

MONARCH	012322		1
3 Maple STREET NAM	ADDRESS	APT. NO.	CARD NO.
BP 113533A 1980 Wpsc Reel 93			<input checked="" type="checkbox"/>

Others

CERTIFICATE of OCCUPANCY

CITY OF GARDEN GROVE -- PUBLIC WORKS & DEVELOPMENT

THIS CERTIFICATE ISSUED PURSUANT TO THE REQUIREMENTS OF SECTION 306 OF THE UNIFORM BUILDING CODE CERTIFYING THAT, AT THE TIME OF ISSUANCE, THIS STRUCTURE WAS IN COMPLIANCE WITH THE VARIOUS ORDINANCES OF THE CITY REGULATING CONSTRUCTION OR USE FOR THE FOLLOWING:

JOB ADDRESS 12322 Monarch Avenue PERMIT NO 113533A

USE OF BLDG. Warehouse/Manufacturing GROUP F-2 TYPE VN

BLDG. APPROVED BY Ted Robinson DATE 7/25/80 USE ZONE PUD

ZONING REMARKS PUD 105-71

BLDG. OWNER Assoc. So. Invest. Co. ADDRESS 7495 Anaconda Ave., Garden Grove

Raymond T. Holland BY William K. Miller DATE 7/30/80
BLDG. OFFICIAL

POST IN A CONSPICUOUS PLACE

BUILDING PERMIT

Inspection Requests
638-6771

General Information
638-6661

For Applicant to Fill in BLDG # 35

INSPECTION RECORD

OCC. LOAD YES
 TYPE **P-2**
 FIRE SPRINK YES
 FRONT LEFT RIGHT REAR
 Eav Proj. **SEE PLAN**
 Setbacks
 PLANNING ACTION **PUD 105-71** YES
 LAND USE APPROVED BY **D.B.** DATE **1-24-80**
 REMARKS

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION	3/14/80	
CONCRETE FLOOR	2/19/80	
REINFORCING		
ROOF SHTG		
ROUGH FRAME		
INSULATION ENERGY		
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULAT ON		
SMOKE DETECTOR		
PARKING		
LANDSCAPING	7/23/80	
LAND USE FINAL		
FINAL	7-23-80	
UTILITY RELEASE		

ADDRESS **12322 MONARCH AVE**
 LOT NO. BLK NO. TRACT NO. PERMIT NO.
 OWNER **ASSOC SO. INVEST. CO 898-8716** TEL. NO. **1-195-99A**
 MAILING ADDRESS **7495 ANACONDA AVE GE.** CITY **GE.** ZIP
 ARCH **R ZAMBONI**
 ENGR. MAILING ADDRESS **15751 HERBERT AVE** CITY **HERBERT** ZIP
 TEL. NO. **454-777** STATE LIC. NO. & TYPE
 VALIDATION
 CONTRACTOR **COWNER - OLDER**
 MAILING ADDRESS **7495 ANACONDA AVE GE.** CITY **GE.** ZIP
 TEL. NO. STATE LIC. NO.

G. SANT. DIS. FEE REQ'D. YES
 C. SANT. DIS. FEE REQ'D. YES
 PARCEL MAP PROVIDED
 P.W. DEDICATION PROVIDED

ST. BOND	REV. CODE	AMOUNT
WATER BOND		
WATER ASSMT. FEE ACRES		
WATER ASSMT. FEE FT		
PARKWAY TREE FEE		
PARK & REC FEE /DIST		
DRAIN ASSMT. FEE /DIST		
PLAN RETENTION FEE		529 37.40
BLDG. PLAN CHECK		520 345 16
BLDG. PERMIT FEE		226 522 38
ISSUANCE		535 600
VALUATION		\$ 218,800
TOTAL FEES		910 74

WORKER'S COMPENSATION REQUIREMENTS
 State Compensation Insurance Policy No. **90-100-4684** Expiration Date **12-14-79**
 I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Worker's Compensation laws of California.
 NOTE: If, after making such certificate, the applicant for the permit should become subject to the Worker's Compensation provisions of this code, he shall forthwith comply with the provisions of Section 3700 or his permit shall be deemed revoked.
 I certify that I have read this application and state that the above information is correct. I agree to comply with all City ordinances and State laws relating to pending construction. I further agree to hold the City of Garden Grove free and harmless from any liability arising out of injury or bodily damage resulting from work performed pursuant to this permit.
 Signature: **Rokone** DATE **12-14-79**

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
 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: **ASSOC SO. INVEST. CO** Signature: **Rokone** DATE **12-14-79**
 (PRINT) PROPERTY OWNER (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT DATE

PRESENT BLDG. USE
 PROPOSED BLDG. USE **MANUFACTURE W/ HOUSE**
 DESCRIBE WORK TO BE DONE **CONCRETE TILT-UP**
 NEW ADD'N ALTER REPAIR DEMOLISH
 FLOOR AREA (SQ. FT.) **1683** NO. OF STORIES **2** NO. OF DWELLING UNITS **0**
 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

AUTHORIZED BY **JPS** DATE **1-25-80**

2/10/80 8 INTERIOR PAGES - R

2/12/80 Pgs 1, 2, 7, 9, 10-13, 15, 17, 18, 20, 22-24 - R

2/12/80 Pgs 2, 4, 5, 8, 14, 16, 19, 25, 26, 27, 28 & TRAIL ENCL - R

2/12/80 TRAIL ENCL - R

2/12/80 TRAIL ENCL, TR ENCL (170), TRAIL ENCL (171)

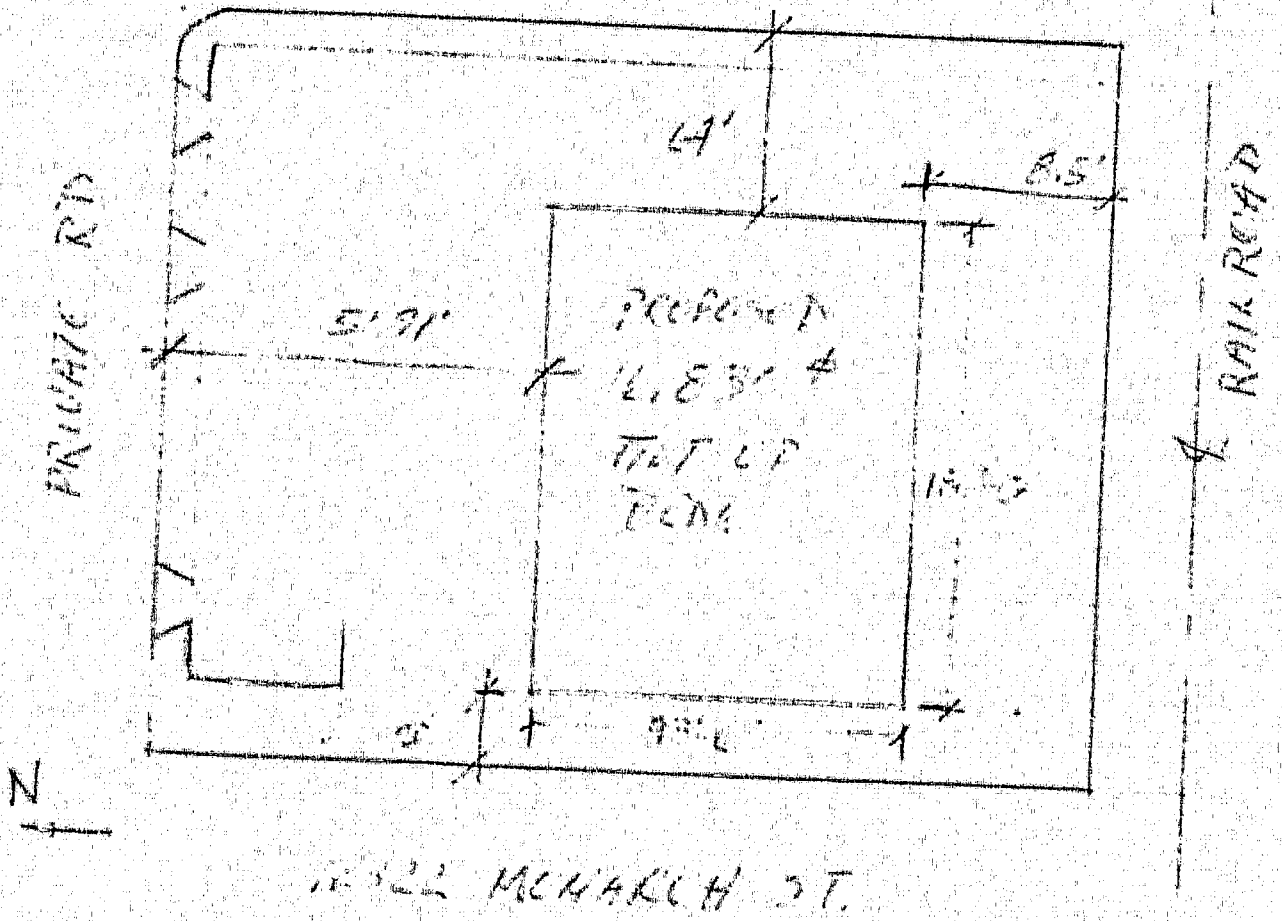
BUILDING PERMIT PLOT PLAN
Public Works & Development Dept.
CITY OF GARDEN GROVE

