

STEELE DR

11681

1

STREET

NAME

ADDRESS

APT. NO.

CARD NO.

ZONING APPROVAL FOR BUSINESS LICENSE

Business Address: 11681 Steele Br.
Type of Business: route salesman
Company Name: Fuller Brush Co. - John Nelson

Your application for a business license to operate in the City of Garden Grove, at the above address, will be approved, subject to Section 9204(0) of the Municipal Code, quoted as follows:

"Maintaining mail address for commercial and business license purposes only, provided there is no display, no storage of materials, or supplies, no stock in trade or commodity sold upon the premises, no service rendered, no professional equipment, apparatus or business equipment or trucks kept or stored on the premises, no person, employee or assistant in connection therewith is engaged for services on the premises or dispatched from the premises, and no mechanical equipment is used except such mechanical equipment as is customarily used for housekeeping purposes."

Any person violating said section may be prosecuted as per Section 1200, 1201 and 1202 of the Municipal Code and shall be due cause for revoking said license.

The undersigned does hereby acknowledge and signify his understanding of the above conditions.

December 12, 1962
Date

Signed:

John L. Nelson
Owner

City of Garden Grove

Building Department

ZONING APPROVAL FOR BUSINESS LICENSE

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Company Name: Fuller Brush Co. - John Nelson

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The undersigned does hereby acknowledge and signify his understanding of the above conditions.

December 12, 1962
Date

Signed:

John L. Nelson
Owner

BUILDING PERMIT

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

FIRE ZONE OCCUPANCY TYPE OCC. LOAD

REMARKS: *no plans PLANNING*

USE ZONE	SETRACKS	FRONT	LEFT	RIGHT	REAR
	EAVE PROJ.				

PLANNING ACTION PARK. SPACES REQUIRED

Zoning Approved By _____ Date _____

Remarks: *Re-roof*

PUBLIC WORKS *ok*

Amount	Req'd	Provided

Parcel Map

R/W Dedication

Bonds

Street Bond

Water Bond

Water Assmt. Fee

Fire Hydrant F.F. Fee

Parkway Tree Fee

Landscape Bond

Remarks: *Re-roof*

Remarks: _____

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and Location		
Reinforcing		
Roof Shig.		
Rough Frame		
Lath or Drywall		
Plas. Brown Ct.		
Other		
Final	<i>7-15-71</i>	<i>[Signature]</i>
Utility Release		

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

FEES

Plan Check \$ _____ Building Permits \$ *5.00*

Bond \$ _____ Expiration Date _____

Permit Authorized By *[Signature]* Date *7-15-71*

I Bldg. Inspector

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

Job Address *11681 STEELE DR* Permit No. _____

Lot No. _____ Tract No. _____

Owner *JOHN L NELSON* Tel. No. *8364815*

Mailing Address *11681 STEELE DR* City *GARDEN GROVE* Zip No. *92640*

Arch. State Lic. No. _____
 Eng. Tel. No. _____

Mailing Address _____ City _____ Zip No. _____

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

Mailing Address _____ City _____ Zip No. _____

PRESENT BLDG. USE *res* PROPOSED BLDG. USE *res*

Validation FEB 15 11 054 AM ***\$5.00

DESCRIBE WORK TO BE DONE *RE ROOF*

NEW ADD'N ALTER REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) *20* NO. OF STORIES *1* NO. OF DWELLING UNITS *1*

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 employ any person in violation of the Labor Code of California relating to Workman's Compensation, Insurance. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed relevant to this permit.

CONTRACTORS SIGN BELOW

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

By _____ Date _____
 Contractor Authorized Agent

OWNER-BUILDER SIGN BELOW

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

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

John L Nelson By _____ Date *2-15-71*
 Owner's Signature Authorized Agent

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 _____

INVESTIGATION REPORT

Development Services Dept.
11391 Acacia Parkway
Garden Grove, California 92640

CITY OF
GARDEN GROVE
537-4200

INSTRUCTIONS

BRING THIS REPORT TO ROOM 202, CITY HALL

No Person on Form

SHALL ALTER CONSTANT
ELECT OR IMPROVE ANY
BUILDING WITHOUT FIRST
OBTAINING A PERMIT

HOME OWNER

3 TAB 235/6 WEIGHT

Comply on or before: 15 FEB 91 5 PM

PERMITS REQUIRED

Building X Electric _____ Plumbing _____ Heating _____

SECTION 1201 GARDEN GROVE MUNICIPAL CODE

Any person convicted of a misdemeanor under the provisions of this Code, shall be punishable by a fine of not more than five Hundred Dollars (\$500.), or by imprisonment in the City or County Jail for a period not exceeding six months, or by both such fine and imprisonment; each such person shall be guilty of a separate offense for each and every day during any portion of which any violation of any provision of this Code is committed, continued, or permitted by such person and shall be punishable accordingly.

In addition to the penalties hereinabove provided, any condition caused or permitted to exist in violation of any of the provisions of this Code shall be deemed a public nuisance and may be, by this City, summarily abated as such, and each day such condition continues shall be regarded as a new and separate offense.

I certify that one copy was: Mailed _____

Left at the job address _____

Inspector's
Signature

Frank Hutto

Date 13 FEB

JOB ADDRESS 11681 STEELE
Owner: MR John Nelson
Owner's Address

636 4415

Violations and Description:

Building

Land Use

Unlawful Building Code

SEC 301

Failure to obtain permit
for re-roofing

TIME 1235 13 FEB 91

PLOT PLAN OR DESCRIPTION Re-roof

Routing: 1. Plan Checker 2. Office 3. Owner

BUILDING PERMIT

DEVELOPMENT SERVICES DEPT., GARDEN GROVE 537-4200

INSTRUCTION: FILL IN AREA WITHIN HEAVY LINES
 USE TYPEWRITER OR BALL POINT PEN. PRES. FIRMLY. BE LEGIBLE. NO ERASURES PERMITTED. A DOUBLE FEE IS STARTED BEFORE PERMIT IS ISSUED.

ALL COPIES ARE CHARGED IF WORK

OCCUPANCY **I** TYPE **II** OCC. LOAD
 USE ONE **R-1**
 FRONT LEFT RIGHT REAR
 EAVE PROJ.
 SQTBACKS **13 15 12**
 PLANNING ACTION **Plans**
 Land Use Approved By **[Signature]** Date **6-22-71**

Job Address **11681 Starke Dr.** Permit # **04-283**
 Lot No. **35** Tract No. **17-11**
 Owner **JOHN NELSON** Tel. No. **636-7415**
 Mailing Address **9043** City Zip No.
 Arch. State Lic. No.
 Engr. Tel. No.
 Mailing Address City Zip No.

