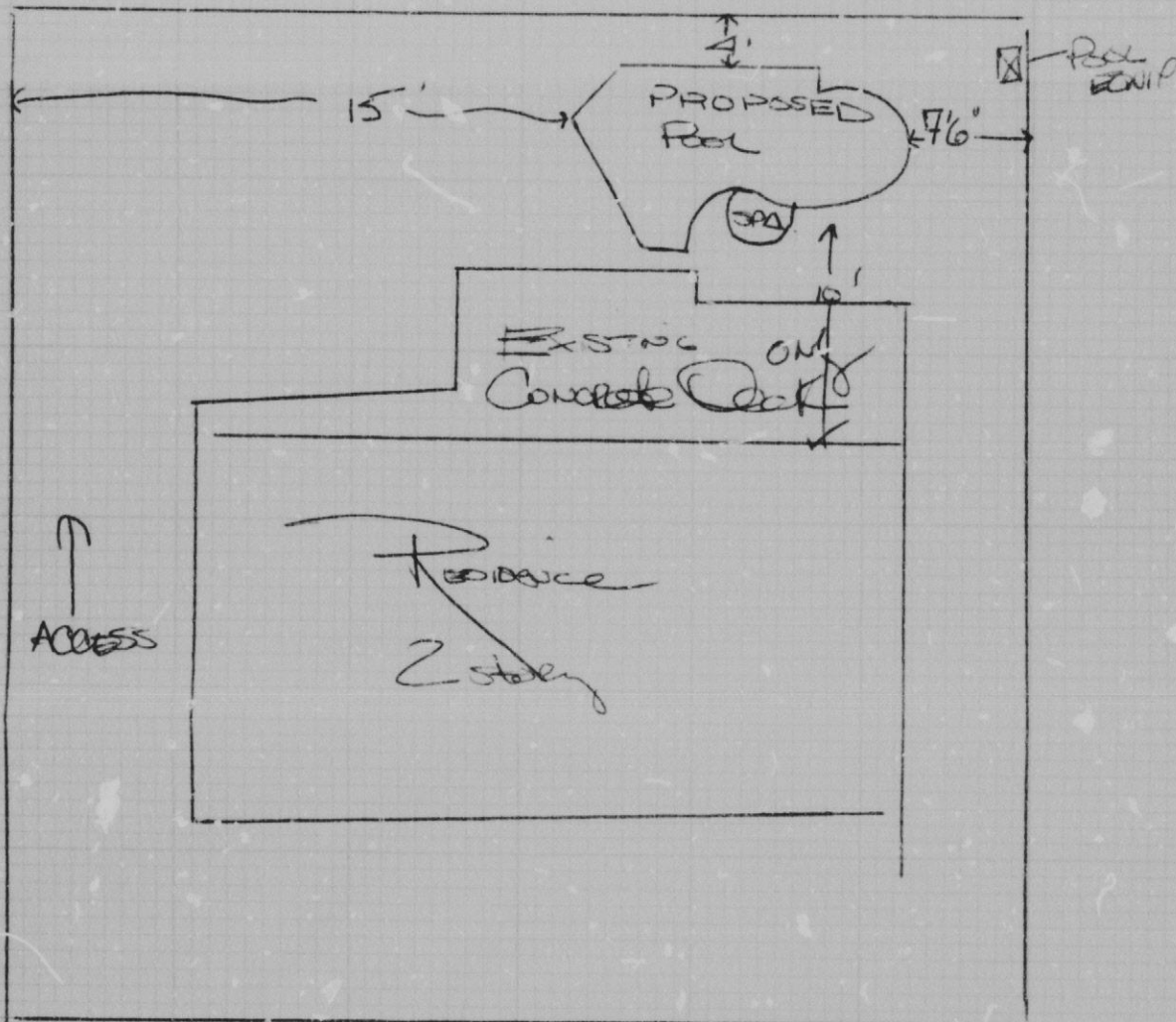


OWNER J.P. MAVALO	JOB ADDRESS 12621 ACRES STANLEY	PERMIT NO. 121487A
NAME OF CONSTRUCTION LENDER & BRANCH UNKNOWN	ASSESSORS PARCEL NO. 34	LOT 8
	BLOCK 8455	TRACT
PLEASE CHECK ONE OR MORE		
<input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish		
ADDRESS	DATE 11-8-82	PERMIT VALUE 6600.00
CITY	JOB DESCRIPTION Pool SPA + EQUIP	