PLEASE USE BALL-POINT PEN

1

PLOT PLAN APPROVED BY	JOB ADDRESS 12322 MONARCH ST.		PERMIT NO. 113531
	ASSESSOR'S PARCEL NO. 151-341-6A	LOT	BLOCK TRACT
OWNER F2000 S. INTERIOR CO.	JOB DESCRIPTION (PLEASE CHECK) <input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish		
	DATE 1-25-88	USE CONSTRUCT NEW	PERMIT VALUE 2,880

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



12322 MONARCH ST.

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

By: *[Signature]*

Date: 1-25-88

ELECTRICAL PERMIT

ASI #35

For Applicant to Fill in

INSPECTION RECORD

FEES

APPROVAL	DATE	INSPECTOR
Underground		
Working	4-21-80	R
Heater		
Fixtures & Taps		
Motors		
Other	5-16-80	R
Service	5-16-80	R
FINAL	7-29-80	R
Locality Not Field	* 7-29-80	MR

IF NOT LISTED BELOW SEE CODE	NO	EA	FEE
Residential R & R 50 ft.			
Garage Res. 1 M. 50 ft.			
Service Meter Single Phase	1		15 00
Service Meter Three Phase			
Add'l Meter Three Phase			
Temporary Power Pole			
Pole Power Light etc.			
Sub Panels 30	2		10 00
Sub Panels 30	126	.25	31 50
Outlets	98	.25	24 50
Fixtures			
Fixtures 30			
Heater Not Over 150 W			
Washer			
Dryer			
Hot Water Heaters	1		2 00
Dishwasher			
Domestic Range or Oven			
Disposal			
Power Apparatus H.P. K.W. or K.V. & Transformers etc.			
Over 1000	2		3 00
Over 1000	2		6 00
Over 1000			
Time Clock	1		1 00
Sign			
Sign			

ITEM	CODE	FEES
Plan Return on Fee		63 24
Plan Check	524	93 00
Permit	297	6 00
Stamp	535	
TOTAL FEES		162 24

ADDRESS: 12322 Monarch

LOT NO. BLK NO. TRACT NO. ELECTRIC PERMIT NO. 113479A

OWNER: Associated Southern Investment

OWNERS ADDRESS: CITY

NEW BUILDING OR ADDITION - AREA: EXISTING BUILDING REMODEL AREA: OCCUPANCY GROUP: USE OF BUILDING OR NUMBER OF UNITS: Two

VALIDATION

ELECTRICAL CONTRACTOR: K. D. Miller Electric, Inc. STATE LIC. NO. & TYPE: 155604 (C10)

ADDRESS: 12534 E. Washington Blvd. CITY: P.O. Box 4605 Whittier 90607 PHONE: 698-3756

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. PC 115 4673 Expiration Date 4-1-80

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 37C. If he fails to do so, his certificate 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.

K. D. Miller Electric, Inc. Sec-Tres 1/18/80

BUSINESS TAX CERTIFICATE INFORMATION

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

K. D. Miller Electric, Inc. 1/18/80

(PRINT) CONTRACTOR: 206120 (SIGNATURE) CONTRACTOR AUTHORIZED AGENT: H.C. Cravill DATE: 6-30-80

BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE

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

Owner: Section 7044 Minor work under \$100. Section 7048 Employee working for wages only. Section 7059

Other:

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

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

BUILDING PERMIT NO. ALIAS PERMIT NO. VENT. HEAT. AIR COND. PERMIT NO.

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.

LAND USE: AUTHORIZED BY: DATE: H.E. Cochran 1-23-80

PLUMBING PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EACH	\$ FEE
Sol. Piping	2-7-80	W	Water Closet (toilet)	3		9.00
			Bath Tub			
			Shower			
Ground Plumbing			Lavatory (Wash Basin)	2		6.00
			Kitchen Sink	2		6.00
Recess Plumbing	4-18-80	W	Garbage Disposal			
			Laundry Tub or Tray			
Sol. Piping			Water Heater <i>ELECTRIC</i>	1		3.00
			Floor Sink			
Gas Vent			Floor Drain	2		6.00
			Dish Washer			
Sewer			Drinking Fountain	1		2.00
			Urinal	3		9.00
Main Drain and Vacuum Lines			Gas System - Outlets			
			Building Sewer (First 100 ft)	1		6.00
Water Heater			Building Sewer (Add'l 100 ft)	1		6.00
			Building Sewer (ea. add'l drain)			
Backwash			Rainwater Drain			
			Swimming Pool Piping			
Water Laterals			Sand Traps/Receptors			
			Automatic Washing Machine			
			Water Softeners			
			Backwash Traps			
			Water Laterals			
			Backflow Protective Devices			
			Water Piping (ea. 100 ft)	1		3.00
			Lawn Sprinklers (S.F.C. Only)			
			Lawn Sprinklers (other)			

ADDRESS: 12322 Marnech

LOT NO. BLK NO. TRACT NO. PERMIT NO. 113709A

OWNER: Association Southern

OWNER'S ADDRESS: 7495 Luccardale Ave, Los Angeles, CA

NEW BUILDING OR ADDITION AREA: SQ. FT. EXISTING BLDG. REMOVAL AREA: SQ. FT. OVERSPANCY: USF OF BUILDING AND OR NUMBER OF UNITS

VALIDATION:

PLUMBING CONTRACTOR: [Signature] STATE LIC. NO. & TYPE: 309843 C-36-42

ADDRESS: 7363 Compton Blvd, Paramount, CA PHONE: 630-3179

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 91-450747 Expiration Date 12/31/80

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] 2/6/80

BUSINESS TAX CERTIFICATE INFORMATION

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

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

BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE

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

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

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

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

ITEM	CODE	FEES
Plan Check and Fee		34.68
Plan Check		51.00
Permit		6.00
Issuance		
TOTAL FEES		91.68

LAND USE AUTH. ISSUED BY: [Signature] DATE: 2-6-80

FINAL 7-10-80 [Signature]

UTILITY CO NOTIFIED

IDENTIFICATION CODE

PLUMBING PERMIT NO. 113533A ELECTRICAL PERMIT NO. 113499A

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.