FEES AND BONDS

	AMOUNT	REQ'D	PROVIDED
PARCEL MAP			
1/2 W DEDICATION			
STREET BOND			
WATER BOND			
WATER ASSMT. FEE			
FIRE HYDRANT FEE			
PARKWAY TRFEE			
PARK & REC. FEE (DIST.)			
DRAIN ASSMT. FEE (DIST. D)	116.90	Yes	

Contract by **Hallmark Builders** Lic. No. **8185**
 Mailing Address **303 S. Bristol, Santa Ana** City Zip No. **92705**
 PRESENT BLDG. USE PROPOSED BLDG. USE

Remarks: **1475 sq Existing**
28.6% Increase

Rec. **6-22-71 Family Room Addition**
 Validation **6-22-71 11 014 M***3500**

DESCRIBE WORK TO BE DONE **Build Family Room & Water**
 NEW ADD'N ALTER. REPAIR DEMOLISH

FLOOR AREA **270 sq** NC. OF STORIES **1** NO. OF DWELLING UNITS **1**
 (SQ. FT.) **330 sq**

I certify that I have read this application and state that the above information is correct. I agree to comply to all City Ord. ances 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.

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Foundation and location	6-23-71	[Signature]
Reinforcing		
Roof Shgt.	7-8-71	[Signature]
Rough Frame	7-15-71	[Signature]
Lath or Drywall	7-30-71	[Signature]
Plas. Brown Ct.	8-26-71	[Signature]
Other		
Final	7-23-71	[Signature]
Utility Release		

CONTRACTORS SIGN BELOW

I certify that I am a licensed contractor and that my license is in full force and effect.
Hallmark Builders 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 D, P.C. 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. **6440.00**

By _____ 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.

FEES
 Plan Building Check **\$ 12.50** Permit **\$ 35.00**
 Permit Authorized By **[Signature]** Date **6-22-71**
 1 Original

RELOCATION

PRESENT BLDG. ADDRESS
 MOVING CONTRACTOR ADDRESS

INSPECTOR'S NOTES

Date

9-30-71

Ceiling Ceiling Altered
Install W&E Sensors

040593 V

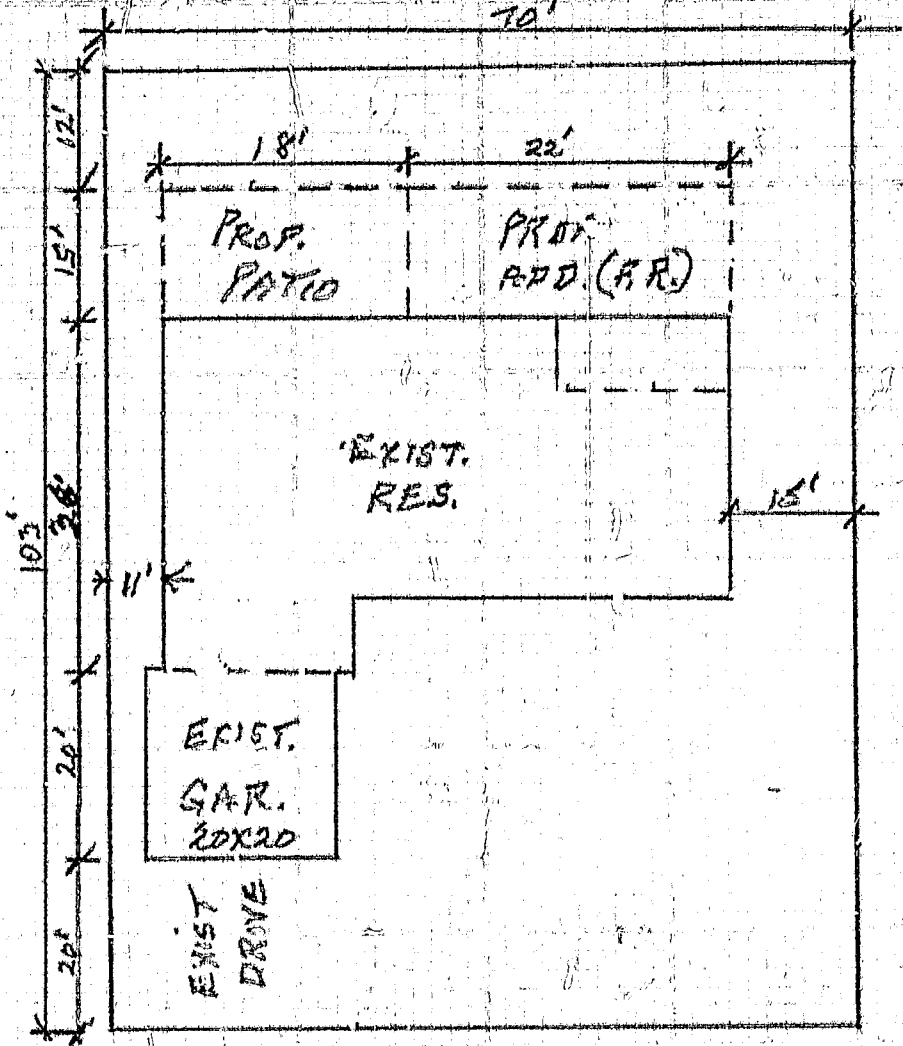
BARDING B. MILL

BUILDING PERMIT PLOT PLAN

Department of Building
CITY OF GARDEN GROVE

ASSESSOR'S PARCEL NO.		DATE	PERMIT NO.
JOB ADDRESS AND CITY			
LEGAL DESCRIPTION		LOT	BLOCK
NAME OF CONSTRUCTION LENDR & BRANCH		TRACT	
ADDRESS		JOB DESCRIPTION (PLEASE CHECK)	
CITY		<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	
PLANNING DEPT. APPROVAL	DATE	OWNER	PERMIT VALUE
<i>[Signature]</i>	6-22-71	J. Nelson	Room # 1 patio \$6440.00

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



I HAVE RECEIVED A COPY OF THE
 BUSINESS OPERATIONS TAX FORM
 FROM THE PERMITTEE
 DATE 6-22-71
 SIGNATURE: *[Signature]*

11681 STEELE DR. NO SCALE

#1 Building Insp./#2 Assessor/#3 File/#4 Permittee

I certify the information herein is complete and correct.

By *[Signature]* Date

HEATING, VENTILATING, REFRIGERATION & AIR CONDITIONING PERMIT

DEPARTMENT OF BUILDING
HARRY R. PEIRCE - DIRECTOR
537.4200

CITY OF
GARDEN GROVE

FOR APPLICANT TO FILL IN (USE INK)

PERMIT NO.

JOB ADDRESS

11681 Steele Dr. 046633 A

PERMIT FEES

NUMBER	TYPE OF FIXTURE OR ITEM	EACH	FEE
	FURNACE UP TO 100,000 BTU'S	\$4.00	
	FURNACE OVER 100,000 BTU'S	5.00	
1	FLOOR FURNACE, (WALL) OR SUSPENDED HEATER	4.00	4.00
	VENT NOT INCL. IN APPLIANCE	2.00	
	REPAIR, ALTERATION OR ADDITIONS TO HEATING SYSTEM, REFRIG., ETC.	4.00	
1	GAS SYSTEM	1.50	1.50
	AIR HANDLING UNIT <small>OVER 10,000 CU. FT. PER MIN.</small>	5.00	
	EVAPORATIVE COOLER	3.00	
	SINGLE DUCT FAN VENT	2.00	
	MULTIPLE DUCT FAN VENT	3.00	
	KITCHEN HOOD (RESIDENTIAL)	3.00	
	KITCHEN HOOD (COMMERCIAL)	10.00	
	BOILER OR COMPRESSOR <small>3 H.P. OR LESS</small>	4.00	
	BOILER OR COMPRESSOR <small>4 H.P. TO & INCL. 15 H.P.</small>	7.50	
	BOILER OR COMPRESSOR <small>16 H.P. TO & INCL. 30 H.P.</small>	10.00	
	BOILER OR COMPRESSOR <small>31 H.P. TO & INCL. 50 H.P.</small>	15.00	
	BOILER OR COMPRESSOR OVER 50 H.P.	25.00	

LOT NO.

