHT	REAR
	USE ZONE	Ev. Proj.				
	FIRE ZONE	Setbacks				
PLANNING ACTION			PLAN DATE			
LAND USE APPROVED BY						
REMARKS						
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.	DATE	INITIAL	REQ'D	PROVIDED	
PARCEL MAP			DATE			
R/W DEDICATION			DATE			

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
CONCRETE FLOOR		
REINFORCING		
ROOF SHTG.		
ROUGH FRAME		
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL	11-20-84	W.H.
FINAL		
UTILITY RELEASE		

ADDRESS
12632 Monarch Street

LOT NO. DISTRICT TRACT NO. PERMIT NO.
137551A

OWNER
Joanna Western
MAILING ADDRESS
12632 Monarch Street
CITY ZIP

ARCH
 ENGR

MAILING ADDRESS CITY ZIP

TEL. NO. STATE LIC. NO. & TYPE

VALUATION

FEES AND BONDS		REV. CODE	AMOUNT
ST. BOND			
WATER BOND			
WATER ASSMT FEE (ACRIS)			
WATER ASSMT FEE (FT)			
PARKWAY TREE FEE			
PARK & REC. FEE (DIST)			
DRAIN ASSMT. FEE (DIST)			
PLAN RETENTION FEE			610
BLDG. PLAN CHECK			122.00
BLDG. PERMIT FEE			181.30
ISSUANCE			10.00
VALUATION			27,000.00
TOTAL FEES			317.30
AUTHORIZED BY			DATE: 10/29/84

IDENTIFICATION CODE

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 01WC117092C Expiration Date 4/1/85

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

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

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

PERMIT APPLICANT SIGNATURE: [Signature] DATE: 10/24/84

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 1017482
Allan Automatic Sprinkler Corp. will be in full force and effect
DATE: 10/24/84

(SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT

BUSINESS TAX CERTIFICATE 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:
(Worker Section 7044 Minor work under \$100 Section 7048 Employer working for wages only Section 7053)
Other: _____

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

CONTRACTOR
Allan Automatic Sprinkler Corp. of So. Cal.
MAILING ADDRESS CITY ZIP
3233 Enterprise Street, Brea, CA 92621

TEL. NO. 993-9500 STATE LIC. NO. 1617-82 C-16

PRESENT BLDG. USE Whse. PROPOSED BLDG. USE Whse.

DESCRIBE WORK TO BE DONE
Modification exist. sprinkler system

NEW ADDN ALTER REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) 10980 NO. OF STORIES 1 NO. OF DWELLING UNITS 1

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

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

RELOCATION

PRESENT BLDG. ADDRESS

MOVING CONTRACTOR

ADDRESS

HEATING, VENTILATING, REFRIGERATION & AIR COND. PERMIT

INSPECTION RECORD

FEEES

For Applicant to Fill In

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EA.	\$ FEE
FURNACE			Furnace to & incl. 100M B.T.U.			
			More than 100M & incl. 500M B.T.U.			
FURNACE VENTS			More than 500M & incl. 1MM B.T.U.			
			Installation or Relocation of Susp. Heater			
GAS PIPING			Installation or Relocation of Wall Heater			
			Installation or Relocation of Unit Heater			
			Installation of Appliance Vent Only			
DUCTS			Repair, Alteration or Addition to any Heating or Cooling System	1		6.50
SINGLE DUCT FAN VENT			Incidental Gas Piping			
KITCHEN HOOD			Each Range Hood Incl. Duct and Fan			
			Each Vent Fan Connected to a Single Duct	2		7.00
AIR HANDLING UNIT			Each Ventilating System not a Part of a Heating or Air Conditioning System Authorized by Permit			
EVAPORATIVE COOLER			Boiler or Compressor to & incl. 5 Hp.	1		6.50
			Absorption System to & incl. 100M B.T.U.			
BOILER OR COMPRESSOR			Boiler or Compressor to & incl. 15 Hp.			
			Absorption System to & incl. 500M B.T.U.			
DECORATIVE AFFILIANCE			Boiler or Compressor to & incl. 30 Hp.			
			Absorption System to & incl. 1MM B.T.U.			
			Boiler or Compressor to & incl. 50 Hp.			
			Absorption System to & incl. 2MM B.T.U.			
			Boiler or Compressor over 50 Hp.			
			Each Evaporative Cooler			
			Air Handling Unit to & incl. 2M C.F.M.	1		5.00
			Air Handling Unit to & incl. 10M C.F.M.			
			Air Handling Unit over 10M C.F.M.			
			OTHER			
FINAL	12/10/84	JIA				
UTILITY CO. NOTIFIED						
IDENTIFICATION CODE			ITEM	CODE		FEEES
			Plan Retention Fee			
			Plan Check			
			Permit			20.00
			Issuance			10.00
			TOTAL FEES			30.00
BUILDING PERMIT NO.	ELECTRIC PERMIT NO.		AUTHORIZED BY BUILDING		DATE	
			LARD USE			
			7R		11/20/84	

ADDRESS
12632 MONARCH

LOT NO. BLK NO. TRACT NO. PERMIT NO.
137958A

OWNER: JOANNA WESTERN MILLS
PHONE: 714 687-0052
CITY: 687-0052

OWNER'S ADDRESS: CITY

NEW BUILDING OR ADDITION - AREA: 1960 SQ. FT. EXISTING BUILDING REMOVAL AREA: SQ. FT. OCCUPANCY GROUP: USE OF BUILDING AND OR NUMBER OF UNITS

VALIDATION: H-PER 25.00, ISS 10.00, CHECK 35.00
1M6492A11-2084

HEATING CONTRACTOR: RAW: HO 5177
ADDRESS: 12155 MAGNOLIA 6 D RIVERSIDE
STATE LIC. NO. & TYPE: C-20, CITY: 306459, PHONE: 687-0052

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. _____ Expiration Date _____
I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.

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

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

Signature: *Ray D. Stetson* DATE: 11/21/84
PERMIT APPLICANT SIGNATURE

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 206059 and Classification C-20 is in full force and effect.
Signature: *Ray D. Stetson* DATE: 11/21/84
(PRINT) CONTRACTOR (SIGNATURE) OF AUTHORIZED AGENT

BUSINESS TAX CERTIFICATE NO. _____ EXPIRATION DATE _____

I certify that I am exempt from Section 7031.0 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 RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

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

I, INSPECTOR

DATE

INSPECTOR'S NOTES

11/20/84

Need fixed ladder to area for Furnace
with side platform from ladder to
Furnace Condensate line. Cannot chain into
a waste that must take it to a
tail piece OK

12/5/84

Duct work OK still need
ladder to F.A.U. & platform
from unit to ladder

1218801

OWNER <i>JOHN W. WESTERN MILLS</i>		JOB ADDRESS <i>12632 MONARCH ST.</i>		PERMIT NO. <i>137551A</i>
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSORS PARCEL NO. <i>215-031-07</i>	LOT	BLOCK
		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	CITY	DATE <i>12/29/89</i>	JOB DESCRIPTION <i>FIRE SPRINKLER MODIFICATION</i>	PERMIT VALUE <i>\$27000.00</i>

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.

- ① When are outlets for
277V Exit Lites - ~~FR~~
- ② MUST HAVE LITE FOR
NEW STEPS -

BUILDING PERMIT

Inspection Requests
638-6771

General Information
638-6661

Needs final

For Applicant to Fill in

INSPECTION RECORD

PC #	OCCU. RENCY	TYPL	OCC. LOAD		FIRE SPRINK	
	USE ZONE	Front	LEFT	RIGHT	REAR	
	FIRE ZONE	Ev Proj				
		Setbacks				
	PLANNING ACTION					
	LAND USE APPROVED BY					
	REMARKS:					

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
CONCRETE FLOOR		
REINFORCING		
ROOF SHTG		
ROUGH FRAME		
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL		
UTILITY RELEASE		

ADDRESS: 12632 Monarch ST
 LOT NO.: BLK NO.: TRACT NO.: PERMIT NO.: 137999A

OWNER: JORDANA WESTERN MILLS
 MAILING ADDRESS: Same
 CITY: ZIP:

ARCH: []
 ENGR: []
 MAILING ADDRESS: CITY: ZIP:

TEL. NO.: STATE LIC. NO. & TYPE:

VALIDATION: PL RET 2.00
 B-PLAN 20.06
 B-PER 30.00
 ISS 10.00

CONTRACTOR: PATCO
 MAILING ADDRESS: PO. BOX 2376 CHINO 91708
 CITY: ZIP: 91708

TEL. NO.: 714 591-0416
 STATE LIC. NO.: 308806 C-16

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

FEES AND BONDS		REV. CODE	AMOUNT
ST. BOND			
WATER BOND			
WATER ASSMT FEE (ACRG.)			
WATER ASSMT FEE (IFT.)			
PARKWAY TREE FEE			
PARK & REC FEE (DIST.)			
DRAIN ASSMT. FEE (DIST.)			
PLAN RETENTION FEE			2.00
BLDG. PLAN CHECK			20.06
BLDG. PERMIT FEE			30.00
ISSUANCE			10.00
VALUATION			
TOTAL FEES			62.06