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

*[Signature]*

PLOT PLAN APPROVED BY

**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)			
			Lath Tub			
Ground Plumbing			Shower			
			Lavatory (Wash Basin)			
Rough Plumbing			Kitchen Sink			
			Garbage Disposal			
Gas Piping	12-29-82		Laundry Tub or Tray	1		450
			Water Heater			
Gas Vent			Floor Sink			
			Floor Drain			
Sewer			Dish Washer			
			Dumping Fountain			
Main Drain and Vacuum Lines	12/10/82	ASB	Urinal	1		450
			Gas System - Outlets	1		450
Water Heater			Building Sewer (First 100 ft.)			
			Building Sewer (Add'l 100 ft.)			
Backwash			Building Sewer (ea. add'l drain)			
			Rainwater Drain			
Water Lateral			Swimming Pool Piping	1		450
			Sand Traps/Receptors			
			Automatic Washing Machine			
			Water Softeners			
			Backwash - Trap	1		450
			Water Lateral			
			Backflow Protective Devices	1		450
			Water Piping (ea. 100 ft.)			
			Lawn Sprinklers (S.F.D. Only)			
			Lawn Sprinklers (other)			
FINAL	10/19/82					
UTILITY CO. NOTIFIED			ITEM	CODE		FEEs
			Plan Retention Fee			
			Plan Check			
			Permit	3228		2250
			Issuance	3517		10
			<b>TOTAL FEES</b>			<b>3250</b>
			LAND USE	AUTHORIZED BY	BUILDING	DATE
				JR		1/8/82

ADDRESS: 12621 AGNES STANLEY

LOT NO. 34, BLK NO. 8455, TRACT NO. 127488A, PERMIT NO. 127488A

OWNER: P. MANAW, PHONE: 638-1169

OWNER'S ADDRESS: 12621 AGNES MANLEY, CITY: 66

NEW BUILDING OR ADDITION AREA: 400 SQ. FT., EXISTING BUILDING REMODEL AREA: SQ. FT., OCCUPANCY GROUP: #0042, USE OF BUILDING AND OR NUMBER OF UNITS: 22.50

VALIDATION: 1/08/82, PLBPER, ISSUANCE, CHECK, STATE LIC. NO. & TYPE: 192231

PLUMBING CONTRACTOR: P. MANAW, ADDRESS: 12222 HARVEY, CITY: 66, PHONE: 780-1081

**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 related to this permit.

PERMIT APPLICANT SIGNATURE: \_\_\_\_\_ DATE: 11/8/82

**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 7631.5 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 \_\_\_\_\_

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

I. INSPECTOR

INSPECTION RECORD

FEE'S

For Applicant to Fill in

SINGLE PHASE SERVICE SIZE <input type="checkbox"/> UG <input 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 type="checkbox"/> 3 Wire <input type="checkbox"/> 4 Wire <input type="checkbox"/> UG <input type="checkbox"/> OH			Garage, Resid. (M) sq. ft.					
AMPS	VOLTS	RIG. CONDUIT	Service Meter, Single Phase					
APPROVAL	DATE	INSPECTOR	Service Meter, Three Phase					
Underground	12-29-87	EL	Add'l Meter, Three Phase					
Conduit	12-29-87	EL	Temporary Power Pole					
Wiring - Rough			Pole, Power, Light, etc.					
Heater			Sub-Panels 1 φ					
Fixtures & Trim			Sub-Panels 3 φ					
Motors			Outlets	5			1.50	
			Fixtures	2			1.00	
			Fixtures, Merc. Quartz, etc.					
			Heater - Not Over 150 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	1			2.00	
			Over 1, Not Over 10 each	1			5.50	
			Over 10, Not Over 30 each					
			Indv. Circuits					
			Time Clock	2			2.00	
			Sign					
			Sign Hookup					
Ufer								
Service								
FINAL	10/14/88							
Utility Notified								
IDENTIFICATION CODE			ITEM	CODE	FEES			
			Plan Retention Fee					
			Plan Check					
			Permit	3227	13.00			
			Issuance	3517	10.00			
			TOTAL FEES		23.00			
BUILDING PERMIT NO. SIGN PERMIT NO. VENT. HEAT. AIR COND. PERMIT NO.			AUTHORIZED BY					
124487A			LAND USE			BUILDING		DATE
						JR		11-88
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.								
INSPECTOR								

ADDRESS  
12621 AGNES MANLEY

LOT NO. BLK NO. TRACT NO. ELECTRIC PERMIT NO.  
24 2955 127400A

OWNER  
J.P. MANALO PHONE 6387469

OWNER'S ADDRESS  
12621 AGNES MANLEY CITY 66

NEW BUILDING OR ADDITION - AREA 400 SQ. FT. EXISTING BUILDING REMOVAL AREA 11 08/82 OCCUPANCY GROUP EL 19-11 USE OF BUILDING AND OR NUMBER OF UNITS #0041

VALIDATION ISSUANCE CHECK 10.00 \*\*\*23.00

ELECTRICAL CONTRACTOR STATE LIC. NO. & TYPE  
Blair/Hay 415 19223 CITY PHONE 750766

WORKER'S COMPENSATION REQUIREMENTS  
Stror 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 or from any bodily damage resulting from work performed relevant to this permit.