4-16-80 West Dunes Road
 2.4" test of base
 (1) 6" C.C. to ground H.H.

4-16-80 Top of base on water
 1.4" test of base
 (2) Test concrete
 2.6" C.C. to ground H.H.

4-16-80 Top of base on water
 3.2" test of base
 2.2" C.C. to ground H.H.

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)			
Ground Plumbing			Bath Tub			
Branch Plumbing			Shower			
Gas Piping			Lavatory (W.C. Basin)			
Gas Vent			Kitchen Sink			
Sewer			Garbage Disposal			
Water Heater			Laundry Tub or Tray			
Backwash			Water Heater			
Water Latrine			Faucet Sink			
			Faucet Drain			
			Dish Washer			
			Drinking Fountain			
			Urinal			
			Gas System (Outlets)			
			Building Sewer (F. or 100 ft.)			
			Building Sewer (Add'l. 100 ft.)			
			Building Sewer (see add'l. drain)			
			Rainwater Drain			
			Sy. (Swimming Pool) Piping			
			Sink Traps, Receptors			
			Automatic Washing Machine			
			Water Softeners			
			Backwash Trap			
			Water Latrine			
			Backflow Protective Devices			
			Water Piping (see 100 ft.)			
			Lawn Sprinklers (S.F. or less)			
			Lawn Sprinklers (other)	1		10-
FINAL	7-10-80	LL				
UTILITY CO. NOTIFIED						
IDENTIFICATION CODE			ITEM	CODE		FEES
			Plan Retention Fee			
			Plan Check			
			Permit	2028		10-
			Issuance	5.35		0-
			TOTAL FEES			110.02
			LAND USE	AUTHORIZED BY		DATE
				DWILSON		6/30/80

ADDRESS: 12322 Monarch St. A.H.

LOT NO. #35 BLK NO. TRACY NO. 115883A

OWNER: Associated Southern Investors Inc. PHONE: 898-8716

OWNER'S ADDRESS: 7495 Anacanda A.H. CITY: 92641

NEW BUILDING OR ADDITION AREA: SQ. FT. EXISTING BUILDING REMODEL AREA: SQ. FT. OCCUPANCY TYPE OF BUILDING AND GROUP OR NUMBER OF UNITS: end

VALIDATION:

PLUMBING CONTRACTOR: Landscape Constructors Inc. STATE LIC. NO. & TYPE: 365869

ADDRESS: 4100 So. Ritchey Santa Ana CITY: PHONE: 597-8182

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.

PERMIT APPLICANT SIGNATURE: *Harry Price* DATE: _____

BUSINESS TAX CERTIFICATE INFORMATION

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

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

BUSINESS TAX CERTIFICATE NO. _____ EXPIRATION DATE: _____

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

Owner: Section 7044 Minor work under \$100. Section 7048

Employee working for wages only: Section 7053

Other: _____

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

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

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

HEATING, VENTILATING, REFRIGERATION & AIR COND. PERMIT

INSPECTION RECORD

FEES

HG

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EA.	\$ FEE
FURNACE			Furnace to & incl. 100M B.T.U.			
FURNACE VENTS			More than 100M & incl. 500M B.T.U.			
GAS PIPING			More than 500M & incl. 1MM B.T.U.			
DUCTS			Installation or Relocation of Susp. Heater			
SINGLE DUCT FAN VENT			Installation or Relocation of Wall Heater			
KITCHEN HOOD			Installation or Relocation of Unit Heater			
AIR HANDLING UNIT			Installation of Appliance Vent Only			
EVAPORATIVE COOLER			Repair, Alteration or Addition to any Heating or Cooling System			
BOILER OR COMPRESSOR			Incidental Gas Piping			
DECORATIVE APPLIANCE			Each Range Hood Incl. Curt and Fan	3	3	15.00
			Each Vent Fan Connected to a Single Duct			
			Each Ventilating System not a Part of a Heating or A/C Conditioning System Authorized by Permit			
			Boiler or Compressor to & incl. 5 Hp.	2	5	10.00
			Absorption System to & incl. 100M B.T.U.			
			Boiler or Compressor to & incl. 15 Hp.			
			Absorption System to & incl. 500M B.T.U.			
			Boiler or Compressor to & incl. 30 Hp.			
			Absorption System to & incl. 1MM B.T.U.			
			Boiler or Compressor to & incl. 80 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.			
			Air Handling Unit to & incl. 10M C.F.M.			
			Air Handling Unit over 10M C.F.M.			
			OTHER			
FINAL						
UTILITY CO NOTIFIED						
IDENTIFICATION CODE			ITEM	CODE		FEES
			Plan Retention Fee			
			Plan Check			
			Permit	229		25.00
			Issuance	535		6.00
			TOTAL FEES			31.00
BUILDING PERMIT NO.			AUTHORIZED BY		DATE	
ELECTRIC PERMIT NO.			LAND USE	BUILDING		

ADDRESS
12322 Monarch
LOT NO. BLK NO. TRACT NO. PERMIT NO. **115584A**

OWNER PHONE
A-ssoc. So. Invest. Co.

OWNER'S ADDRESS CITY
7495 Anaconda, Garden Grove

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

VALIDATION

HEATING CONTRACTOR STATE LIC. NO. & TYPE
Cimco A/C & S/M Inc. 290524 C-20

ADDRESS CITY PHONE
11819 Burke St., Santa Fe Springs 698-0302

WORKER'S COMPENSATION REQUIREMENTS
State Compensation Insurance Policy No. 00--50-56 Expiration Date 7-1-80
 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.
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PERMIT APPLICANT SIGNATURE DATE
[Signature] 6/9/80

BUSINESS TAX CERTIFICATE INFORMATION
I certify that the following Contractor's License No. 290524 and Classification C-20 is in full force and effect. 6-9-80
(PRINT) CONTRACTOR SIGNATURE RE CONTRACTOR OR AUTHORIZED AGENT DATE
[Signature] 7-31-80

BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE
I certify that I am exempt from Section 7031.5 of the Business and Professional Code, Division 3, Chapter 9, Contractors' License Law, under the following Section:
Owner: Section 7044 Minor work under \$100: Section 7048
Employee working for wages only: Section 7053
Other: _____

(PRINT) PROPERTY OWNER (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT DATE
A FEE MAY BE CHARGED FOR 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.

**CITY OF GARDEN GROVE
INTER-SECTION MEMO**

TO: WATER ENGINEERING & PERMIT SECTION

FROM: PLAN CHECK SECTION

PLAN CHECK:

Address: 12322 MONARCH

Owner: ASSOCIATED SOUTHERN CO.

Use: NEW TILT-UP BLDG.