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 125-1778 Expiration Date 2/12/85

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

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

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

PERMIT APPLICANT SIGNATURE: Robert J. Case DATE: 11-26-84

BUSINESS TAX CERTIFICATE INFORMATION

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

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

BUSINESS TAX CERTIFICATE NO.: _____ EXPIRATION DATE: _____

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

Owner Section 7044 [] Minor work under 200 Section 7040 []
 Employee working for wages only: Section 7053 []
 Other: _____

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

PRESENT BLDG. USE: _____ PROPOSED BLDG. USE: _____

DESCRIBE WORK TO BE DONE: (TENANT IMP)
INSTALL FIRE SPRINKERS

NEW [] ADD'N [] ALTER [] REPAIR [] DEMOLISH []

FLOOR AREA (SQ. FT.): _____ NO. OF STORIES: _____ NO. OF DWELLING UNITS: _____

If work is not started within 180 days from date of issue or is 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: _____

AUTHORIZED BY: [Signature] DATE: 11-26-84

INSPECTOR: _____

CITY OF GARDEN GROVE

PLOT PLAN

PUBLIC WORKS & DEVELOPMENT

OWNER <i>JOANNA WESTERN MILLS</i>		JOB ADDRESS <i>12632 Mariposa St.</i>		PERMIT NO. <i>137997A</i>
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSOR'S PARCEL NO. <i>215-03107</i>	LOT	BLOCK
ADDRESS		CITY		TRACT
PLEASE CHECK ONE OR MORE				
<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				
DATE <i>11/20/18</i>		JOB DESCRIPTION <i>FIRE SPRINKLER</i>		PERMIT VALUE <i>1800</i>

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.

- spec on wheels
 - closets not protected
 - fixture in way of S.H. Prop
 - install not present

PLOT PLAN APPROVED BY _____

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

By _____

ELECTRICAL PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

SINGLE PHASE SERVICE SIZE <input type="checkbox"/> UG <input checked="" type="checkbox"/> OH		IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE
AMPS	VOLTS	RIG. CONDUIT	Residential (R-1 & R-3) sq. ft.		
THREE PHASE SERVICE SIZE <input checked="" type="checkbox"/> 3 Wire <input type="checkbox"/> 4 Wire <input type="checkbox"/> UG <input checked="" type="checkbox"/> OH			Garage, Resid. (M) sq. ft.		
200	240	a"	Service Meter, Single Phase		
APPROVAL	DATE	INSPECTOR	Service Meter, Three Phase	1	1400
Underground	4-8-86	JL	Add'l Meter, Three Phase		
Conduit			Temporary Power Pole		
Wiring - Rough			Pole, Power, Light, etc.		
Heater			Sub-Panels 1 φ		
Fixtures & Trim			Sub-Panels 3 φ		
Motors			Outlets		
			Fixtures		
			Fixtures, Merc. Quartz, etc.		
			Heater--Not Over 1550 W		
			Washer		
			Dryer		
			Hot Water Heaters		
			Dishwasher		
			Domestic Range or Oven		
			Disposal		
			Power Apparatus--H.P., K.W. or K.V.A. Motors, Transformers, etc.		
			Not Over 1 each		
			Over 1, Not Over 10 each	4	525
			Over 10, Not Over 30 each	1	700
			Indv. Circuits		
			Time Clock		
			Sign		
			Sign Hookup		
Ufer					
Service					
FINAL	3-14-86	JL			
Utility Notice					

ITEM	CODE	FEES
Plan Retention Fee		
Plan Check		
Permit Issuance		43.00
		10.00
TOTAL FEES		53.00

ADDRESS 12632 MONARCH ST	
LOT NO. BLK NO. TRACT NO.	ELECTRIC PERMIT NO. 144871A
OWNER SO. CAL. CARTON	PHONE 973-5458
OWNER'S ADDRESS Same	
NEW BUILDING OR ADDITION - AREA SQ. FT.	EXISTING BUILDING OR REMODEL AREA SQ. FT.
VALIDATION	
ELECTRICAL CONTRACTOR Graphic Electric	STATE LIC. NO. & TYPE C-10 366293
ADDRESS 5174 Valley Bl	CITY L.A.
	PHONE 223-1277
WORKER'S COMPENSATION REQUIREMENTS	
State Compensation Insurance Policy No. _____ Expiration Date _____	
<input type="checkbox"/> I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.	
NOTE: If, after making such certificate, the applicant for the permit should become subject to the Worker's Compensation provisions of this code, he shall forthwith comply with the provisions of Section 3700 or his permit shall be deemed revoked.	
<input checked="" type="checkbox"/> I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed relevant to this permit.	
PERMIT APPLICANT SIGNATURE _____ DATE 3/11/86	
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 <input type="checkbox"/> Minor work under \$200: Section 7048 <input type="checkbox"/> Employee working for wages only: Section 7053 <input type="checkbox"/>	
Other: _____	
(PRINT) PROPERTY OWNER	(SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT _____ DATE _____
A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.	

I, INSPECTOR

MONARCH ST

STREET NAME

12632

ADDRESS

APT. NO.

2

CARD NO.

MONARCH ST

12632

CITY OF GARDEN GROVE, CALIFORNIA

Development Services Department

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



Address : 12632 MONARCH ST
Parcel No: 21503107 Type: B21

Suite: PERMIT NO.: 11688
Date : 01/27/92 Insp Dist :

Owner : EJM DEVELOPMENT CO (PT)
Address: _____
Phone: _____

Applicant: SUBURBAN PROPANE
Address : 535 MELROSE AVE
PLACENTIA CA 92670
Phone: 714-993-9400

Architect: _____
Address : _____

Engineer: Peter A. Lockwood
Address : 147 N. LEEWOOD ST. 1
LEEWOOD, CA 92761

LIC: _____ EXP: _____ PH: _____

LIC: 8004 EXP: _____ PH: (209) 268-4933

WORKER'S COMPENSATION REQUIREMENTS

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

Proposed Work: ABOVE GROUND PROPANE TANK

Value	: 1900		
Floor Area:	0		
PLANCHHECK FEE PAID 12-04-			
Permit	1	43.72	
Issuance	1	10.00	
GENL PLAN/CULT ART	1	5.50	

BUSINESS TAX CERTIFICATE INFORMATION

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

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

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Pre Inspect		
Foundation	1/29/92	
Concrete Floor		
Reinforcing		
Masonry		
Roof Shtg		
Rough Frame		
Insul / Energy		
Drywall		
Lath		
Plas. Brown Ct.		
Landscaping		
Pre Gunite		
Pre Deck		
Pre Plaster		
Planning Final	6/20/93	
Bldg Final		
Utility Notified		

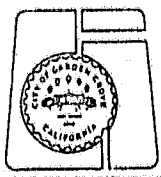
3 PER	43.72
MISC.	5.50
ISS	10.00
085162A 1-27-92	CHECK 59.22

3200	5.50
3226 BLDG PERM &	43.72
3517 ISSUANCE FEE	10.00

Authorized by: [Signature] TOTAL FEES 59.22

Inspection Requests 741-5332
General Information 741-5307

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



CITY OF GARDEN GROVE, CALIFORNIA

Development Services Department

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

Address : 12632 MONARCH ST
 Parcel No: 21503107 Type: B21

Suite: _____ PERMIT NO.: 2373M
 Date : _____ Insp Dist : _____

Owner : EJM DEVELOPMENT CO (PT)
 Address: _____

Applicant: OWNER
 Address : 12632 MONARCH ST

Phone: _____

Phone: _____

Architect: _____
 Address : _____

Engineer: _____
 Address : _____

LIC: _____ EXP: _____ PH: _____

LIC: _____ EXP: _____ PH: _____

WORKER'S COMPENSATION REQUIREMENTS

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

Proposed Work: ABOVE GROUND PROPANE TANK

Value : 1900
 Floor Area: 0
 Plan Check BA 4198 1 28.09

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 \$200; Section 7048 Employee working for wages only; Section 7053 Other: _____

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

Plan Check only

B CHECK 28.09
 0H9586A12-04'91 CHECK 28.09

INSPECTION RECORD

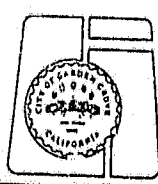
APPROVAL	DATE	INSPECTOR
Pre Inspect	_____	_____
Foundation	_____	_____
Concrete Floor	_____	_____
Reinforcing	_____	_____
Masonry	_____	_____
Roof Shtg	_____	_____
Rough Frame	_____	_____
Insul / Energy	_____	_____
Drywall	_____	_____
Lath	_____	_____
Plas. Brown Ct.	_____	_____
Landscaping	_____	_____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