3.5

TRACT NO.

1751

OWNER

JOHN NELSON

OWNER'S ADDRESS

SAME

CONTRACTOR

HALLMARK BLDGS

CONTRACTOR'S ADDRESS

903 N. BRISTOL CITY S.A.

PHONE

835-1855

CITY LIC. NO.

USE CT BUILDING

RES.

NEW BUILDING

OLD BUILDING

VALIDATION

JUL -7-71 11 151 M *****7.50

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

Hallmark Bldgs
by R. Likens

DATE

2/7/71

ADDRESS

APPROVALS

DATE

INSPECTOR

FURNACE

FURNACE VENTS

11-8-71

GAS PIPING *& test*

11-8-71

DUCTS

SINGLE DUCT FAN VENT

KITCHEN HOOD

AIR HANDLING UNIT

EVAPORATIVE COOLER

BOILER OR COMPRESSOR

ISSUANCE OF PERMIT

2 00

TOTAL FEE

\$ 7.50

PERMIT AUTHORIZED BY

DATE 7-2-71

ROUTING:

#1 INSPECTOR #2 STATISTICS
#3 PERMITTEE #4 FILE

BUILDING PERMIT NO.

462931

FINAL

UTILITY CO. NOTIFIED

7-23-71

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

11681 Steele Way

ELECTRIC PERMIT NO.

940734A

IF NOT LISTED BELOW SEE CODE	TRACT NO.		FEE
	NUMBER	EACH	
Residential (I & H) sq. ft.		.01	330
Garage, Resid. (J) sq. ft.		.005	
Service, Single Phase	1	\$1.00	1.00
Service, Three Phase		1.00	
Meters, Single Phase	1	1.00	1.00
Meters, Three Phase		1.00	
Pole, Power, Light, etc.		2.00	
Sub-Panels 1 φ		1.00	
Sub-Panels 3 φ		1.00	
Outlets 1st 20		.20	
Outlets Over 20		.10	
Fixtures 1st 20		.20	
Fixtures Over 20		.10	
Fixtures, MERC., QUARTZ, ETC.		1.00	
Heater		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	
Time Clock		1.00	
Sign, 1 Tran. or 1 Ballast		2.00	
Each Additional Tran. or Ballast		1.00	
Sign Hookup		1.00	

OWNER

J. NELSON

PHONE

636-9415

OWNER'S ADDRESS

11681 Steele Way

CITY

Garden Grove

NEW BUILDING OR ADDITION - AREA

330 SQ. FT.

EXISTING BUILDING REMODEL AREA

OCCUPANCY GROUP

USE OF BUILDING OR NUMBER OF UNITS

ELECTRICAL CONTRACTOR

B. D. B. FINE

PHONE

ADDRESS

12115 Muriel Dr. Diamond

CITY

STATE LICENSE NO.

261459

VALIDATION

III 12-71 11 076 N****730

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 WHERE SPECIFIED HEREIN OR NOT NO PERSON SHALL BE EMPLOYED IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA.

SIGNATURE OF PERMITTEE

[Signature]

DATE

7/12/71

BRANCH CIRCUIT PANEL; CIRCUITRY

CIR. NO.	BRKR. SIZE	WIRE SIZE	NOME. CLATURE	NO. OF OUTLET	WATTS L1	WATTS L2	WATTS L3
1							
2							
3							
4							
5							
6							

INSPECTION RECORD

APPROVAL	DATE	INSPECTOR
Underground		
Conduit		
Wiring	7-13-71	<i>[Signature]</i>
Heater		
Fixtures		
Service	Relocate	
FINAL	9-23-71	<i>[Signature]</i>
Utility Notified	7-13-71	<i>[Signature]</i>

SINGLE PHASE SERVICE SIZE 15 AMP 20 AMP

100 AMP. WIRE RIG. CONDUIT

THREE PHASE SERVICE SIZE 3 WIRE 4 WIRE 5 WIRE 6 WIRE 8 WIRE 10 WIRE

AMP. WIRE RIG. CONDUIT

ISSUANCE OF PERMIT

2.00

TOTAL FEE

7.30

PERMIT AUTHORIZED BY

[Signature]

DATE

7/12/71

BUILDING PERMIT NO.

46287A

SIGN PERMIT NO.

VENT. HEAT, AIR COND. PERMIT NO.

EL-101-71

BUILDING PERMIT

DEVELOPMENT SERVICES DEPT., GARDEN GROVE 638-6711

FIRE ZONE	OCCUPANCY	I	TYPE	II	OCC. LOAD	FIRE SPRINK.			
USE ZONE	R-1		FRONT		LEFT		RIGHT		REAR
PARK SPACES REQUIRED	EAVE PROJ.								
	SETBACKS	No CHANGE							

PLANNING ACTION

LAND USE APPROVED BY E.L.M. DATE 7-1-74

FEES AND BONDS

	AMOUNT	REQ.	PROVIDED
PARCEL MAP			
R/W DEDICATION			
STREET BOND			
WATER BOND			
WATER ASSMT. FEE			
FIRE HYDRANT FEE			
PARKWAY TREE FEE			
PARK & REC. FEE (DIST.)			
DRAIN ASSMT. FEE (DIST.)			
		NOT	
			REQ'D.

REMARKS: PLANS

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

INSPECTION RECORD

APPROVA	DATE	INSPECTOR
FOUNDATION & LOCATION		
REINFORCING		
ROOF SHGTG.		
ROUGH FRAME		
INSULATION, ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL	<u>7/30/74</u>	<u>[Signature]</u>
UTILITY RELEASE		

VALUATION NOTE: INCLUDE LABOR, MAT WIRING, PLUMB., HEAT., ETC. \$ 2.55⁰⁰

FEES

PLAN CHECK \$ 2.50 BUILDING PERMIT \$ 5.00

PERMIT AUTHORIZED BY E.L.M. DATE 7-1-74
1 ORIGINAL

INSTRUCTION: FILL IN AREA WITHIN HEAVY LINES USE TYPEWRITER OR BALL POINT PEN PRESS FIRMLY. ERASE ALL LETTERS NOT LEGIBLE. NO ERASURES PERMITTED. A DOUBLE FEE WILL BE CHARGED IF WORK IS STARTED BEFORE PERMIT IS ISSUED.