Plan Check Number: 2812 Land Use Case No.: PUD 195-71

Number of Stories: 1

Fixture Unit Count (As Per Uniform Plumbing Code)

Bathtub	<u> </u>	<u>X</u>	<u> </u>	F.U. = <u> </u>
Dishwasher	<u> </u>	<u>X</u>	<u> </u>	F.U. = <u> </u>
Kitchen Sink	<u>1</u>	<u>X</u>	<u>2</u>	F.U. = <u>2</u>
Shower	<u> </u>	<u>X</u>	<u> </u>	F.U. = <u> </u>
Lavatory	<u>2</u>	<u>X</u>	<u>1</u>	F.U. = <u>2</u>
Urinal	<u>2</u>	<u>X</u>	<u>5</u>	F.U. = <u>10</u>
Water Closet	<u>3</u>	<u>X</u>	<u>2</u>	F.U. = <u>6</u>
Washing Machine	<u> </u>	<u>X</u>	<u> </u>	F.U. = <u> </u>
Irrigation	<u> </u>	<u>X</u>	<u> </u>	F.U. = <u> </u>
Hose Bibb	<u> </u>	<u>X</u>	<u> </u>	F.U. = <u> </u>
DECK FOUNTAIN	<u>1</u>	<u>X</u>	<u>1</u>	F.U. = <u>1</u>
WASH SINK	<u>1</u>	<u>X</u>	<u>6</u>	F.U. = <u>6</u>
<u> </u>	<u> </u>	<u>X</u>	<u> </u>	F.U. = <u> </u>

Required Water Lateral Size From
Meter = 1 1/2" φ
(Figured on 100' scale unless
Otherwise specified)

Fire Protection: As shown on Building
Plans FIRE SPRINK BLDG

Total Fixture Units

Date: 12-21-79

By:

WATER ENGINEERING SECTION:

Backflow Prevention Required? Yes No Uncertain

Reasons

Have Plbg. Plans been evaluated against Bldg. Plans? Yes No

Contradictions? Yes No

By: Date:

Fire Protection Required Per Resume Sheet

PERMIT SECTION:

Demand = gpm

Meter Size Required 1 1/2" φ

Cost/Deposit (check one)

Atlas Sheet No.

Location & Size of

Existing Mains

City

Other

By:

Date:

ELECTRICAL PERMIT

Inspection Requests
638-6771

General Information
638-6661

INSPECTION RECORD

For Applicant to Fill In

THREE PHASE SERVICE		RIG CONDUIT		FEES			
AMPS	VOLTS	SIZE	TYPE	IF NOT LISTED BELOW SEE CODE	NO.	EA	FEE
				Residential (R 1 & R 3) sq. ft.			
				Garage, Resid. (M) 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 @			
				Sub Panels 3 @			
				Outlets			
				Fixtures			
				Fixtures, Merc. Quartz, etc.			
				Heater, Not Over 1550 W.			
				Washer			
				Dryer			
				Hot Water Heaters			
				Dishwasher			
				Domestic Range or Oven			
				Disposal			
				Power Actuators - H.P., K.W., or K.V.A. Motors, Transformers, etc.			
				Not Over 3 each			
				Over 3, Not Over 10 each	4		12.00
				Over 10, Not Over 30 each	1		5.00
				Indv. Circuits			
				Time Clock			
				Sign			
				Sign Hoist			
				20 KW RF MACH	1		
				4 KW RF MACH	4		

ADDRESS
12322 MONARCH ST. GARDEN GROVE

LOT NO. BLK. NO. TRACT NO. ELECTRIC PERMIT NO.
110158A

OWNER
Associated Southern PHONE **891-5411**

OWNER'S ADDRESS
12300 MONARCH ST. GARDEN GROVE

NEW BUILDING OR ADDITION AREA EXISTING BUILDING REMODEL AREA PERMITS FOR USE OF BUILDING AND ELECTRICAL NUMBER OF PERMITS

VALIDATION
JUB

ELECTRICAL CONTRACTOR
owner STATE LIC. NO. & TYPE

ADDRESS
same CITY PHONE

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. _____ Expiration Date _____

I certify that the performance of the work for which this permit is issued 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 Section 3700 or his term shall be deemed revoked.

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

PERMIT APPLICANT SIGNATURE _____ DATE _____

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. _____ 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 _____

FINAL **12-16-80**

IDENTIFICATION CODE

UTILITY NOTICED

LAND USE

AUTHORIZED BY BUILDING _____ DATE _____

ISSUANCE **227 17.00**
517 6.00

TOTAL FEES **23.00**

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

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

CITY OF GARDEN GROVE

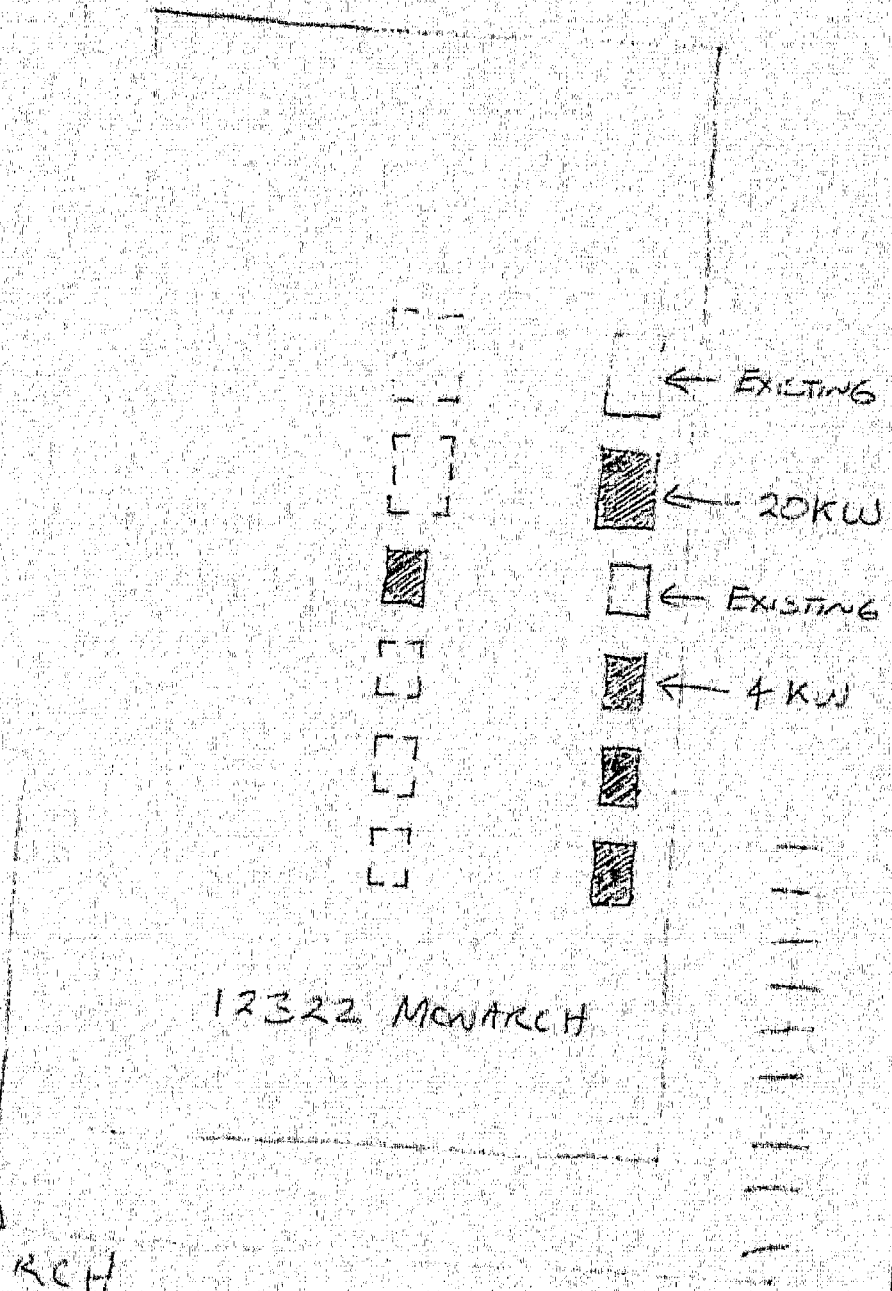
PLOT PLAN

PUBLIC WORKS & DEVELOPMENT 1

OWNER <i>Jim McMillan</i>		JOB ADDRESS <i>12322 MONARCH</i>			PERMIT NO. <i>118155A</i>
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSORS PARCEL NO.	LOT	BLOCK	TRACT
ADDRESS <i>12322 MONARCH</i>		CITY <i>Garden Grove</i>			
DATE		JOB DESCRIPTION			PERMIT VALUE

PLEASE CHECK ONE OR MORE
 New Addition Alteration Repair Move Demolish

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



MONARCH

PLOT PLAN APPROVED BY _____

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

MONARCH

012322

2

STREET NAM

ADDRESS

APT. NO.