3527 BUILDING P. 28.09

Authorized by:  TOTAL FEES 28.09

Inspection Requests
 741-5332
 General Information
 741-5307

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



FILE

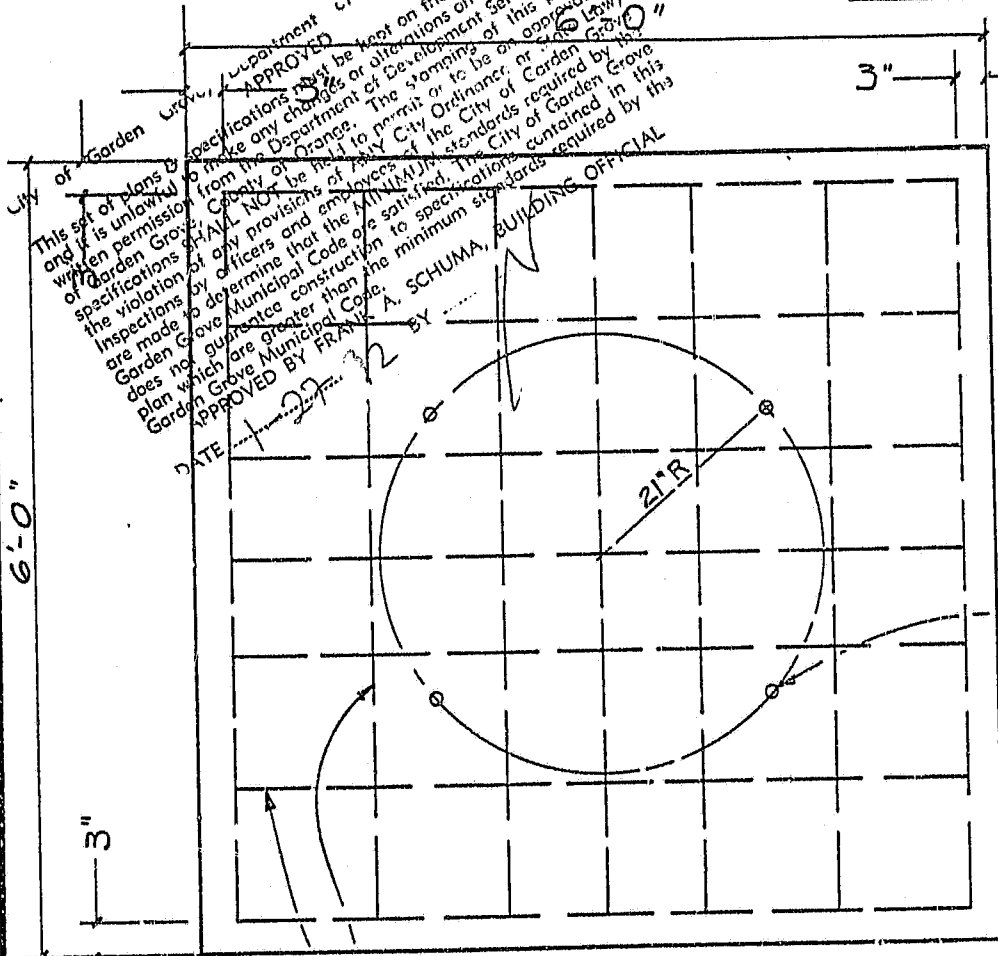
1. INSPECTOR

PETER A. HOCKAS
CIVIL ENGINEER

ENGINEERING — PLANNING — DRAFTING

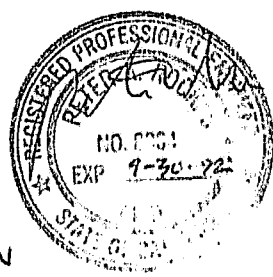
147 N. FRESNO ST. FRESNO, CALIF. 93701 (209) 208-4888

Department of Planning
 APPROVED
 This set of plans and specifications may be kept on the job at all times and it is unlawful to make any changes or alterations on same without written permission from the Department of Development Services, City of Garden Grove. Inspections shall not be held to be an approval of the violations of any provisions of ANY City Ordinance, or State Law, or any other laws, rules, regulations, or standards required by the City of Garden Grove Municipal Code. The stamping of this plan does not guarantee construction to specifications contained in this Plan which are greater than the minimum standards required by the City of Garden Grove Municipal Code.
 APPROVED BY FRANK A. SCHUMA, BUILDING OFFICIAL
 DATE 10-27-91



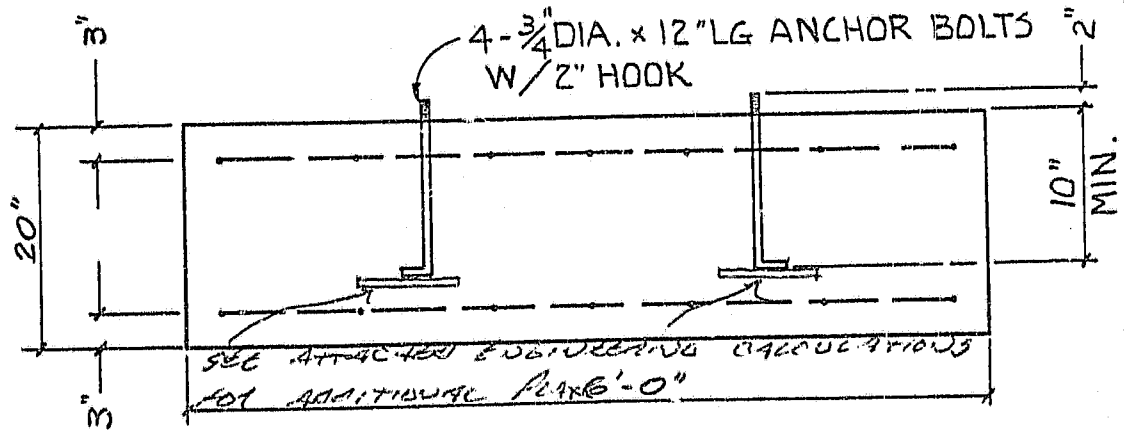
- TANK WT. 2.9K
- FUEL WT. 4.3K
- SOIL LOAD 1.0K
- SEISMIC ZONE 4
- WIND SPEED 90M
- CONCRETE 2000PSI
- ANCHOR BOLT ASTM A-307
- REBAR ASTM A615
GRADE 40.

4- $\frac{3}{8}$ " DIA HOLE ON
 42" DIA. BOLT.
 CIRCLE EQUALLY
 SPACE.
 (VARY DIMENSION)



#4 REBAR @ 12" O.C. EA. WAY EA. FACE

4- $\frac{3}{4}$ " DIA. x 12" LG ANCHOR BOLTS
 W/ 2" HOOK



SEE ATTACHED ENGINEERING CALCULATIONS
 FOR ADDITIONAL PLAN 6'-0"

FILE

HANSON 1150 GAL. VERTICAL TANK FOUNDATION.

SCALE: $\frac{3}{4}$ " = 1'-0"

CUSTOMER

CO-ORDINATED DELIVERY
 12642 MONARCH ST.
 GARDEN GROVE CA. 92642

DATE:
 10-31-91
 DRAWN BY:
 A.T.



5

SUBURBAN PROPANE

FORMULA 2624 (a) IN LUG

IS WHEN BOLTS ARE SET TO
DEPTH SPECIFIED IN TABLE 26 F.
OWN DEPTH IS 12"

$$\text{STRENGTH OF BOLTS} = \frac{3200}{4} = 800 \text{ LBS}$$

NEGLECTIBLE (SEE P.4)