PERMIT APPLICANT SIGNATURE DATE  
Blair/Hay 11/88

BUSINESS TAX CERTIFICATE INFORMATION  
I certify that the following Contractor's License No. is in full force and effect.  
Blair/Hay 11/88  
(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 7018  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.

**INSPECTION RECORD**

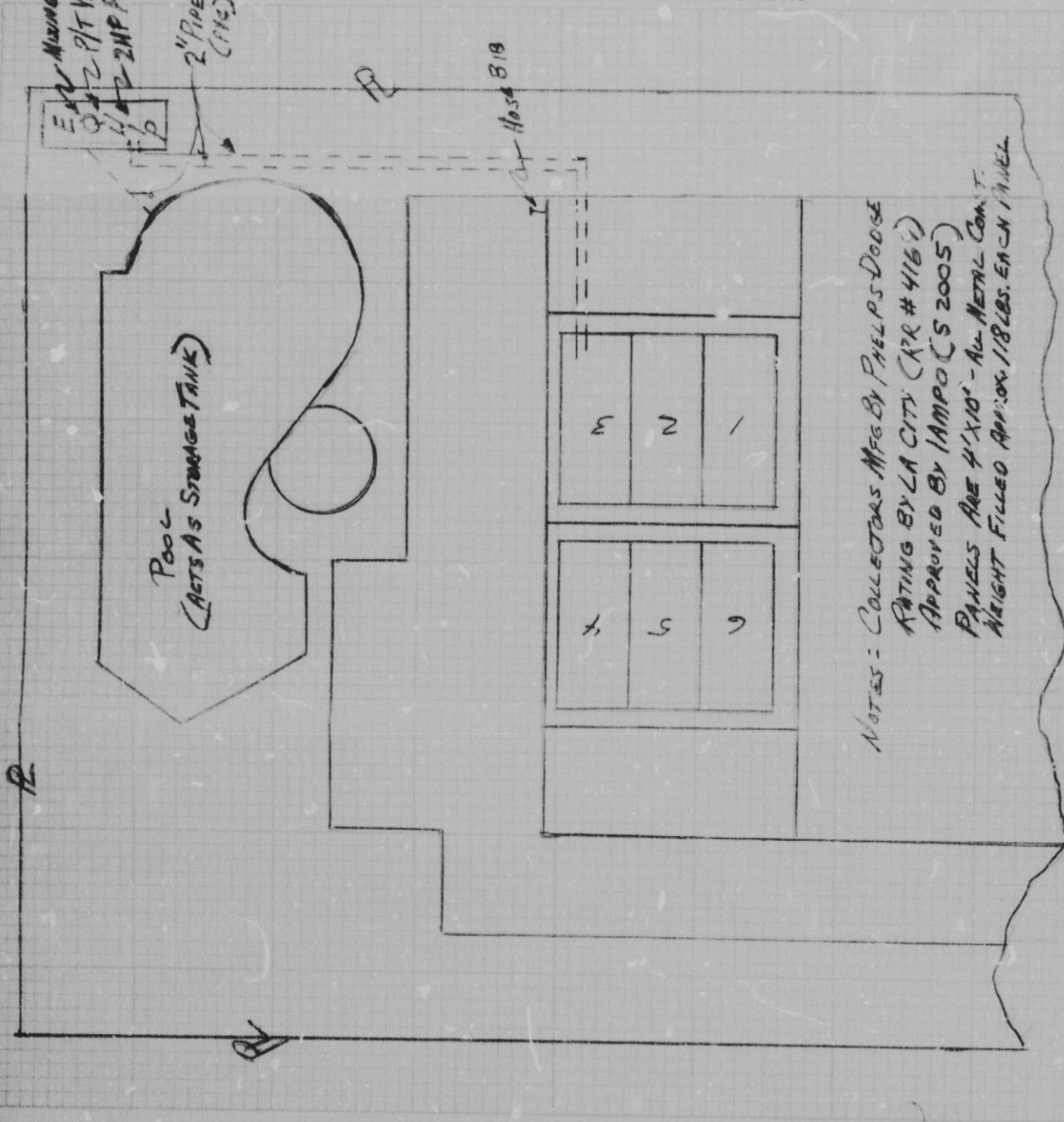
For Applicant to Fill in

P.C. #		OCCUPANCY <b>R-3</b> TYPE <b>VN</b>				OCC. LOAD		FIRE SPRINK.		APPROVAL		DATE		INSPECTOR		ADDRESS	
USE ZONE <b>R-1</b>		FRONT		LEFT		RIGHT		REAR		FOUNDATION & LOCATION						12621 AGNES STANLEY	
FIRE ZONE		Eav Proj.		Sec 101/112						CONCRETE FLOOR						34 - 8955 127670A	
PLANNING ACTION				IAPMO		PLANS S-205		DATE		REINFORCING						OWNER	
LAND USE APPROVED BY				11/16/82						ROUGH FRAME						MAILING ADDRESS	
REMARKS:										INSULATION, ENERGY						SAME GARDEN GROVE	
										LATH OR DRYWALL						MAILING ADDRESS	
										PLAS. BROWN CT.						CITY ZIP	
										SOUND INSULATION						TEL. NO. STATE LIC. NO. & TYPE	
										SMOKE DETECTOR						VALIDATION	
										PARKING						11/16/82 #0142	
										LANDSCAPING						PLANCK 28.93	
G.G. SANT. DIS. FEE REQ'D.		O.C. SANT. DIS. FEE REQ'D.		DATE		INITIAL				FINAL						EDGPER 45.00	
PARCEL MAP				REQ'D		PROVIDED				UTILITY RELEASE						ISSNCE 10.00	
R/W DEDICATION										IDENTIFICATION CODE						***83.93	
FEEES AND BONDS		REV. CODE		AMOUNT												CONTRACTOR	
ST. BOND																MAILING ADDRESS	
WATER BOND																CITY ZIP	
WATER ASSMT. FEE (ACRG.)																12222 HARBOR GARDEN GROVE 92648	
WATER ASSMT. FEE (FT.)																TEL. NO. STATE LIC. NO.	
PARKWAY TREE FEE																750-7665 192237	
PARK & REC. FEE (DIST.)																PRESENT BLDG. USE DWLG PROPOSED BLDG. USE SAME	
DRAIN ASSMT. FEE (DIST.)																DESCRIBE WORK TO BE DONE	
PLAN RETENTION FEE																INSTALL 6 PANEL SOLAR SYSTEM	