CARD NO.

INSPECTION RECORD

FEEES

For Applicant to Fill in

SINGLE PHASE SERVICE	AMPS	VOLTS	RIG. CONDUIT	IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE
PHASE PHASE SERVICE	400	208	RIG. CONDUIT	Residential (R-1 & R-3) sq. ft.			
APPROVAL	DATE	INSPECTOR		Garage, Resid. (M) sq. ft.			
Underground				Service Meter, Single Phase			
Circuit				Service Meter, Three Phase			
Work Restr.				Add'l Meter, Three Phase			
HEAT				Temporary Power Pole			
Parting & Term				Pole, Power Light, etc.			
Notes				Sub-Panels 1 C			
				Sub-Panels 3 C			
				Outlets			
				Fixtures			
				Fixtures, Merc. Quartz, etc.			
				Heater-Not Over 1650 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	1017A	1	3.00
				Over 10, Not Over 30 each			
				Indv. Circuits			
				Time Clock			
				Sign			
				Sign Holdup			
				RF WELDER	2040	1	5.00
				RF WELDER	4801	1	3.00

ADDRESS
12322 MONARCH GARDEN GROVE

LOT NO. BLK NO. TRACT NO. ELECTRIC PERMIT NO.
ELECTRIC PERMIT NO. 117476A

OWNER Jim McMillan
PHONE 891-5411

OWNER'S ADDRESS 2300 MONARCH GARDEN GROVE
CITY

NEW BUILDING YES NO
ALTERATION YES NO

VALIDATION

ELECTRICAL CONTRACTOR OWNER/BUILDER
STATE LIC. NO. & TYPE

ADDRESS **CITY** **PHONE**

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 Law of California.

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

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

PERMIT APPLICANT SIGNATURE _____ **DATE** 10/14/80

BUSINESS TAX CERTIFICATE INFORMATION

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

(PRINT) CONTRACTOR _____ **(PRINT) AUTHORIZED AGENT 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
Employed working for wages only, Section 7053

Other: _____

(PRINT) PROPERTY OWNER (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT _____ **DATE** 10/14/80

ITEM	CODE	FEEES
Plan Retention Fee		
Plan Check		
Permit	3524	11.00
Issuance	3227	6.00
TOTAL FEES		17.00

IDENTIFICATION CODE 12-16-EC TA

BUILDING PERMIT NO. _____ **ELECTRICAL PERMIT NO.** _____

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.

AUTHORIZED BY *JR* **DATE** 10-14-80

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

DATE

INSPECTOR'S NOTES

20

077

11/10

12-8-87 - ⁽¹⁾ INSTALL K.O. SEALS 1 1/2"

FUSED Disconnect + Cutter

(2) STRAP SEAL TITE FLEX

(3) STRAP 1 1/4" E.M.T.

(4) TIGHTEN ALL SEAL-TITE fittings.

(5) INSTALL WIRE SIZE FOR 20 KW WELDER

1124824

PLUMBING PERMIT

INSPECTION RECORD

FEES

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO.	EACH	\$ FEE	ADDRESS		
Sec. Piping			Water Closet (toilet)				12322 MONARCH		
Drain Plumbing			Bath Tub				LOT NO. BLK NO. TRACT NO. PERMIT NO.		
Drain Plumbing			Shower				118354A		
Drain Plumbing			Lavatory (Wash Basin)				OWNER		
Drain Plumbing			Kitchen Sink				WESTERN CONTROLS		
Drain Plumbing			Garbage Disposal				OWNER'S ADDRESS CITY		
Drain Plumbing	1-5-81	MS	Laundry Tub or Tray				12300 MONARCH G.G.		
Drain Plumbing			Water Heater				NEW BUILDING OR EXISTING BUILDING OCCUPANCY USE OF BUILDING AND		
Drain Plumbing			Floor Sink				ADDITION - AREA REMODEL AREA SQ. FT. SQ. FT. OR UNIT		
Drain Plumbing			Floor Drain				VALIDATION		
Drain Plumbing			Dish Washer				PLUMBING CONTRACTOR STATE LIC. NO. & TYPE		
Drain Plumbing			Drinking Fountain				SIMEO PLUMBING INC. 238598 E-34		
Drain Plumbing			Urinal				ADDRESS CITY PHONE		
Drain Plumbing			Gas System - Outlets (4)	1		300	130 S. LEMONT ORANGE 997-2582		
Drain Plumbing			Building Sewer (First 100 ft.)				WORKER'S COMPENSATION REQUIREMENTS		
Drain Plumbing			Building Sewer (Add'l 100 ft.)				State Compensation Insurance Policy No. Expiration Date		
Drain Plumbing			Building Sewer (ea. add'l drain)				<input checked="" 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.		
Drain Plumbing			Rainwater Drain				_____ PERMIT APPLICANT SIGNATURE DATE 12/24/80		
Drain Plumbing			Swimming Pool Piping				BUSINESS TAX CERTIFICATE INFORMATION		
Drain Plumbing			Sink Traps/Receptors				I certify that the following Contractor's License No. and Classification _____ is in full force and effect.		
Drain Plumbing			Automatic Washing Machine				(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE		
Drain Plumbing			Water Softeners				BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE		
Drain Plumbing			Backwash Trap				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:		
Drain Plumbing			Water Lateral				Owner Section 7044 <input type="checkbox"/> Minor work under \$100: Section 7048 <input type="checkbox"/> Employee working for wages only: Section 7053 <input type="checkbox"/>		
Drain Plumbing			Backflow Protective Devices				Other: _____		
Drain Plumbing			Water Piping (ea. 100 ft.)				(PRINT) PROPERTY OWNER (SIGNATURE) PROPERTY OWNER OR AUTHORIZED AGENT DATE		
Drain Plumbing			Lawn Sprinklers (S.F.D. Only)				A FEE MAY BE CHARGED FOR REINSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.		
Drain Plumbing			Lawn Sprinklers (other)				_____ DATE 12/24/80		
Drain Plumbing			Final				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		
Drain Plumbing			UTILITY CO NOTIFIED				IDENTIFICATION CODE ITEM CODE FEES Plan Permit or Fee Plan Check Permit 3028 3 Issuance 3517 6 TOTAL FEES 9		
Drain Plumbing			Permit						
Drain Plumbing			Issuance						
Drain Plumbing			Plan Permit or Fee						
Drain Plumbing			Plan Check						
Drain Plumbing			Permit						
Drain Plumbing			Issuance						
Drain Plumbing			TOTAL FEES						
Drain Plumbing			Authorized by						
Drain Plumbing			Land Use						
Drain Plumbing			Building						
Drain Plumbing			Date						