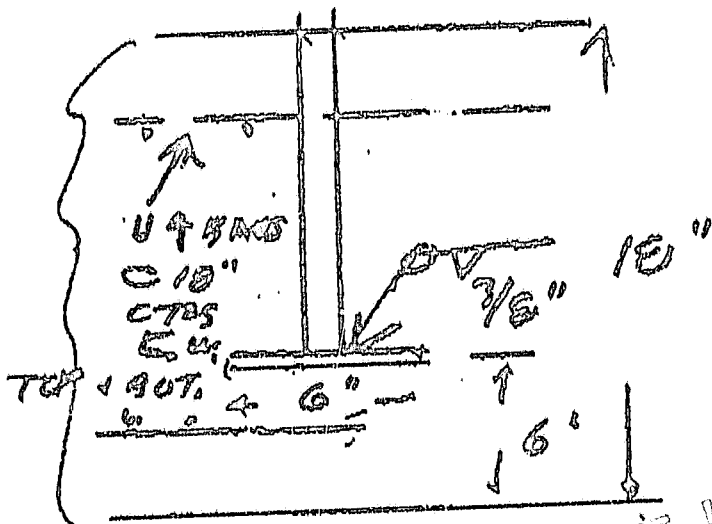
TENSION OR SHEAR ON CONCRETE = 12 PSI

TO SATISFY REQUIREMENTS
OF FARTHER GROUP WOULD

A 6" x 6" AT 1/2" SPACINGS

TO BOTTOM OF BOLTS

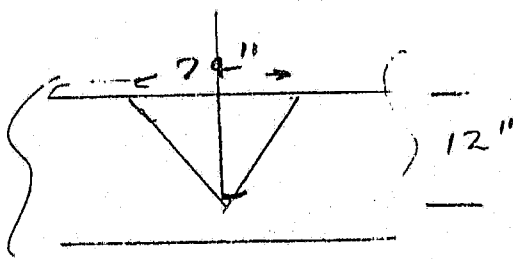
USE A-325
BOLTS



FILE Peter A. Rogas

APPROXIMUM 1150 VERT. TANK

CHECK PUNCHING SHEAR



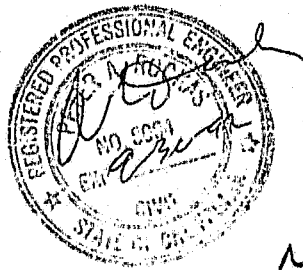
SURFACE AREA
 $= \frac{1}{2} \pi d \sqrt{1/4 d^2 + h^2}$
 $= \frac{1}{2} (\pi) (74) \sqrt{1/4 (74)^2 + 12^2}$
 $= \underline{6400''}$

TENSION ON BOLT = 11640 ^K

TENSION ON CONC = $\frac{11640}{640} = \underline{18.19 \text{ PSI}}$

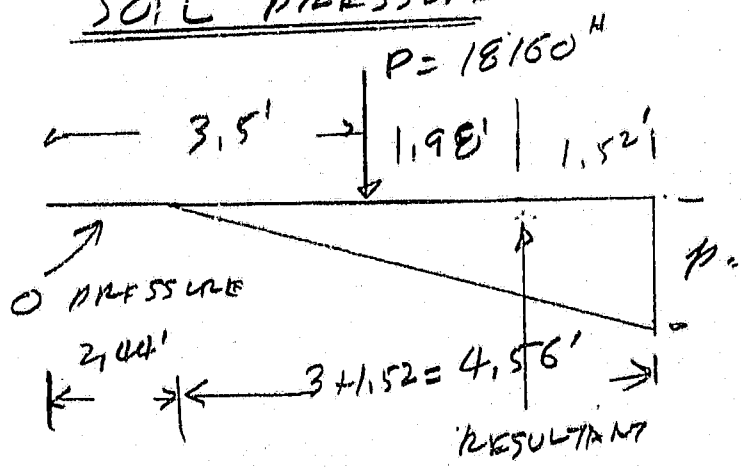
ALLOWABLE TENSION FOR

PLAIN CONC = $1.6 \sqrt{f_c}$
 $= 1.6 \sqrt{2000} = \underline{71.5 \text{ PSI OK}}$



NOTE ABOVE DOES NOT REMAIN APPLY FOOTING IS REINFORCED CONC!

SOIL PRESSURE



MAX SOIL PRESSURE

$= \frac{2 \times 18160}{4.56 \times 7} = \underline{1138 \text{ PSI}}$

CHECKS WITH PAGE 1 OF CMES

RESULTANT DOES NOT FALL IN MIDDLE ONE-THIRD - DOES NOT HAVE TO,

NO SUCH THING AS NEGATIVE PRESSURE - 0 PRESSURE ONLY

NOTE 12" LEGS ARE NOT BOLTS. **FILE**

PROJECT:

TO MR
DING VICTORIA

PETER A. ROCKAS

CIVIL ENGINEER CA LIC 8004

1056 N. Van Ness, Suite Q
Fresno, CA 93728268-4933
Res. 439-4117

JOB NO.:

BY:

DATE:

PAGE OF

STRUCTURAL CALCULATIONS

JAN 27 - 1992

DEAR SIR - REGARDING VERTICAL
TANK FOR CO-ORDINATION DELIVERY
IN GARDEN CROFT

REGARDING FORMULA
FOR COMBINED SHEAR + TENSION
IN BOLTS - PER SEC 2624(9)

THIS FORMULA IS FOR BOLTS
IN PLAIN CONCRETE.

IN OUR CASE THE FTG
WAS STEEL IN TWO LAYERS
TOP + BOTTOM

Peter G. Hollen

FILE

1:30 1-17
DWB

PLANNING

City of Garden Grove
Planning Plan Check Application

1. Job Address 12632 Monrovia Suite _____

2. New Addition Alteration Repair Demo

3. Prop. Use Propane Tank Present Use Industrial

4. Property Owner Coordinated Delivery Ph _____
Address _____

5. Contractor Suburban Propane Ph _____
Address _____
Lic. No. _____ Lic. Class _____ Exp. Date _____
Workmans Comp. Ins. Co. _____
Policy No. _____ Exp. Date _____

6. Architect/Designer _____ Ph _____
Address _____
Lic. No. _____ Exp. Date _____

7. Engineer _____ Ph _____
Address _____
Lic. No. _____ Type of Lic. _____ Exp. Date _____

8. Exist. flr. area _____ Flr. area added _____ Value _____

9. Proposed Work: above ground propane tank

→ Indicate if this is remaining required parking spaces

" height of tank

" landscape location for possible screening

F O R C I T Y U S E O N L Y

Planning Information:

1. Use zone..... _____

2. Lot size (sq. ft.).. _____

3. Lot coverage (%).... _____

4. Percent increase.... _____

5. Parking required.... _____
provided.... _____

6. No. of units..... _____

7. No. of guest rms.... _____

8. Planning Case No.... _____

Processing Information:

1. Plan Check No..... P A 4198

2. Submittal date..... 12-3-91

3. Date sent..... 12-3-91

4. Checked by K. Hill

5. Phone.... (714) 741 - 5312

6. Corrections: None Attached DK PW 1/8/92

7. Verification: By appointment
 In writing

8. Date returned 12-18-91

CITY OF GARDEN GROVE
DEPARTMENT OF DEVELOPMENT SERVICES
Building Services Division

BUILDING PLAN REQUIREMENTS

Job Address: 12632 Monarch Plan Check No. BA4198
 Floor Area: _____ Stories: _____
 Occ. Group: _____ Const. Type: _____ Height: _____
 No. of Occ.: _____ Sprinklers: _____ Date: 12-12-91

MAKE ALL CORRECTIONS CIRCLED BELOW, IN INK, ON EACH SET OF PLANS

To expedite verification of corrections made, indicate in the space adjacent to the correction circled or written, the detail or section number and page number of plans where correction is made.

I. PERMIT REQUIREMENTS:

1. Re-submit the original marked set of plans and calculations and this correction list with the corrected plans and calculations.
2. Show job address on plans
3. Separate permit(s) is/are required for each building/structure, signs, trash enclosure, fence, _____
4. Provide a fully dimensioned plot plan with all the recorded property lines on the City form.
5. A certificate of workers' compensation insurance must be on file with the Building Department before a permit can be issued.
6. A grading permit is required. Submit two (2) sets of grading plans.
7. Obtain the Planning Department approval. (Tel. No. 741-5312)
8. Obtain the Fire Department approval. (Tel. No. 741-5630)
9. Obtain the County Health Department approval.
10. Obtain a permit from the State Division of Industrial Safety.
11. This building is subject to the State Energy Regulations. Submit two (2) sets of Energy calculations and incorporate all features on plans. Provide a certificate compliance on the plans signed by the Design Professional and the owner.

12. This project is subject to the State Noise Regulations. Submit two (2) sets of Acoustical Analysis and incorporate all features on plans.
13. This project is located in Flood Hazard area. Show conformance to the City of Garden Grove Flood Ordinance.
14. A demolition permit is required for all buildings to be removed.
15. Provide pedestrian protection in accordance with Chapter 44 of the Uniform Building Code.
16. Separate permit and plancheck is required for: Electrical, Mechanical, Plumbing, Fire protection system, _____
17. The following assessment, in addition to the regular building and plancheck fee, shall apply to this project:
 - a. School District fee (Tel. No. 638-6530)
 - b. Sewer fee (Tel. No. 534-3934)
 - c. Street Bond
 - d. Water fee
 - e. Parkway Tree fee
 - f. Park and Recreation fee
 - g. Drain Assessment fee
 - h. Art fee
 - i. _____
 - j. _____

II. PLANS

1. 2 sets of plans and calculations will be required when the permit is issued.
2. Provide with each set of plans:

a. Plot Plan	g. Foundation Plan
b. Floor Plan	h. Diaphragm Nailing Plan
c. Construction Section	i. Two Elevations
d. Approved Grading Report	j. Grading Details
e. Framing Plans	k. Structural Details
f. _____	l. _____
3. Show location of area separation walls on plot, foundation, floor and roof plans.
4. Comply with attached supplemental correction list(s) of (disabled access) (energy) (_____) provisions.
5. (Soil) (Foundation) (Geology) report(s) are required and must be approved prior to issuance of permit.