ADDRESS 11681 Steele Dr PERMIT NO. 071709A
LOT NO. 35 TRACT NO. 1751

OWNER John Nelson TEL. NO. 638-4415
MAILING ADDRESS Above Garden Grove CITY GP

ARCH ENGR. STATE ID. NO. TEL. NO.
MAILING ADDRESS CITY

CONTRACTOR L & J Costa LIC. NO. 995382 TEL. NO. 999-5636
MAILING ADDRESS 3915 Alanda Orange, CA CITY Orange

VALIDATION JUL-1-74 11 232 99999250

PRESENT BLDG. USE PATIO JUL 1 74 11 232 99999250
PROPOSED BLDG. USE Screen porch

DESCRIBE WORK TO BE DONE Patio to Screen porch Conn.

NEW ADD'N. ALTER. REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) 255 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.
William C. Ledy By [Signature]
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 act or Code of California.

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

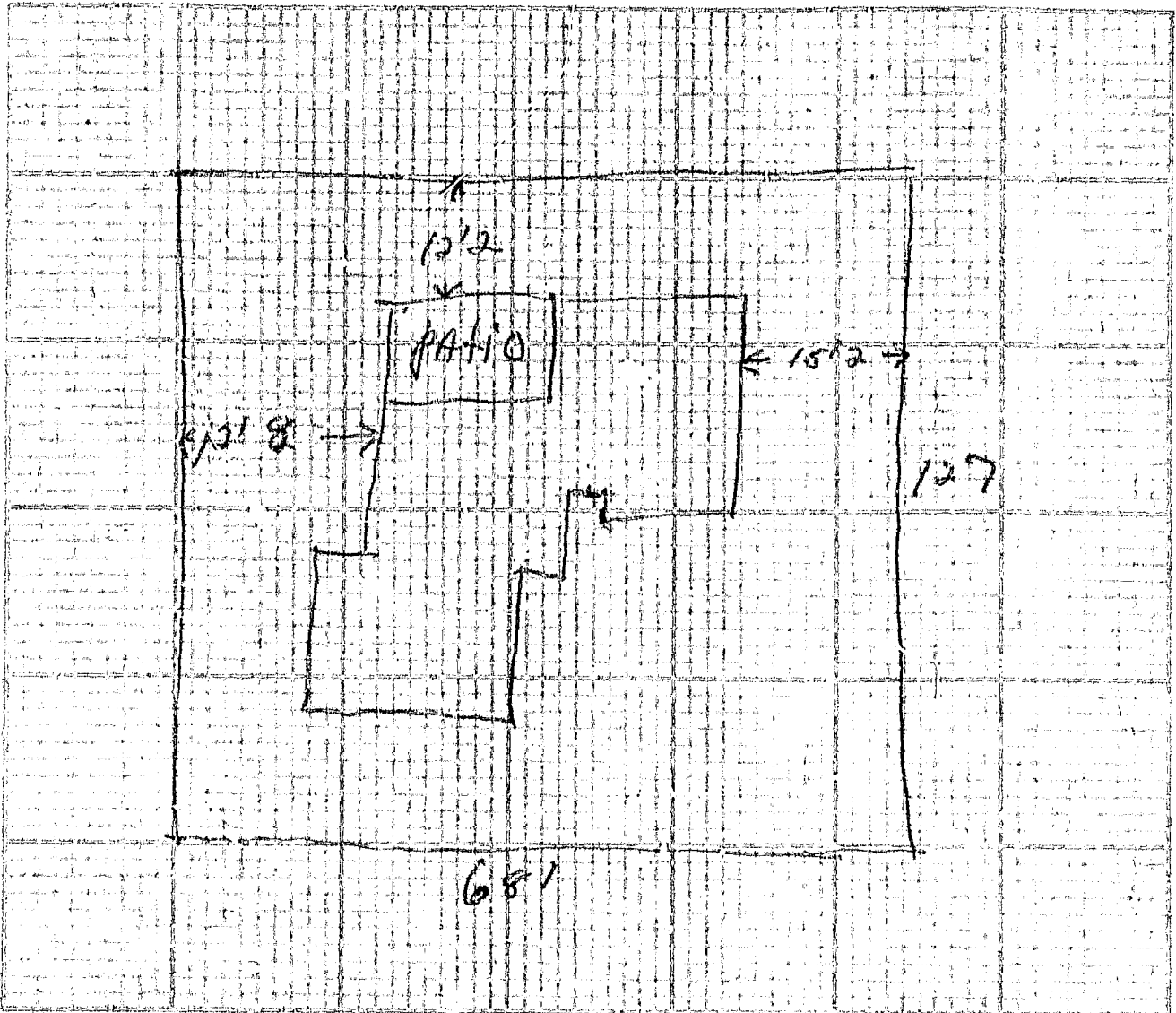
A \$10.00 FEE MAY BE CHARGED FOR REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.

RELOCATION
PRESENT BLDG. ADDRESS
MOVING CONTRACTOR ADDRESS

BUILDING PERMIT PLOT PLAN
Development Services Department
CITY OF GARDEN GROVE

JOB ADDRESS <i>11681 Steele Dr</i>			PERMIT NO. <i>71709</i>
ASSESSORS PARCEL NO.	LOT <i>35</i>	BLOCK	TRACT <i>1751</i>
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 <i>John Nelson</i>		DATE <i>7/1/74</i>	PERMIT VALUE <i>\$2.55</i>

DIMENSION PLOT PLAN COMPLETELY SHOWING ALL STRUCTURES ON THE LOT (THEIR USE)



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

PLUMBING PERMIT
 DEVELOPMENT SERVICES DEPT.
 GARDEN GROVE, CAL. 638-6771

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	
	Floor Sink	1.50	
	Floor Drain	1.50	
	Dish Washer	1.50	
	Drinking Fountain	1.50	
	Urinal	1.50	
	Gas System - Outlets	1.50	
	Building Sewer (First 100 ft.)	5.00	
	Building Sewer (Add'l 100 ft.)	2.00	
	Building Sewer (ea. add'l drain)	2.00	
	Rainwater Drain	2.00	
	Swimming Pool Piping	1.50	
	Sand Traps/Receptors	1.50	
	Automatic Washing Machine	1.50	
	Water Softeners	1.50	
	Backwash - Trap	1.50	
1	Water Lateral	1.50	1.50
	Backflow Protective Devices	2.00	
	Water Piping (ea. 100 ft.)	2.00	
	Lawn Sprinklers (Single Dwellings Only)	2.00	
	Lawn Sprinklers (other)	5.00	

ISSUANCE OF PERMIT 3 00

FEES

Plan Check \$
 Plumbing Permit \$ 4.50
 Permit Authorized By *[Signature]* Date 3-14-74

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

For Applicant to Fill In (Please Print)

Address **11681 STEELE DR** Permit No. **068841 A**
 Lot No. **11681**

Owner **JOHN L & MARGARET NELSON**
 Owner's Address **11681 STEELE DR GARDEN GROVE**

Plumbing Contractor **OWNER**
 Contractor's Address _____ City _____

Phone _____ State License No. _____

Occupancy **Residential**

New Bldg. EXIST. BLDG. **11681 STEELE DR**

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 Permitter *John L Nelson* Date **3-14-74**

INSPECTION RECORD

APPROVALS	DATE	INSPECTOR
Soil Piping		
Ground Plumbing		
Rough Plumbing		
Gas Piping		
Gas Vent		
Sewer		
Main Drain and Vacuum Lines		
Water Main		
Backwash		
Water Lateral		
FINAL		
UTILITY CO. NOTIFIED		

I. INSPECTOR

Edg. Permit #

STEELE	C11681		0002
<i>Steele</i> STREET NAME	ADDRESS	APT. NO.	CARD NO.