DATE

INSPECTOR'S NOTES

1029-93

See book by 12270 Marshall Park

1183244

HEATING, VENTILATING, REFRIGERATION & AIR COND. PERMIT

INSPECTION RECORD

FEE

For Applicant to Fill in

APPROVALS	DATE	INSPECTOR	TYPE OF FIXTURE OR ITEM	NO. EA.	\$ FEE
FURNACE			Furnace to & incl. 100M B.T.U.		
FURNACE VENTS			More than 100M & incl. 500M B.T.U.		
GAS PIPING			Installation or Relocation of Susp. Heater		
			Installation or Relocation of Wall Heater		
			Installation or Relocation of Unit Heater	4	70
DUCTS			Installation of Appliance Vent Only		
SINGLE DUCT FAN VENT			Repair, Alteration or Addition to any Heating or Cooling System		
KITCHEN HOOD			Each Range Hood Incl. Duct and Fan		
			Each Vent Fan Connected to a Single Duct		
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		
BOILER OR COMPRESSOR			Absorption System to & incl. 100M B.T.U.		
			Boiler or Compressor to & incl. 15 Hp		
			Absorption System to & incl. 500M B.T.U.		
DECORATIVE APPLIANCE			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.		
			Air Handling Unit to & incl. 10M C.F.M.		
			Air Handling Unit over 10M C.F.M.		
			OTHER		
FINAL	1-5-81	MS			
UTILITY CO. NOTIFIED					
IDENTIFICATION CODE			ITEM	CODE	FEE
			Plan Retention Fee		
			Plan Check		
			Permit Issuance	2079 10517	2000 10
			TOTAL FEES		26
BUILDING PERMIT NO.	ELECTRIC PERMIT NO.		LAND USE	AUTHORIZED BY BUILDING	DATE
				SP	12/5/80

ADDRESS 12322 MONARCH			
LOT NO.	BLK NO.	TRACT NO.	PERMIT NO. 118128A
OWNER WESTERN CONTROLS		PHONE 841-5411	
OWNER'S ADDRESS SAME			
NEW BUILDING OR AUDITION AREA	EXISTING BUILDING REMODEL AREA	OCCUPANCY GROUP	USE OF BUILDING AND OR NUMBER OF UNITS
SG. FT.	SG. FT.		
VALIDATION			
HEATING CONTRACTOR KRY STONE		STATE LIC. NO. & TYPE 249419	
AIR CONDITIONING		C-20	
ADDRESS 7600	CITY GARDEN	PHONE 892-	
ACACIA AVE.	GROVE	3324	
WORKER'S COMPENSATION REQUIREMENTS			
State Compensation WC 401 597 B Expiration Date 7/1/80			
Insurance Policy No. _____			
<input checked="" 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 pursuant to this permit.			
PERMIT APPLICANT SIGNATURE <i>[Signature]</i>			DATE 11-24-80
BUSINESS TAX CERTIFICATE INFORMATION			
I certify that the following Contractor's License No. 249419 and Classification C-20 is in full force and effect.			
KRY STONE AC <i>[Signature]</i>			DATE 11-24-80
(PRINT) CONTRACTOR OR AUTHORIZED AGENT			
100469		12-31-80	
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 \$100: Section 7048 <input type="checkbox"/>	
Employee working for wages only: Section 7053 <input type="checkbox"/>			
Other: _____			
(PRINT) PROPERTY OWNER (SIGNATURE) CONTRACTOR 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.

AIR CONDITIONING • INSTALLATION AND SERVICE



KEYSTONE

A DIVISION OF FERLEA CORP.

AIR CONDITIONING
SHEET METAL
HEATING
VENTILATION

7600 ACACIA AVENUE GARDEN GROVE, CALIFORNIA 92641
17141 534-0990/892-3324

City of Garden Grove
Building Department
City Hall
Garden Grove, Ca.

December 4, 1980

Subject: Permit applications for installation of heating equipment in three buildings; each occupied by Western Controls Co.

We propose to install gas-fired Re-Verber-Ray Radiant heaters (Detroit Radiant Products Co.) model DR-50 in buildings at 12300 Monarch and 12272 Monarch. Each heater will be equipped with a model 1971-8 control system which provides the necessary I.T.D. control required by California Energy Commission Titles 20 and 24. I have examined the specifications, etc. and certify that these units have at least the thermal efficiency required. The units will be suspended in accordance with code and manufacturer's recommendations.

In the shop area of the building at 12322 Monarch we propose to install 4 - 105,000 BTU/Hr. gas-fired suspended unit heaters; Reimor model XL-105. As shown in the specifications the units are rated by A.G.A. using A.N.S.I. Test Procedures.

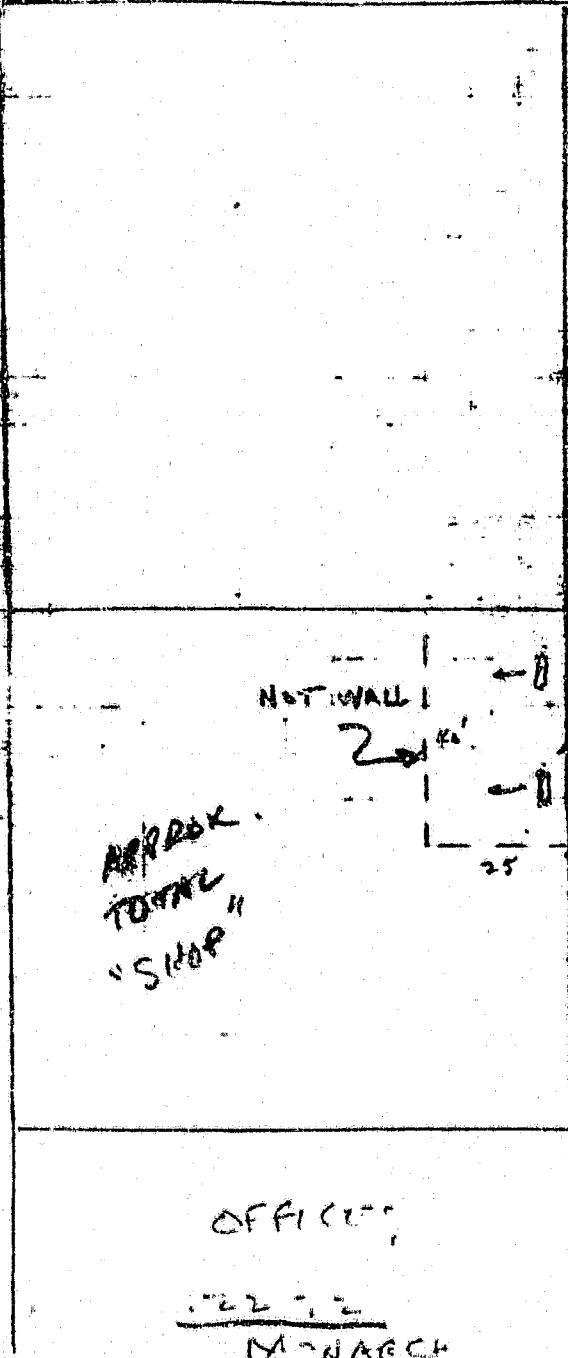
Enclosures:

1. Copies of Reverberay Specifications Sheets.
2. Copies of Peynor Specification Sheets.

H.E. del Castillo



100'



NOT WALL

2' 0"

25'

APPROX.
TOTAL
"SHOP"