III. STRUCTURAL

1. Design anchorage of bolt to concrete in accordance with Sec. 2624 for combined tension and shear.

checked by: DING VICTORIA
741 5320

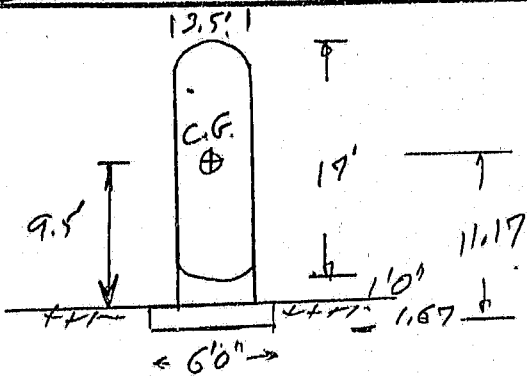
of sheets

PROJECT:

SUBURBAN PROPANE
1150 ON - VERTICAL TANK
1988 UBC

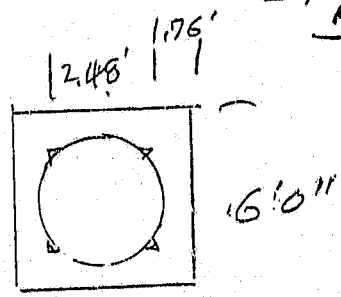
PETER A. ROGKAS
CIVIL ENGINEER CA LIC # 8004
147 N. FRESNO ST. 268-4933
FRESNO, CA 93701 (209) 482-2336

DATE: 5-1-91 PAGE 1 OF 7



TANK: ROY E. HANSON
CMP: 1150 WC,
OML: 17'0"
OD: 42"

PROVISED SOIL PRESS = 1.00 K/SF



SEISMIC ZONE 4

WT. OF TANK = 2.9 K
FUEL = 4.23 K

SUB TOTM = 7.13 K
FIC = 7.02 K
TOTM = 16.15 K

USE SEISMIC ZONE 4 (ACTUALLY LESS)

$V = Z(1.0)W_p$
 $= (0.14)(1.00)(11.17) = 0.30 W_p$
 $V = 0.30 \times 7.13 = 2.14 K$



WIND WIND: 112 x 4.8 x 21 = 20 psf

$W = 20 \times 3.5 \times 17 = 1.19 K$

SEISMIC GOVERNS

OUT. MT (FUEL) = $2.14 \times 11.17 = 23.89' K$

RES. MT = $16.15 \times 3.00 = 48.45' K$

SAFETY FACTOR $\frac{48.45}{23.89} = 2.03 < 1.50$ OK

FILE

MONARCH ST

STREET NAME

12632

ADDRESS

APT. NO.

CARD NO.

3

SUBURBAN PROPERTY 1150 GAL (2)
 CHECK SOIL PRESSURE VERTICAL TANK

$\frac{1}{16} \times 15$ SIG. MOM DUE TO FC
 $= \frac{bd^2}{6} = \frac{67 \times 12^2}{6}$
 $= 36 \text{ in}^3$

$= \frac{16.15}{6 \times 6} + \frac{23.89}{36}$

$= 0.45 + 0.66 = 1.11 \text{ KSF}$

ALLOWABLE = $\frac{1000 \text{ PSF} \times 4}{3} = 1333 \text{ PSF}$

CHECK FTL

SOIL PRESSURE
 $= 1.11 \text{ KSF}$
 WT. OF 20" FT = 250 PSF
 NET UPLIFT PRESSURE
 $= 1.11 - 0.25 =$
 0.86 KSF

$MT = (0.86 \times 2.5)^2$
 $d = 10" \times 2 = 2.69 \text{ FT KEIPS}$

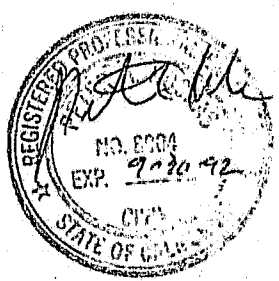
$A_{SC} = \frac{M}{R_d} = \frac{2.69}{100 \times \frac{1}{2} + 10}$
 $= 0.14 \text{ in}^2$

USE "4 BARS @ 12" CTS
E.U.

CHECK TENSION ON ANCHOR BOLTS

$E = \frac{2.14 \times 7.5'}{3.49} = 5.83 \text{ K}^H$

USE $\frac{3}{4}"$ - A-307
 BOLTS



FILE

Ck. _____

JOB DESIGN STANDARDS

No. C-0220-2

Sheet _____

By: g.b.

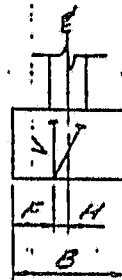
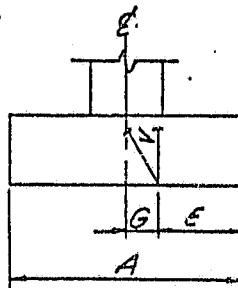
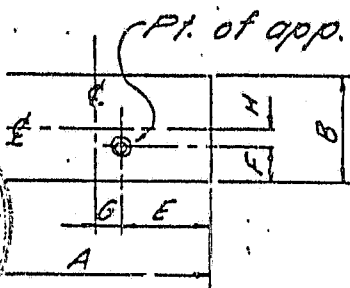
SUBJECT FOUNDATION PRESSURES UNDER RECT-
ANGULAR BASES ECCENT. LOADED

Of _____

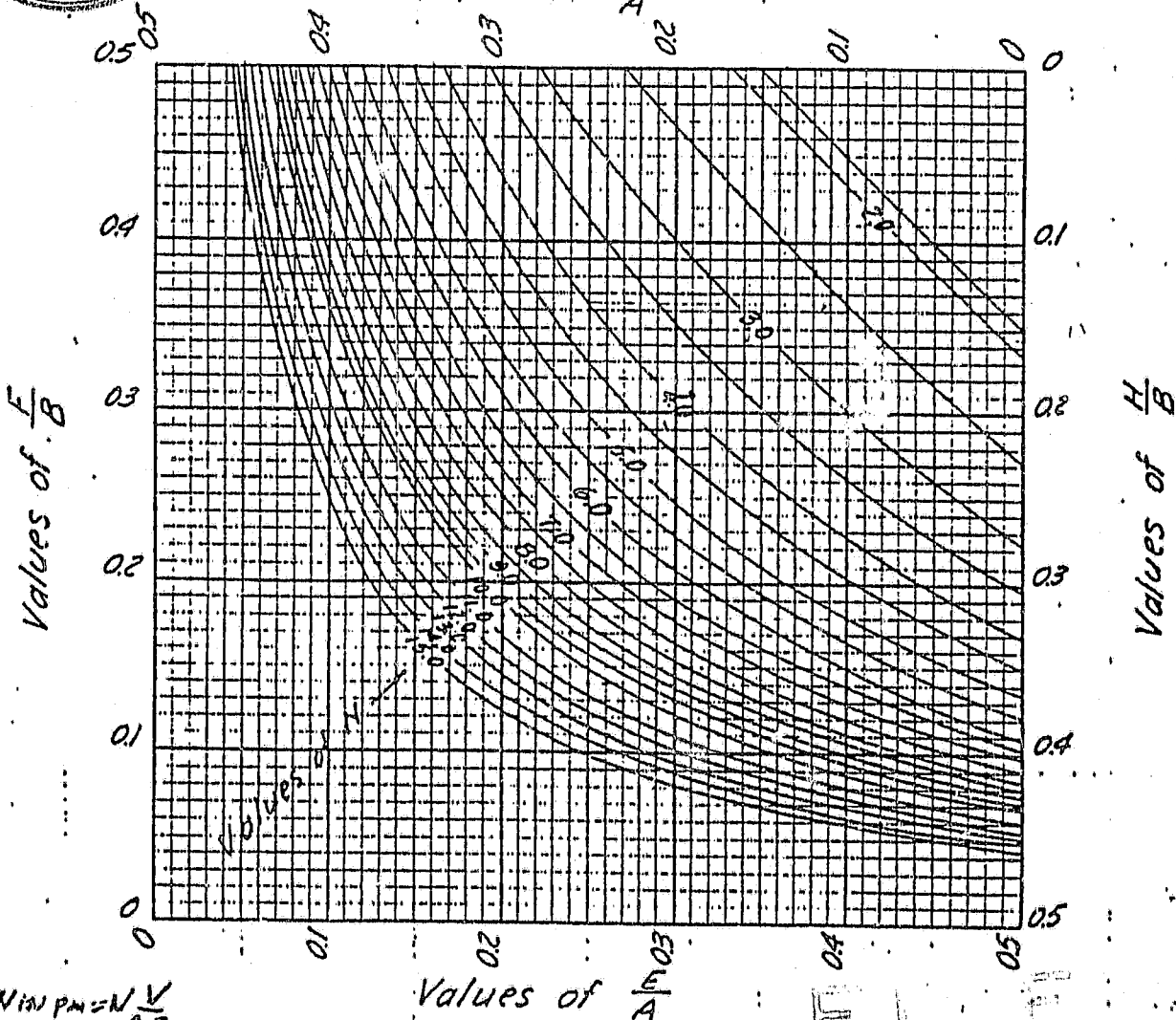
Date 3-8-90

V = Vertical component of resultant.