BLDG. PLAN CHECK		3507		28.93												NEW <input type="checkbox"/> ADD'N <input type="checkbox"/> ALTER <input type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>	
BLDG. PERMIT FEE		3026		45.00												FLOOR AREA NO. OF NO. OF DWELLING	
ISSUANCE		3517		10.00												(SQ. FT.) UNK. STORIES TWO UNITS ONE	
VALUATION		4000		83.93												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	
AUTHORIZED BY				DATE		11/16/82										A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.	
I. INSPECTOR																RELOCATION	
																PRESENT BLDG. ADDRESS	
																MOVING CONTRACTOR	
																ADDRESS	

**WORKER'S COMPENSATION REQUIREMENTS**  
 State Compensation Insurance Policy No. **WP 216954** Expiration Date **1-26-83**  
 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 1700 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: **11/15/82**  
**BUSINESS TAX CERTIFICATE INFORMATION**  
 I certify that the following Contractor License No. **1926** and Classification **35** is in full force and effect.  
 (PRINT) CONTRACTOR: **[Signature]** (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT: **[Signature]** DATE: **11/15/82**  
**BUSINESS TAX CERTIFICATE NO.** **1926** EXPIRATION DATE: **11/15/82**  
 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: \_\_\_\_\_

OWNER M/M J. P. MANALO	JOB ADDRESS 12621 AUNES STANLEY GARDEN GROVE CAL	PERMIT NO. 127570A
NAME OF CONSTRUCTION LENDER & BRANCH	ASSESSORS PARCEL NO. 34	LOT BLOCK TRACT 8955
PLEASE CHECK ONE OR MORE <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish		
ADDRESS	CITY	DATE 11-15-82
JOB DESCRIPTION INSTALL 2 SOLAR PANELS ON ROOF		PERMIT VALUE 4000 <sup>00</sup>

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



NOTES: COLLECTORS MFG BY PHELPS DODGE  
 RATING BY LA CITY (APR # 4161)  
 APPROVED BY IAMPO (S 2005)  
 PANELS ARE 4'X10' - ALU METAL CON'T.  
 HEIGHT FILLED APPROX 118 LBS. EACH PANEL

PLOT PLAN APPROVED BY \_\_\_\_\_

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

By \_\_\_\_\_