OFFICE

12322
MONARCH

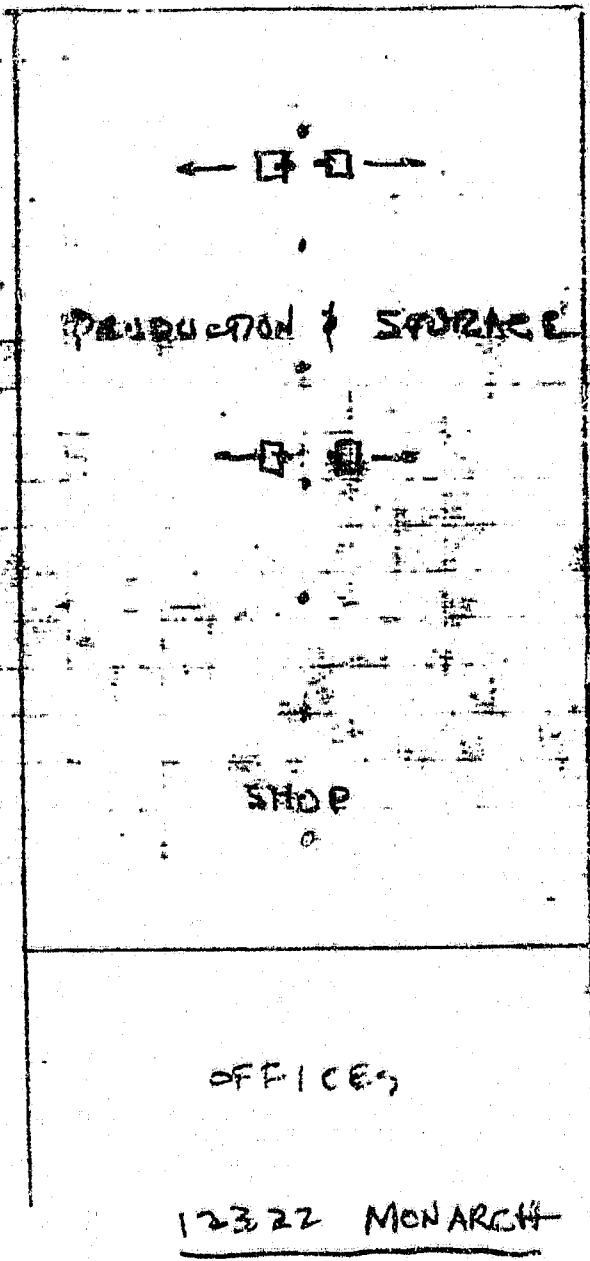
← SHIPPING
& RECV.
AREA

INSTALL 2
RAD. FITS
50 M PER EACH

PRIVATE STREET

INSTALL 4
4-100M PER
UNIT FITS

100'



PRODUCTION & STORAGE

STOP

OFFICES

12322 MONARCH

MONARCH ST.

SUBMITTAL RECORD

JOB _____
 LOCATION _____
 SUBMITTED TO _____
 SUBMITTAL PREPARED BY _____
 APPROVED BY _____
 DATE _____



XL

SPECIFICATION FORM 200A-4

Obsoletes Form 200A-3

Specifications subject to change without notice.

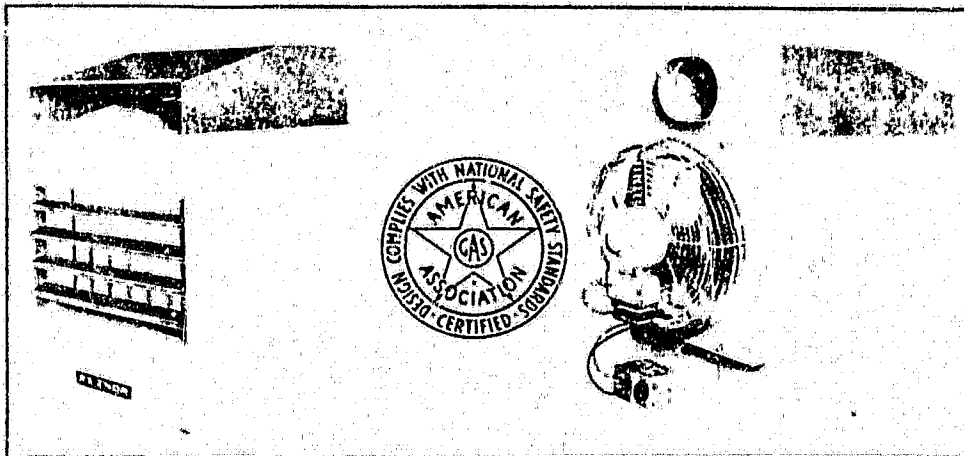
**INDOOR GRAVITY VENTED
 GAS FIRED
 FAN TYPE UNIT HEATERS
 FOR COMMERCIAL — INDUSTRIAL USE**

TRT REZTOR MADE IN CANADA

DESCRIPTION

Reznor Thermocore® XL Series fan type unit heaters are packaged, automatic heating appliances that suspend from the ceiling and deliver heat to the prescribed area as independently controlled units. Units are gravity vented with combustion air inlet at bottom. Sizes are 30,000 through 400,000 BTUH input. Output is 80% of input BTUH. Either natural or propane gas may be specified. Standard heat exchanger is patented venturi design constructed of aluminumized steel. Type E-3 stainless steel (409) heat

exchanger optional on most models. Burners are die formed, aluminumized steel, corrosion-resistant with flared ports and stainless steel ribbon. Standard units are equipped with manual ignition 100% shut-off and are equipped for connection to a single-stage 24 volt thermostat. Baked-on enamel in taupe beige color. Design certified by the American Gas Association under ANSI, Z21.16. For dirty or mildly corrosive atmospheres or negative pressures use Reznor separated combustion series SCA.



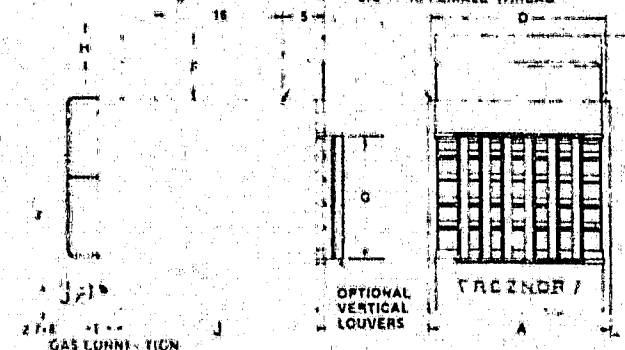
STANDARD EQUIPMENT

- Aluminumized heat exchanger.
- Horizontal directional louvers.
- Fan and motor.
- 120 volt supply line voltage.
- Safety type fan guard.
- Built-in draft diverter.
- Manual ignition, 100% shut-off.
- Hanger terminals 3/8" - 16 female thread.
- Natural gas. Propane at extra cost.
- Size 125-400 burners in pull-out drawer removable from rear of unit. Sizes 30 through 105 removable bottom panel.
- Baked-on enamel - taupe color.
- Gas pressure - natural gas supply pressure must not exceed 1/2 PSI (6 oz. - 14" W.C.). Propane gas supply pressure must not exceed 11" W.C. (6.4 oz.).
- 120 volt fan and limit control.
- 125 through 400 air shutters on propane only. Optional on natural. Sizes 30 through 105 shutters not required for natural or propane.

XL 30 through 400

SUSPENSION POINTS (4)
 3/8 - 16 FEMALE THREAD

NOTE: See and select complete option number from available option table on page 2.



CLEARANCES

All sizes from combustibles — top or above (flue — 6"; sides — 12"; bottom XL 30 through 105 — 12"; bottom XL 125 through 400 — 24"; back — 32", to allow proper return air to fan and to permit removal and inspection of burner

CONTROLS

24 volt controls include 24 volt control transformer, combination valve consisting of automatic gas valve, pilot line filter, pressure regulator (omitted on propane gas), 1/2 PSI to 3.5 W.C., pilot shut-off, manual main shut-off all in one body.