INSPECTION RECORD

For Applicant to Fill In

07 of 07

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		

APPROVED 5-2005

11/25/81

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

IDENTIFICATION CODE

WORKER'S COMPENSATION REQUIREMENTS
State Compensation Insurance Policy No. 91266A Expiration Date 3-31-81
 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 7100 or his permit shall be deemed revoked.
 I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed pursuant to this permit.

PERMIT APPLICANT SIGNATURE: [Signature] DATE: 11-25-81

BUSINESS TAX CERTIFICATE INFORMATION
I certify that the following Contractor's License No. 32802B and Classification: C-44 is in full force and effect.
(PRINT) CONTRACTOR: Full Spectrum 02802B (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT: [Signature] DATE: 11-25-81

BUSINESS TAX CERTIFICATE NO. 02802B 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: [Signature] DATE: []

ADDRESS: 1681 STEELE

LOT NO. 35 - 1721 TRACT NO. 123274

OWNER: JOHN NELSON 638-3424

MAILING ADDRESS: 1681 STEELE DR GARDEN GROVE CITY ZIP

ARCH ENGR.

MAILING ADDRESS CITY ZIP

TEL. NO. STATE LIC. NO. & TYPE

VALIDATION: 11-25-81

CONTRACTOR: FULL SPECTRUM ENERGY 3061 LA JOLLA SUITE 4 AMSTERHAM 92004 TEL. NO. 630-6184 STATE LIC. NO. 32802B

PRESENT BLDG. USE: [] PROPOSED BLDG. USE: STD

DESCRIBE WORK TO BE DONE: SOLAR HOT WATER

NEW ADD'N ALTER. REPAIR DEMOLISH

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

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

INSPECTOR: [Signature] DATE: 11/25/81

INSPECTOR: [Signature] DATE: 11/25/81

INSPECTOR: [Signature] DATE: 11/25/81

DATE

INSPECTOR'S NOTES

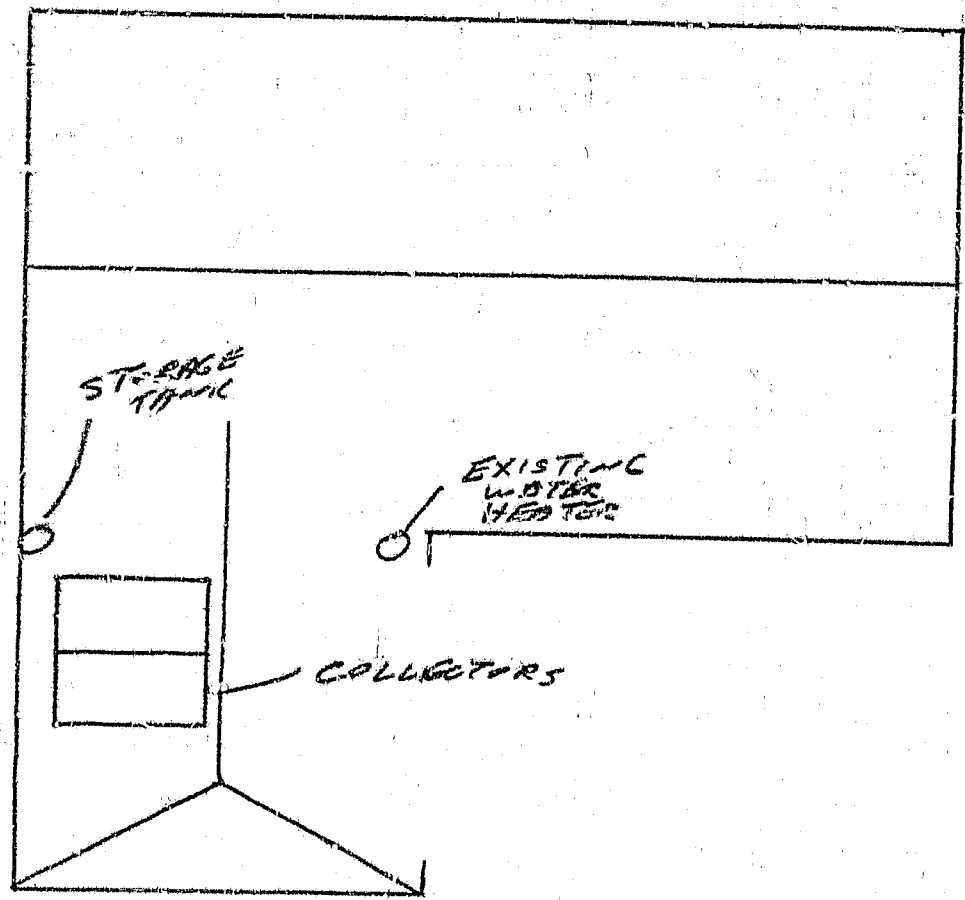
1/29/50 10:30 AM PATRONS
CABINETS WIPED

AS 5251

PROPERTY OF THE INSPECTOR

OWNER <i>John Nelson</i>		JOB ADDRESS <i>11681 STEELE</i>		PERMIT NO. <i>12372A</i>
NAME OF CONSTRUCTION LENDER & BRANCH <i>16691 STEELE DR</i>		ASSESSORS PARCEL NO.	LOT <i>35</i>	BLOCK <i>-</i>
ADDRESS <i>GARDEN GROVE</i>		CITY		TRACT <i>1751</i>
DATE <i>11-25-91</i>		JOB DESCRIPTION <i>SOLAR HOT WATER</i>		PERMIT VALUE <i>3600</i>

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



PLOT PLAN APPROVED BY _____

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

By *John Nelson*

1100

81

06/13/86

CITY OF GARDEN GROVE
*** BUSINESS OPERATION TAX RENEWAL NOTICE ***

OFFICE USE ONLY	
ID	122646
DC	1331
NN	
EX	06/30/86
ZONING CLEARANCE	YES NO
BUILDING CLEARANCE	YES NO

YOUR BUSINESS OPERATION TAX CERTIFICATE MUST BE RENEWED AS IT EXPIRES 06/30/86. PLEASE COMPUTE THE AMOUNT DUE FOR RENEWAL AND REMIT BY 07/31/86 OR A PENALTY OF 10% FOR EACH MONTH OF DELINQUENCY MUST BE ADDED. WHEN COMPLETING THIS FORM, PLEASE MAKE CORRECTIONS TO INFORMATION SHOWN AS NECESSARY. IF NO LONGER IN BUSINESS, PLEASE NOTIFY THE BUSINESS TAX OFFICE BY RETURNING THIS APPLICATION STATING "NO LONGER IN BUSINESS". YOUR CANCELLED CHECK DOES NOT INDICATE APPROVAL. IF APPROVED YOU WILL RECEIVE A RECEIPT. IF NOT APPROVED YOUR MONEY WILL

BE REFUNDED.