$pm = N \frac{V}{AB}$ = Maximum pressure per sq. ft.



Values of $\frac{G}{A}$



$N \text{ in } pm = N \frac{V}{AB}$

To find N , enter chart with values of E and F or G and H . $N \text{ in } pm = N \frac{V}{AB}$

1-24-92

4.30PM

To GARY John:

PLEASE USE THIS TO
SHOW DING VICTORIA.
THE DRAWING WITH
WET STAMP TO FOLLOW
AS SOON AS POSSIBLE
(TUESDAY 1-28-92)

PLEASE USE THIS
CALCULATION TO GET THE
PERMIT.

FILE

SUBURBAN PROPANE
ANDY (FRESH)

5

SUBSOIL PROFILES

FOUNDATION 2524 (E) IN WALL
 IS WITHIN BOLTS ARE SET TO
 DEPTH 3 FEET FROM IN THUS 26 F.
 OUR DEPTH IS 12"

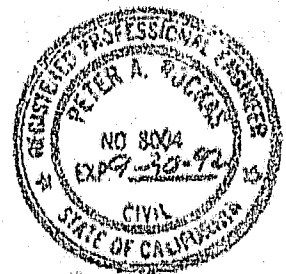
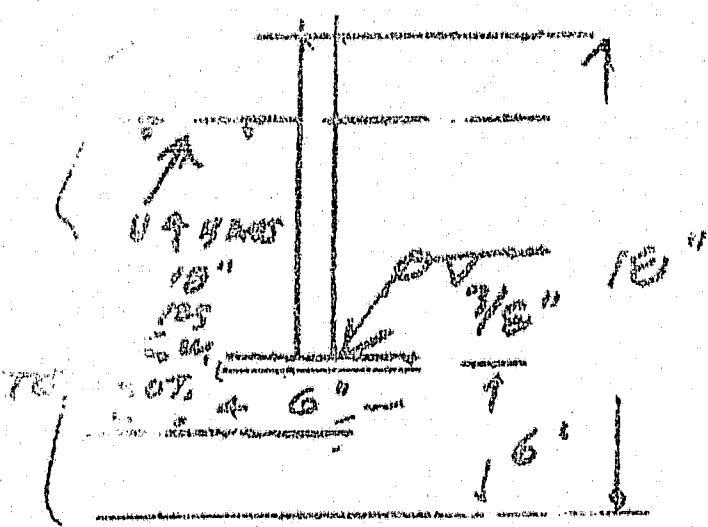
SIZES OF BOLTS IS 3/8" DIA
 $\frac{3}{8} = 0.375$

APPLICABLE (SEE 20)

SECTION OF CONCRETE

TO SATISFY REQUIREMENTS
 A MINIMUM OF ONE
 6" x 6" x 1/2" ST
 TO BOTTOM OF BOLTS

USE A-36
 BOLTS



Peter A. Rojas



**CITY OF GARDEN GROVE
BUILDING SERVICES**

12632 MONARCH ST

PERMIT#:13-0094

ISSUED:1/15/13

General Info : 714-741-5307

Inspection Requests : 714-741-5332

Owner EJM DEVELOPMENT CO			Telephone		Zip .92841	Building Address 12632 MONARCH ST																														
Address 12632 MONARCH ST			City Garden Grove		State CA	Suite/Unit/Building																														
Applicant ANDERSON COMMERCIAL PLUMBING INC			Telephone 909-599-5950		Zip 91773	TYPE Plumbing Permit		ISSUED BY Joanne Chung																												
Address 190 E ARROW HWY #H			City SAN DIMAS		State	Inspector Dist. H10	Parcel Number 21503107	LOT TRACT																												
State Licence 731320		Expires N/A	City Licence		Expires	Valuation \$0.00																														
Contractor ANDERSON COMMERCIAL PLUMBING INC			Telephone 909-599-5950		Zip 91773	Final Inspector's Signature <i>R. Price</i> Date <i>2/14/13</i>																														
Address 190 E ARROW HWY #H			City SAN DIMAS		State	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="8" style="text-align: center; vertical-align: middle; font-size: 2em;">F E E S</td> <th>Description</th> <th>Quantity</th> <th>Amount</th> </tr> <tr> <td>Building Permit Document Retention Fee</td> <td style="text-align: center;">1</td> <td style="text-align: right;">\$5.00</td> </tr> <tr> <td>Building Technology Fee</td> <td style="text-align: center;">1</td> <td style="text-align: right;">\$10.00</td> </tr> <tr> <td>Floor sink</td> <td style="text-align: center;">1</td> <td style="text-align: right;">\$9.50</td> </tr> <tr> <td>Water Heater</td> <td style="text-align: center;">1</td> <td style="text-align: right;">\$30.00</td> </tr> <tr> <td>Lavatory</td> <td style="text-align: center;">1</td> <td style="text-align: right;">\$9.50</td> </tr> <tr> <td>Water closet, Bidet</td> <td style="text-align: center;">1</td> <td style="text-align: right;">\$9.50</td> </tr> <tr> <td>Issuance Fee</td> <td style="text-align: center;">1</td> <td style="text-align: right;">\$35.00</td> </tr> <tr> <td>TOTAL</td> <td></td> <td style="text-align: right;">\$108.50</td> </tr> </table>			F E E S	Description	Quantity	Amount	Building Permit Document Retention Fee	1	\$5.00	Building Technology Fee	1	\$10.00	Floor sink	1	\$9.50	Water Heater	1	\$30.00	Lavatory	1	\$9.50	Water closet, Bidet	1	\$9.50	Issuance Fee	1	\$35.00	TOTAL		\$108.50
F E E S	Description	Quantity	Amount																																	
	Building Permit Document Retention Fee	1	\$5.00																																	
	Building Technology Fee	1	\$10.00																																	
	Floor sink	1	\$9.50																																	
	Water Heater	1	\$30.00																																	
	Lavatory	1	\$9.50																																	
	Water closet, Bidet	1	\$9.50																																	
	Issuance Fee	1	\$35.00																																	
TOTAL		\$108.50																																		
State Licence 731320		Expires N/A	City Licence		Expires																															
Floor Area(sq. ft.)		Residential/Commercial Commercial																																		
Job Description PLUMBING FOR BOTH PUMP ROOM FLOOR SINK & RESTROOM UPGRADES																																				
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.																																				
<input checked="" type="checkbox"/> Applicant's Signature <i>Christian</i>		Print Name <i>CHRISTIAN</i> Date <i>1/15/13</i>																																		

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

Permit Type: PLUMB

ORIGINAL



**CITY OF GARDEN GROVE
BUILDING SERVICES**

12632 MONARCH ST

PERMIT#:13-0329

ISSUED:2/20/13

General Info : 714-741-5307

Inspection Requests : 714-741-5332

Owner EJM DEVELOPMENT CO	Telephone 92841	Zip 92841	Building Address 12632 MONARCH ST		
Address 12632 MONARCH ST	City Garden Grove	State CA	Suite/Unit/Building		
Applicant MAMMOTH ELECTRIC, INC.			TYPE Electrical Permit		
Telephone 978-8940			ISSUED BY Joanne Chung		
Address 1260 E KATELLA			Inspector Dist. H10	Parcel Number 21503107	LOT TRACT
State Licence 709698 C-10			Valuation \$0.00		
Expires N/A			Final Inspector's Signature <i>[Signature]</i> 3/4/13		
Contractor MAMMOTH ELECTRIC, INC.			Date <i>[Signature]</i>		
Telephone 978-8940			F E E S		
Address 1260 E KATELLA			Description		
State Licence 709698 C-10			Quantity		
Expires N/A			Amount		
City Licence			Service 6V ma, 200 amps max		
Expires			1		
Floor Area(sq. ft.)			Ad-hoc		
Residential/Commercial Commercial			1		
Job Description SUPP TO PERMIT 13-0016--RELOCATE (E) MAIN ELECTRICAL PANEL--OK PER R.PRICE			TOTAL		
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.			\$45.00		
X Applicant's Signature <i>[Signature]</i>					
Print Name <i>Art Jimenez</i> Date <i>2/20/13</i>					