AD NELSON J ENTERPRISES
 ID C/O 11681 STEELE DR
 LR GARDEN GROVE, CA 92640
 IE
 NS
 GS

VALIDATION

PAID - BUS TAX

JUL 17 1986

City of Garden Grove

IF MAILING ADDRESS DIFFERENT, LINE 17 AND INDICATE CORRECTIONS

BUSINESS NAME (PLEASE PRINT) NELSON J ENTERPRISES		OWNERSHIP CLASS S	LOCAL BUSINESS START DATE	
BUSINESS ADDRESS 11681 STEELE DR		CITY GARDEN GROVE	STATE CA	ZIP 92640
BUSINESS DESCRIPTION FOOD SUPPLEMENTS & GIFT ITEMS		STATE REGAL. PERMIT NO 24-787116	BUS. PHONE NO	
OWNER'S NAME JOHN L NELSON / MYRTLE ANN NELSON	FIRST MIDDLE INITIAL	LAST	HOME PHONE NO 636-4415	
OWNER'S HOME ADDRESS 11681 STEELE DR		CITY GARDEN GROVE	STATE CA	ZIP 92640

TAX COMPUTATION SECTION

GARDEN GROVE MUNICIPAL CODE SECTION 5.04.340A - RETAIL, WHOLESALE & MISC.

EVERY PERSON CONDUCTING, OPERATING OR MAINTAINING ANY BUSINESS CONSISTING OF SELLING AT RETAIL OR WHOLESALE ANY GOODS, WARES AND MERCHANDISE OR COMMODITIES OR ANY BUSINESS NOT OTHERWISE SPECIFICALLY COVERED BY THIS CHAPTER BY NAME OR DESCRIPTION, SHALL PAY A TAX TO BE COMPUTED AS FOLLOWS:

BASIC FEE INCLUDES OWNER			\$ 30.00
ENTER NUMBER OF EMPLOYERS*	0000	X 3.00 =	\$ 0.00
ENTER NUMBER OF AMUSEMENT DEVICES*	0000	X 12.00 =	\$ 0.00
ENTER NUMBER OF JUKE BOXES	0000	X 12.00 =	\$ 0.00
ENTER NUMBER OF BILLIARD & POOL TABLES	0000	X 12.00 =	\$ 0.00
COIN OPERATED VENDING MACHINES* OPERATED BY APPLICANT:			
ENTER NUMBER OF \$.05-.10 OPERATED MACHINES	0000	X 5.00 =	\$ 0.00
ENTER NUMBER OF MACHINES IN EXCESS OF \$.10	0000	X 8.00 =	\$ 0.00
ENTER NUMBER OF POSTAGE STAMP MACHINES	0000	X 2.00 =	\$ 0.00
TOTAL COMPUTED TAX			\$ 30.00
ADD 10% PENALTY* IF PAID AFTER 07/31/86			\$ 3.00
AND AN ADDITIONAL 10% FOR EACH MONTH THEREAFTER			\$ 3.00
TOTAL DUE			\$ 36.00

*ASTERISKED WORDS ARE DEFINED ON THE REVERSE SIDE OF THIS FORM

OWNER'S SIGNATURE

CNL COMPUTER

PLEASE SIGN ABOVE AND SUBMIT THIS APPLICATION AND PAYMENT TO

CITY OF GARDEN GROVE
P.O. BOX 3070 GARDEN GROVE, CA 92642
11391 ACACIA PKWY GARDEN GROVE, CA 92640

FOR ASSISTANCE
PHONE 714 633 6641

JUL 17 1986



**CITY OF GARDEN GROVE
BUILDING SERVICES**

**11681 STEELE DR
PERMIT#:11-0114
ISSUED:1/13/11**

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

Owner NELSON,JOHN L			Telephone		Zip 92840	Building Address 11681 STEELE DR																											
Address 11681 STEELE DR		City Garden Grove		State CA		Suite/Unit/Building																											
Applicant MIKE KILLEEN QUALITY ROOFING COMPANY			Telephone 562-924-7717		Zip 90710	TYPE Reroof		ISSUED BY Joanne Chung																									
Address 12056 CENTRALIA ST		City HAWAII GARDENS		State		Inspector Dist.	Parcel Number 08940204	LOT																									
State Licence 762475 C39		Expires N/A		City Licence		TRACT																											
Contractor MIKE KILLEEN QUALITY ROOFING COMPANY			Telephone 562-924-7717		Zip 90710	Valuation \$9,000.00																											
Address 12056 CENTRALIA ST		City HAWAII GARDENS		State		Final																											
State Licence 762475 C39		Expires N/A		City Licence		Inspector's Signature <i>TCH</i>		Date 1/24/11																									
Floor Area(sq. ft.)		Residential/Commercial		Residential		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td rowspan="7" style="writing-mode: vertical-rl; text-orientation: mixed; font-weight: bold; font-size: 2em;">F E E S</td> <th>Description</th> <th>Quantity</th> <th>Amount</th> </tr> <tr> <td>One-Stop Permit Center Surcharge</td> <td></td> <td>\$3.70</td> </tr> <tr> <td>General Plan Update Fee, Valuation</td> <td></td> <td>\$11.83</td> </tr> <tr> <td>Cultural Arts Fee, Valuation</td> <td></td> <td>\$5.92</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>Permit Fee</td> <td></td> <td>\$184.75</td> </tr> <tr> <td>TOTAL</td> <td></td> <td>\$242.20</td> </tr> </table>			F E E S	Description	Quantity	Amount	One-Stop Permit Center Surcharge		\$3.70	General Plan Update Fee, Valuation		\$11.83	Cultural Arts Fee, Valuation		\$5.92	BSASRF State Fee		\$1.00	Issuance Fee	1	\$35.00	Permit Fee		\$184.75	TOTAL		\$242.20
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	Issuance Fee	1	\$35.00																														
	Permit Fee		\$184.75																														
TOTAL		\$242.20																															
Job Description TEAR OFF EXIST/INSTALL 1 LYR 30# FELT & LIFETIME SHINGLE/ON 8 SQ FLAT 4-PLY BUR																																	
DECLARATION																																	
<small>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.</small>																																	
X Applicant's Signature <i>Mike Killeen</i>		Print Name <u>Mike Killeen</u> Date <u>1-23-11</u>																															

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

Permit Type: BLDG

ORIGINAL

REROOFING

City of Garden Grove
Building Services Division

Instructions: Complete boxes 1, 2 & 3. Read the inspection procedures. Complete and sign the declaration at the bottom of the form.

1 ROOFING INFORMATION:

Job Address 11681 STEELE No. of Bldg's to be reroofed: 1

Number and types of existing roofs: 1. (PITCHED) COMP 2. (FLAT) 1-CAP 3. _____

Square feet of roof area 2700 850 Class of roof: (A) B C

Roof pitch(s) 4/12 ^{PITCHED} 1/2 FLAT ICBO ER No. _____ Contract price \$ 9000

Description of work - include type of roof, type and number of layers of underlayment, tear off (if applicable), thickness and type of plywood (e.g.: 1/2" CDX):
PITCHED: 15' TEAR OFF - 30# 12ft GAF/ELK Lifetime Shingle
FLAT: 4-PLY BUILT UP CAP ROOF

2 CONTRACTOR INFORMATION:

Name Mike Kellan Quality Roof
Address 12056 CARROLLA
HAWAIIAN GARDENS Zip 90710
Phone (562) 924 7717

3 OWNER INFORMATION:

Name Ann Nelson
Phone (714) 636 4415

4 INFORMATION / INSPECTION PROCEDURES / INSTRUCTIONS:

1. A separate permit is required for each building.
2. Roofing must be installed in accordance with the manufacturer's installation instructions and the Building Code.
3. Provide a safe ladder for each inspection. Ladder must extend above the edge of the roof, be erected, and ready for inspection.
4. ALL materials must be on site at the time of pre-inspection.
5. If roof covering is to be removed or made smooth, all removal and repair work must be complete PRIOR to pre-inspection.
6. After the removal and sheathing repair is complete and BEFORE applying any roofing materials, call for a pre-inspection. No roofing materials may be applied without first obtaining the written approval of the building inspector.
7. Inspection requests can be made by calling 714-741-5332 between 7:30 a.m. and 4:00 p.m. when city hall is open. Inspections will be provided on the next day city hall is open following the request. The arrival time of the inspector varies with work load and routing.
8. The inspection record card must be conspicuously posted on the site.
9. After the reroofing is complete, request a final inspection.

I have read the information outlined above. I understand my responsibilities. I agree to comply. I understand that a reinspection fee applies if the job is not ready at the time of inspection. For permits issued to contractors: I agree to deliver a copy of this signed form to the license holder.

Print Name Mike Kellan Signature [Signature] Date 1-13-11



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

PROPOSED WORK:

JOB Address : 11681 STEELE DR
 Suite :
 PERMIT NO. : 81031
 Permit Type :
 Type : E

ELEC FOR ADDING A/C UNIT TO EXISTING SYSTEM.

Owner : JOHN L NELSON
 Applicant : ADALFO IBANEZ
 Phone : 800-503-2666

Contractor : ECONO AIR
 Address : 3101 ENTERPRISE ST
 CityStZip : BREA, CA 92821
 Phone : 800-503-2666

FEES

Insp Dist : 08
 Date : 08/16/05
 Parcel No : 08940204

942 22130 GENERAL PLAN	1	2.00
080 32550 CULTURAL ARTS	1	1.00
111 32401 Issuance	1	35.00
111 32412 Fixtures (1-20)	1	1.00
111 32412 pwr appar not over o	1	9.50
TOTAL		48.50

INSPECTION RECORD

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

FINAL *[Signature]* 11/22/05
 Utility Notified _____

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 instruction, 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 Adolfo Ibanez Date 8-16-05

***** VALIDATION *****
 PAID ON 16 Aug 2005 AT 12:42
 RECEIVED BY LARAINEM 198.245.206.215/2 TRANS# 112
 AMOUNT PAID \$138.50 BY CHECK#1427
 TOTAL PAID = \$138.50



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 : 11681 STEELE DR
 Suite :
 PERMIT NO. : 81030
 Permit Type :
 Type : H

Owner : JOHN L NELSON
 Applicant : ADALFO IBANEZ
 Phone : 800-503-2666

Contractor : ECONO AIR
 Address : 3101 ENTERPRISE ST
 CityStZip : BREA, CA 92821
 Phone : 800-503-2666

Insp Dist : 08
 Date : 08/16/05
 Parcel No : 08940204

PROPOSED WORK:

CHANGE-OUT FAU, ADD A/C UNIT & RE-DUCT.

FEES

942 22130	GENERAL PLAN	1	2.00
080 32550	CULTURAL ARTS	1	1.00
111 32401	Issuance	1	35.00
111 32418	FURNACE TO 100000 BT	1	30.00
111 32418	DUCTS	1	12.00
111 32418	A/C COND UNIT TO 5 T	1	10.00
TOTAL			90.00

APPROVAL DATE INSPECTOR

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

Handwritten signature and date: 11/3/05

FINAL _____
 Utility Notified _____

AUTHORIZATION

Issued By: jime 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 instruction, and hereby authorize representatives of this City and County to enter upon the above mentioned property for inspection purposes.

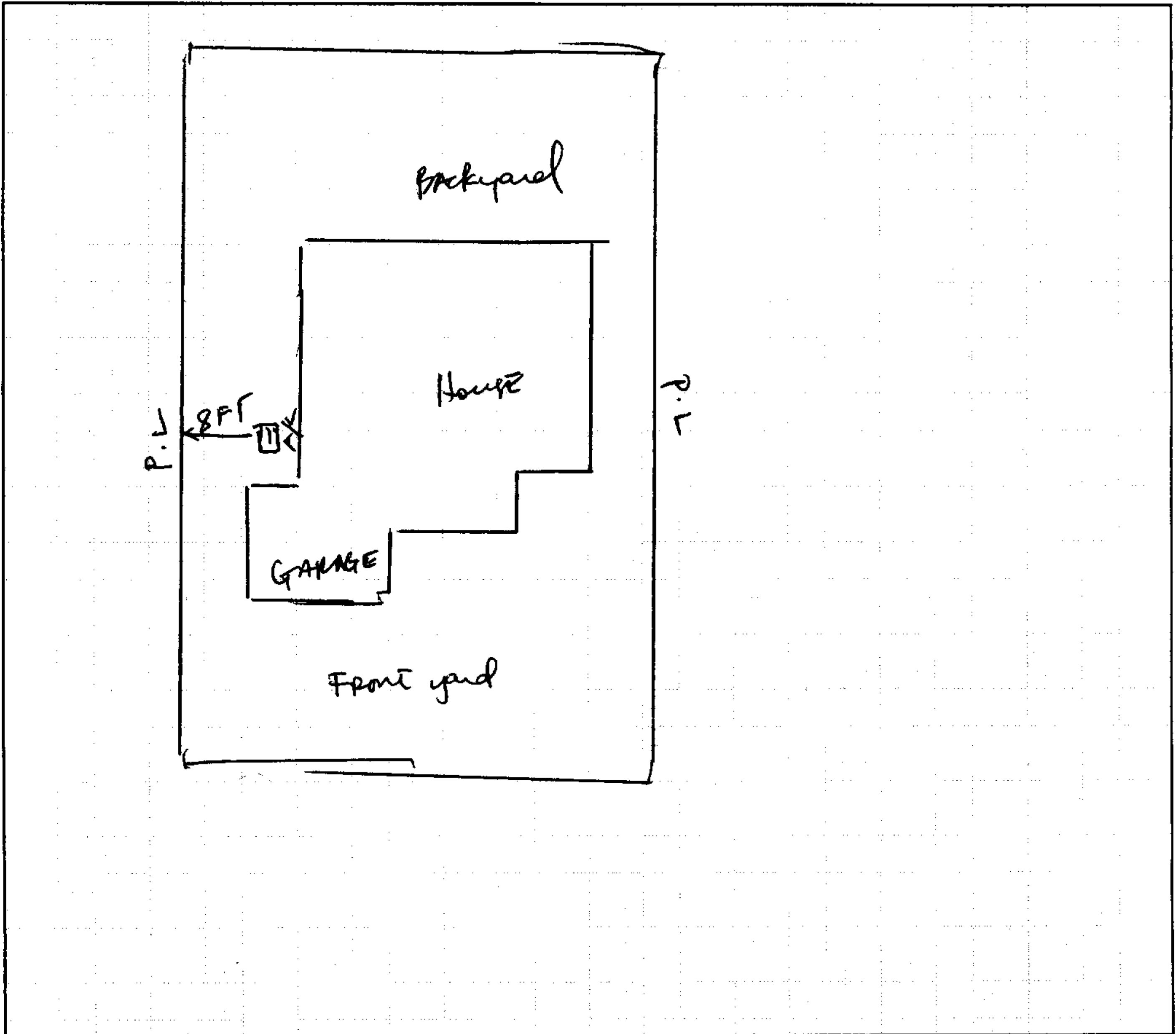
Applicant's Signature *Adolfo Ibanez*
 Print Name Adolfo Ibanez Date 8-16-05