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

Permit Type: ELEC

ORIGINAL



**CITY OF GARDEN GROVE
BUILDING SERVICES**

12632 MONARCH ST

PERMIT#:13-0093

ISSUED:1/15/13

General Info : 714-741-5307

Inspection Requests : 714-741-5332

Owner EJM DEVELOPMENT CO			Telephone	Zip 92841	Building Address 12632 MONARCH ST																																												
Address 12632 MONARCH ST			City Garden Grove	State CA	Suite/Unit/Building																																												
Applicant OLTMANS CONSTRUCTION CO.			Telephone 213-948-4242	Zip	TYPE Remodel																																												
Address 10005 MISSION MILL ROAD			City	State	ISSUED BY Joanne Chung																																												
State Licence 86393 AB	Expires N/A	City Licence	Expires	Inspector Dist. H10	Parcel Number 21503107	LOT	TRACT																																										
Contractor OLTMANS CONSTRUCTION CO.				Telephone 213-948-4242	Zip	Valuation \$10,000.00																																											
Address 10005 MISSION MILL ROAD				City	State	Final																																											
State Licence 86393 AB	Expires N/A	City Licence	Expires	Inspector's Signature <i>R. Price</i>																																													
Floor Area(sq. ft.)				Residential/Commercial Commercial																																													
Date 1/15/2013				Date 2/14/13																																													
Job Description REMODEL (E)OFFICES, (E) RESTRM ACCESSIBLE/ADD RAMP & PARKING/ENLARGE WALL OPENINGS/ADD TRUCK ACCESS RAMP																																																	
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.																																																	
<input checked="" type="checkbox"/> Applicant's Signature <i>Hipolito Arta</i> Print Name <u>Hipolito Arta</u> Date <u>1/15/2013</u>				F E E S <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Description</th> <th>Quantity</th> <th>Amount</th> </tr> </thead> <tbody> <tr> <td>Plan Check Fee - Disabled Access (Commercial)</td> <td>1</td> <td>\$13.13</td> </tr> <tr> <td>Plan Check Fee</td> <td></td> <td>\$131.27</td> </tr> <tr> <td>Water Plan Check</td> <td>1.5</td> <td>\$90.00</td> </tr> <tr> <td>Building Permit Document Retention Fee</td> <td>1</td> <td>\$5.00</td> </tr> <tr> <td>Building Technology Fee</td> <td>1</td> <td>\$10.00</td> </tr> <tr> <td>Plan Retention</td> <td>11</td> <td>\$44.00</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>Building Permit Fee</td> <td></td> <td>\$198.00</td> </tr> <tr> <td>One-Stop Permit Center Surcharge</td> <td></td> <td>\$3.96</td> </tr> <tr> <td>Cultural Arts Fee, Valuation</td> <td></td> <td>\$6.50</td> </tr> <tr> <td>General Plan Update Fee, Valuation</td> <td></td> <td>\$13.00</td> </tr> <tr> <td>TOTAL</td> <td></td> <td>\$550.86</td> </tr> </tbody> </table>				Description	Quantity	Amount	Plan Check Fee - Disabled Access (Commercial)	1	\$13.13	Plan Check Fee		\$131.27	Water Plan Check	1.5	\$90.00	Building Permit Document Retention Fee	1	\$5.00	Building Technology Fee	1	\$10.00	Plan Retention	11	\$44.00	BSASRF State Fee		\$1.00	Issuance Fee	1	\$35.00	Building Permit Fee		\$198.00	One-Stop Permit Center Surcharge		\$3.96	Cultural Arts Fee, Valuation		\$6.50	General Plan Update Fee, Valuation		\$13.00	TOTAL		\$550.86
Description	Quantity	Amount																																															
Plan Check Fee - Disabled Access (Commercial)	1	\$13.13																																															
Plan Check Fee		\$131.27																																															
Water Plan Check	1.5	\$90.00																																															
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Plan Retention	11	\$44.00																																															
BSASRF State Fee		\$1.00																																															
Issuance Fee	1	\$35.00																																															
Building Permit Fee		\$198.00																																															
One-Stop Permit Center Surcharge		\$3.96																																															
Cultural Arts Fee, Valuation		\$6.50																																															
General Plan Update Fee, Valuation		\$13.00																																															
TOTAL		\$550.86																																															

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.

ORIGINAL

Permit Type: BLDG



**CITY OF GARDEN GROVE
BUILDING SERVICES**

12632 MONARCH ST

PERMIT#:13-0016

ISSUED:1/3/13

General Info : 714-741-5307

Inspection Requests : 714-741-5332

Owner EJM DEVELOPMENT CO			Telephone	Zip 92841	Building Address 12632 MONARCH ST			
Address 12632 MONARCH ST			City Garden Grove	State CA	Suite/Unit/Building			
Applicant MAMMOTH ELECTRIC, INC.			Telephone 978-8940	Zip	TYPE Electrical Permit		ISSUED BY Yoav Shernock	
Address 1260 E KATELLA			City	State	Inspector Dist. H10	Parcel Number 21503107	LOT TRACT	
State Licence 709698 C-10	Expires N/A	City Licence	Expires	Valuation				\$0.00
Contractor MAMMOTH ELECTRIC, INC.			Telephone 978-8940	Zip	Final			
Address 1260 E KATELLA			City	State	Inspector's Signature <i>[Signature]</i>			
State Licence 709698 C-10	Expires N/A	City Licence	Expires	Date <i>4/3/13</i>				
Floor Area(sq. ft.)	Residential/Commercial Commercial							
Job Description ELECTRICAL POWER FOR FIRE PUMP ROOM, INCLUDING 800 AMP AND 400 AMP METER MAIN								
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 <i>Art Jimenez</i> Date <i>1-3-13</i>							
F E E S	Description		Quantity	Amount				
	Subpanel/Distribution Panels (three phase)		4	\$260.00				
	Services over amps or over 6V		2	\$250.00				
	Power Apparatus - Over but not over 5 HP/kW/kVA/kVAR		1	\$25.00				
	Power Apparatus - Over but not over HP/kW/kVA/kVAR		1	\$12.00				
	Power Apparatus - Not over HP/kW/kVA/kVAR		1	\$9.50				
	Receptical, switch, outlet, and fixture		3	\$3.00				
	Building Permit Document Retention Fee		1	\$5.00				
	Building Technology Fee		1	\$10.00				
	Electrical Plan Check Fee		1	\$475.58				
Issuance Fee		1	\$35.00					
TOTAL			\$1,085.08					

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

Permit Type: ELEC

ORIGINAL



**CITY OF GARDEN GROVE
BUILDING SERVICES**

12632 MONARCH ST

PERMIT#:12-2590

ISSUED:12/21/12

General Info : 714-741-5307

Inspection Requests : 714-741-5332

Owner EJM DEVELOPMENT CO			Telephone	Zip 92841	Building Address 12632 MONARCH ST				
Address 12632 MONARCH ST		City Garden Grove	State CA		Suite/Unit/Building				
Applicant OLTMANS CONSTRUCTION CO.			Telephone 213-948-4242	Zip	TYPE Miscellaneous		ISSUED BY Joanne Chung		
Address 10005 MISSION MILL ROAD		City	State		Inspector Dist. H10	Parcel Number 21503107	LOT TRACT		
State Licence 86393 AB	Expires N/A	City Licence	Expires		Valuation \$10,000.00				
Contractor OLTMANS CONSTRUCTION CO.			Telephone 213-948-4242	Zip	Final				
Address 10005 MISSION MILL ROAD		City	State		Inspector's Signature <u>R. Price</u> Date <u>4/11/13</u>				
State Licence 86393 AB	Expires N/A	City Licence	Expires		F E E S	Description		Quantity	Amount
Floor Area(sq. ft.)		Residential/Commercial Commercial				Building Permit Document Retention Fee	1	\$5.00	
Job Description NEW 16'X 16' FIRE PUMP BLDG IN (E) INDUSTRIAL CENTER PARKING LOT						Building Technology Fee	1	\$10.00	
<p style="text-align: center;">DECLARATION</p> <p>I certify that I have read this application/permit and state that the information on all pages of this document is correct. I agree to comply with all City and County ordinances and State laws relating to building construction, and hereby authorize representatives of this City and County to enter upon the above mentioned property for inspection purposes.</p>						Plan Retention	10	\$40.00	
						BSASRF State Fee		\$1.00	
<p>X Applicant's Signature <u>[Signature]</u> Print Name <u>Helen Ho Ortie</u> Date <u>12/21/2012</u></p>					Issuance Fee	1	\$35.00		
					Building Permit Fee		\$198.00		
					One-Stop Permit Center Surcharge		\$3.96		
					Plan Check Fee		\$131.27		
					Plan Check Fee - Disabled Access (Commercial)	1	\$13.13		
					Cultural Arts Fee, Valuation		\$6.50		
					General Plan Update Fee, Valuation		\$13.00		
					TOTAL		\$456.86		