***** VALIDATION *****
 PAID ON 16 Aug 2005 AT 12:42
 RECEIVED BY LARAINEM 198.245.206.215/2 TRANS# 112
 AMOUNT PAID \$138.50 BY CHECK#1427
 TOTAL PAID = \$138.50

Plot Plan Form

Planning Action:	Zone: <u>R-1</u>	Coverage:	Job Address: <u>11681 STEELE DR</u>	Permit No.: <u>8030</u>
Approved By: <u>M. Palle</u>	Date: <u>8/16/05</u>	Increase:	Assessor Parcel No.:	Tract & Lot #:
Remarks:			Occupancy:	Const. Type:
			<input type="checkbox"/> New <input type="checkbox"/> Alter <input type="checkbox"/> Add <input type="checkbox"/> Repair <input type="checkbox"/> Demo	

Job Description: Add A/C
Change out Fan Product



I certify the information hereon is complete & correct.

John Nelson

Owner's Name (print)

Joseph Baray

Signature (owner/agent)

8-16-05

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 : 11681 STEELE DR
Suite :
PERMIT NO. : 81086
Permit Type :
Type : H

Owner : JOHN L NELSON
Applicant : MYRON PLOTZ
Phone : 714-534-4230

Contractor : PLOTZ & TANNER CONSTRUCTION CO
Address : 12681 GLEN ST.
CityStZip : GARDEN GROVE, CA 92840
Phone : 714-534-4230

Insp Dist : 08
Date : 08/18/05
Parcel No : 08940204

PROPOSED WORK:

VENT FAN FOR NEW ROOM ADDITION.

FEES

942 22130 GENERAL PLAN	1	2.00
080 32550 CULTURAL ARTS	1	1.00
111 32401 Issuance	1	35.00
111 32418 VENT FAN TO SINGLE D	1	22.00
TOTAL		60.00

APPROVAL DATE INSPECTOR

INSPECTION RECORD

Furnace _____

Furnace Vents _____

Gas Piping _____

Ducts _____

Duct Fan Vent 11/3/05

Kitchen Hood _____

Air Handl Unit _____

Evap Cooler _____

Boiler Comp _____

Decor Appl _____

FINAL Sal Gelber 1/19/06

Utility Notified _____

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 [Signature]
Print Name Myron Plotz Date 8/18/05

***** VALIDATION *****
PAID ON 18 Aug 2005 AT 11:03
RECEIVED BY LARAINEM 198.245.206.215/2 TRANS# 49
AMOUNT PAID \$569.74 BY CHECK#514
TOTAL PAID = \$569.74



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 : 11681 STEELE DR
Suite :
PERMIT NO. : 81085
Permit Type :
Type : E

Owner : JOHN L NELSON
Applicant : MYROM PLOTZ
Phone : 714-534-4230

Contractor : PLOTZ & TANNER CONSTRUCTION CO
Address : 12681 GLEN ST.
CityStZip : GARDEN GROVE, CA 92840
Phone : 714-534-4230

Insp Dist : 08
Date : 08/18/05
Parcel No : 08940204

PROPOSED WORK:

ELEC FOR ROOM ADDITION.

FEES

942 22130 GENERAL PLAN	1	2.00
080 32550 CULTURAL ARTS	1	1.00
111 32401 Issuance	1	35.00
111 32412 Residential Sq. Ft. 268		17.39
111 32412 SERVICE 600V, 200A M	1	30.00
111 32412 pwr appar not over o	1	9.50
TOTAL		94.89

INSPECTION RECORD

APPROVAL _____ DATE _____ INSPECTOR _____
 Underground _____
 Conduit _____
 Wiring - Rough _____
 Heater _____
 Fixtures & Trim _____
 Motors _____
 Ufer _____
 Service By 11/3/05

FINAL Shel Galt 1/19/06
 Utility Notified 11/4/05 P.E.

***** VALIDATION *****
 PAID ON 18 Aug 2005 AT 11:03
 RECEIVED BY LARAINEM 198.245.206.215/2 TRANS# 4
 AMOUNT PAID \$569.74 BY CHECK#514
 TOTAL PAID = \$569.74

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 [Signature]
 Print Name Myron Plotz Date 8/18/05



PERMIT (PAGE 2 of 2)

PROJECT/SITE/BUILDING DESCRIPTION

PROPOSED WORK:

112

JOB Address : 11681 STEELE DR
Suite :
PERMIT NO. : 81084
Permit Type : BUILDING
Type : B6
DWELLING ADDITIONS & ALTERATIO
Owner : JOHN L NELSON
Applicant : MYRON PLOTZ
Phone : 714-534-4230

O21 - ROOM ADDITION
CONVERT 267.50SF ENCLOSED PATIO TO LIVIN G
AREA/CHANGE-OUT (8) WIN & STUCCO HOUSE

Contractor : PLOTZ & TANNER CONSTRUCTION CO
Address : 12681 GLEN ST.
CityStZip : GARDEN GROVE, CA 92840
Phone : 714-534-4230

FEES

Insp Dist : O8
Date : 08/18/05
Parcel No : 08940204

Table with 4 columns: Fee ID, Description, Quantity, Amount. Includes items like PLAN CHECK 65% (\$42.0), Permit, issuance, Strong Motion Fee, General Plan, Cultural Arts, PLAN CHECK FEE CREDI.

TOTAL 414.85

INSPECTION RECORD

APPROVAL DATE INSPECTOR

Pre Inspect
Foundation 9-12-05 [Signature]
Concrete Floor
Reinforcing
Masonry
Roof Shtg
Rough Frame 11/3/05
Insul / Energy 11/16/05
Drywall 11/23/05
Lath 11-14-05
Plas. Brown Ct. 1-9-06
Landscaping
Pre Gunite
Pre Deck
Pre Plaster

Handwritten note: 'where lots existing walls 12/9/20/05'

Planning Final
Bldg Final [Signature] 1/19/06
Utility Notified

AUTHORIZATION

Issued By: jime 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 Myron Plotz Date 8/18/05

***** VALIDATION *****
PAID ON 18 Aug 2005 AT 11:03
RECEIVED BY LARAINEM 198.245.206.215/2 TRANS# 49
AMOUNT PAID \$569.74 BY CHECK#514
TOTAL PAID = \$569.74