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



**CITY OF GARDEN GROVE
BUILDING SERVICES**

12632 MONARCH ST

PERMIT#:12-2413

ISSUED:12/3/12

General Info : 714-741-5307

Inspection Requests : 714-741-5332

Owner EJM DEVELOPMENT CO			Telephone	Zip 92841	Building Address 12632 MONARCH ST		
Address 12632 MONARCH ST		City Garden Grove	State CA		Suite/Unit/Building		
Applicant GENERAL UNDERGROUND FIRE PROTECTION INC			Telephone 714-632-8646	Zip 92807	TYPE Fire Sprinklers		ISSUED BY Yoav Shernock
Address 3910 E CORONADO ST #202		City ANAHEIM	State CA		Inspector Dist. H10	Parcel Number 21503107	LOT, TRACT
State Licence 485748 C34			Expires N/A	City Licence		Expires	
Contractor GENERAL UNDERGROUND FIRE PROTECTION INC			Telephone 714-632-8646	Zip 92807	Valuation \$85,500.00		
Address 3910 E CORONADO ST #202		City ANAHEIM	State CA		Final Inspector's Signature <u> </u> Date <u> </u>		
State Licence 485748 C34			Expires N/A	City Licence		Expires	
Floor Area(sq. ft.)		Residential/Commercial Commercial					
Job Description UPGRADE EXISTING OVERHEAD FIRE SPRINKLER SYSTEM AND ADD A FIRE PUMP							
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.							
<input checked="" type="checkbox"/> Applicant's Signature <u>Belinda Ryan</u>							
Print Name <u>Belinda Ryan</u>		Date <u>12/3/12</u>					
F E E S				Description		Quantity	Amount
				Water Plan Check		1.5	\$90.00
				General Plan Update Fee, Valuation			\$101.67
				Building Permit Document Retention Fee		1	\$5.00
				Building Technology Fee		1	\$10.00
				BSASRF State Fee			\$4.00
				Issuance Fee		1	\$35.00
				One-Stop Permit Center Surcharge			\$18.10
				Building Permit Fee			\$905.00
				Plan Check Fee			\$600.02
Cultural Arts Fee, Valuation			\$50.83				
TOTAL			\$1,819.62				

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



**CITY OF GARDEN GROVE
BUILDING SERVICES**

General Info : 714-741-5307
Inspection Requests : 714-741-5332

12632 MONARCH ST

PERMIT#:12-0599

ISSUED:3/19/12

Owner EJM DEVELOPMENT CO		Telephone	Zip 92841	Building Address 12632 MONARCH ST			
Address 12632 MONARCH ST		City Garden Grove	State CA	Suite/Unit/Building			
Applicant OLTMANS CONSTRUCTION CO.		Telephone 213-948-4242	Zip	TYPE Miscellaneous		ISSUED BY Joanne Chung	
Address 10005 MISSION MILL ROAD		City	State	Inspector Dist. H10	Parcel Number 21503107	LOT TRACT	
State Licence 86393 AB	Expires N/A	City Licence	Expires	Valuation \$120,000.00			
Contractor OLTMANS CONSTRUCTION CO.		Telephone 213-948-4242	Zip	Final			
Address 10005 MISSION MILL ROAD		City	State	Inspector's Signature <u>Me for AP</u>			
State Licence 86393 AB		Expires N/A	City Licence Expires	Date <u>4/11/12</u>			
Floor Area(sq. ft.)		Residential/Commercial Commercial					
Job Description PARTIAL VOLUNTARY SEISMIC RETROFIT INCL. CONTINUITY TIES & WALL ANCHORAGE/ADD HANDICAP RAMP & PARKING AT ENTRANCE							
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.							
<input checked="" type="checkbox"/> Applicant's Signature <u>[Signature]</u>		Print Name <u>Hilario Ortiz</u> Date <u>3/19/12</u>					
F E E S				Description		Quantity	Amount
				General Plan Update Fee, Valuation			\$141.33
				Cultural Arts Fee, Valuation			\$70.67
				Plan Check Fee - Disabled Access (Commercial)		1	\$78.83
				Plan Check Fee			\$788.31
				City Valuation		120000	\$120,000.00
				BSASRF State Fee			\$11.00
				Issuance Fee		1	\$35.00
				One-Stop Permit Center Surcharge			\$23.78
				Building Permit Fee			\$1,189.00
TOTAL			\$2,337.92				

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

City of Garden Grove
Community Development Department
Building Division

Application for Unreasonable Hardship to Disabled Access Requirements

(For Existing Buildings Where Cost of Construction does not exceed \$120,000, Sec. 1134B.2.1. Exc. 1)
\$132,536.28

Project Address: 12632-12642 MONARCH ST.	Plan Check # 2011-346
Project Description: VOLUNTARY PARTIAL SEISMIC RETROFIT- WALL ANCHORAGE + CONTINUITY TIES	Total Construction Cost (project valuation) \$ 120,000

It is requested that the above project be granted an exemption from the requirements of the State of California Title 24, Accessibility Regulations, as specifically listed below. The specific accessibility features that create a hardship may be exempted but not all of them. The area of alteration itself may not be exempted.

Description of Access Features	Does this feature meet latest edition of Title 24?	If not, is this feature going to be made accessible as part of this permit?	If so, cost of making feature accessible? (Documentation may be required)
1. Path of travel to entrance	NO	YES	\$ 20,000 MIN.
2. Entrance to Building	YES		\$
3. Path of travel within building / facility to area of remodel	N/A		\$
4. Elevator	N/A		\$
5. Restrooms	NO	NO	\$
6. Public telephones if provided	N/A		\$
7. Drinking fountains if provided	N/A		\$
8. Other (parking, etc.)	NO	YES	\$ 10,000 MIN.
Total cost of access features provided (A).....			\$ 30,000 MIN.
Total cost of construction (B).....			\$ 120,000
(A + B) x 100% (20% minimum expenditure is required).....			25% (\$30,000) MIN
Has the same tenant performed work in the same tenant space, within the last three years?			NO
Description of access features to be provided (these must be reflected on plans): ADD NEW ADA COMPLIANT RAMP WITH CURBS AND HANDRAILS, RESTRIPE PARKING, REGRADE + REPAVE HANDICAP PARKING, ADD PARKING BLOCKS AND HANDICAP SIGNAGE.			

Applicant Information

I certify that the above-noted information is true and correct.

Name (print) JEFF DREW - J.S. DYER & ASSOC. Signature [Signature]
Firm Address 8891 RESEARCH DR. IRVINE, CA Position SENIOR DESIGNER

FOR DEPARTMENT USE ONLY

Approved by Bill Tewfik Title Plan Check Engineer Date 1/24/12
Denied by _____ Title _____ 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 : 12632 MONARCH ST
 Suite :
 PERMIT NO. : 96916
 Permit Type : BUILDING
 Type : B21
 MISCELLANEOUS
 Owner : EJM DEVELOPMENT CO
 Applicant : BRANDI RHODES
 Phone : 632-7330
 Contractor : CROWN LIFT TRUCKS
 Address : 4250 E GREYSTONE DR.
 CityStZip : ONTARIO, CA 91761
 Phone : 909-923-8357

Insp Dist : ZB
 Date : 01/16/09
 Parcel No : 21503107

Value : 22000
 Floor area : 0

PROPOSED WORK:

O39 - MISCELLEANEOUS
 INSTALL STORAGE RACKS

FEES

111 32509 PLAN CHECK 65% (\$42.0	1	260.36
111 32410 Permit	1	364.14
111 32401 issuance	1	35.00
942 22130 General Plan	1	27.14
080 32550 Cultural Arts	1	13.37
111 32419 STATE BUILDING STAND	1	1.00
111 32509 PLAN CHECK FEE CREDI	1	-260.36
TOTAL		440.65

APPROVAL DATE INSPECTOR

Pre Inspect _____
 Foundation _____
 Concrete Floor _____
 Reinforcing _____
 Masonry _____
 Roof Shtg _____
 Rough Frame _____
 Insul / Energy _____
 Drywall _____
 Lath _____
 Plas. Brown Ct. _____
 Landscaping _____
 Pre Gunitite _____
 Pre Deck _____
 Pre Plaster _____

Planning Final _____

Bldg Final 1/28/09 BRM

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 _____

Print Name Carnie Sharifi Date 1/16/09

***** VALIDATION *****
 PAID ON 16 Jan 2009 AT 11:28
 RECEIVED BY LARAINEM 198.245.206.215 TRANS# 14533
 AMOUNT PAID \$440.65 BY CHECK
 TOTAL PAID = \$440.65