ELECTRIC SUPPLY

DIMENSIONS (Accurate Within Plus or Minus 1/8")

Model	A	B	C	D Hanger C	E	F	G	H	J
XL 30	11-15/16	25	22-7/8	11-1/8	4	5	12-1/8	2-5/8	18-1/8
XL 45-1									
XL 60	14-11/16	25	23-7/8	13-7/8	4	5	12-1/8	2-5/8	18-1/8
XL 75	17-7/16	25	23-7/8	16-5/8	4	5	12-1/8	2-5/8	18-1/8
XL 105	22-15/16	25	25-1/8	22-1/8	4	5	12-1/8	2-5/8	18-1/8
XL 125	17-9/16	35	34-13/16	16-5/16	4-11/16	7-3/4	14-3/4	3-5/8	26-1/8
XL 140									
XL 170	20-5/16	35	36	19-1/16	4-11/16	7-3/4	14-3/4	3-5/8	26-1/8
XL 200	23-1/16	35	36-13/16	21-13/16	4-11/16	7-3/4	14-3/4	3-5/8	26-1/8
XL 225	25-13/16	37	37-36-13/16	29-9/16	4-7/8	9-3/4	14-3/4	5	28-1/8
XL 250	28-9/16	37	36-13/16	27-5/16	4-7/8	9-3/4	14-3/4	5	28-1/8
XL 275	34-1/16	37	34-13/16	32-13/16	4-7/8	9-3/4	14-3/4	5	26-1/8
XL 350	39-9/16	37	36	38-5/16	4-7/8	9-3/4	14-3/4	5	26-1/8
XL 400	45-1/16	37	36-13/16	43-13/16	4-7/8	9-3/4	14-3/4	5	26-1/8

SPECIFICATION DATA

906

	30,000	45,000	60,000	75,000	105,000	125,000	140,000	170,000	200,000	225,000	250,000	300,000	350,000	400,000
BTUH Input	24,000	36,000	48,000	60,000	84,000	100,000	112,000	136,000	160,000	180,000	200,000	240,000	280,000	320,000
BTUH Output	1/30	1/30	20MPH	1/4	1/4	1/20	1/8	1/8	1/6	1/6	1/4	2 6"	3 5"	3 5"
Motor HP (115V)	1 2	1 2	1 3	1 6	2 55	2 55	2 6	2 6	3 5	3 5	5 0	5 0	5 0	5 0
Motor Amps (FL 115V)	1500	1500	1050	1050	1050	1050	223	223	350	350	420	435	550	700
Motor RPM	75	75	88	133	215	215	2	2	2	2	2	2	2	2
Total Watts (Maximum)	3	3	3	3	3	3	1320	1480	1800	2100	2380	2650	3170	3700
Valve Amps	500	600	613	635	687	880	987	1017	1030	1035	1030	1023	1016	1012
CFM (70")	570	680	613	635	687	880	987	1017	1030	1035	1030	1023	1016	1012
Velocity	30	30	33	43	56	60	64	70	77	87	90	90	100	116
Throw at 8 Feet**	9	9	12	14	14	14	14	16	16	18	18	18	18	18
Fan Diameter	4 Rd	4 Rd	4 Rd	5 Ov	6 Ov	7 Ov	7 Ov	8 Ov	8 Ov	8 Rd	8 Rd	9 Rd	10 Ov	10 Ov
Vent Size	54	58	65	85	105	142	148	163	178	193	218	239	284	328
Approx Net Wt Lbs	60	64	77	99	119	157	163	178	193	218	239	284	328	381
Approx Ship Wt Lbs	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2
††Gas Connections	Nat	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2
(Not Supply Line)	L P	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2	1/2

**See Thru-Floor Coverage Chart for standard units and for units equipped with optional nozzles (125-400).
 † Each Motor
 ††Single stage. All two stage are 3/4"."
 †††Amperes shown cover a wide variety of designs and represent maximum anticipated full load amps. For final load adjustment refer to rating plate on motor.
 (1) Amperes shown cover a wide variety of designs and represent maximum anticipated full load amps. For final load adjustment refer to rating plate on motor.
 (2) A.G.A. ratings are for altitudes to 2000 feet. Above 2000 feet de-rate by orifice change 4% for each 1000 feet above sea level.
 (3) Minimum mounting heights for garages and airplane hangers can be found in NFPA 88. All other installations may be less than 8 feet if desired.

XL AVAILABLE OPTIONS MUST BE ORDERED BY COMPLETE OPTION NO.	SIZES															
	30	45-1	60	75	105	125	140	170	200	225	250	300	350	400		
*Stainless Steel Heat Exchanger E-3 (409)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
*Stainless Burners	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
*Burner Air Shutters for Natural Gas	3K12	3K12	3K9	3K10	3K11	3K1	3K1	3K1	3K1	3K1	3K1	3K1	3K1	3K1	3K1	3K1
Vertical Louvers Use on Sid Unit or D T Nozzles	60A	60A	60A	60A	60A	60A	60A	60A	60A	60A	60A	60A	60A	60A	60A	60A
Manual Shut-Off Valve and Union	5D	5D	5D	5D	5D	5D	5D	5D	5D	5D	5D	5D	5D	5D	5D	5D
Manual Summer/Winter Switch	50L	50L	50L	50L	50L	50L	50L	50L	50L	50L	50L	50L	50L	50L	50L	50L
*Remote Summer/Winter Switch Thermostat	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2	15C-2
Vent (115/24) Add Option 14	14A2	14A2	14A2	14A3	14A9	14A6	14A6	14A6	14A7	14A7	14A7	14A7	14A7	14A7	14A7	14A7
Vent (230/24) Add Option 14	6K17	6K17	6K17	6K17	6K17	6K13	6K13	6K13	6K13	6K13	6K13	6K13	6K13	6K13	6K13	6K13
Vent Adapter (Use With Option 15)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
†G60 Intermittent Pilot System, Natural Gas	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
†G60 Intermittent Pilot System, Natural 100% Shut-Off	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
†G60 Intermittent Pilot System, L P 100% Shut-Off	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
*Two-Stage Manifold, Natural Gas (Add Option 13)	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12	12
*Two-Stage Manifold, L P Gas (Add Option 13)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Thermostat, TC99, Single Stage Heating	153	153	153	153	153	153	153	153	153	153	153	153	153	153	153	153
Two-Stage Thermostat (Use with Option 8)	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Thermostat Guard	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
*230 Volt Alternate (1/6 HP Motor - Modified Fan Guard - 230 Volt Transformer)	116B	116B	116B	116B	116B	116B	116B	116B	116B	116B	116B	116B	116B	116B	116B	116B
**200/209V KVA Trans. to Operate Heater Only	114H	114H	114H	114H	114H	114H	114H	114H	114H	114H	114H	114H	114H	114H	114H	114H
**200/240V 440/480V } KVA Trans. to Operate Heater Only	115B	115B	115B	115B	115B	115B	115B	115B	115B	115B	115B	115B	115B	115B	115B	115B
**277V KVA Trans. to Operate Heater Only	116C	116C	116C	116C	116C	116C	116C	116C	116C	116C	116C	116C	116C	116C	116C	116C
**200/209V Kva to Operate Heater and Optional Field Installed Venter	114J	114J	114J	114J	114J	114J	114J	114J	114J	114J	114J	114J	114J	114J	114J	114J
**204/240V 440/480V } KVA Trans. to Operate Heater and Optional Field Installed Venter	115C	115C	115C	115C	115C	115C	115C	115C	115C	115C	115C	115C	115C	115C	115C	115C
**277V KVA Trans. to Operate Heater and Optional Field Installed Venter	74A	74A	74A	74A	74A	74A	74A	74A	74A	74A	74A	74A	74A	74A	74A	74A
Nat. Gas Service Regulator Max Inlet 5 PSI, Outlet 7" W.C.	74D	74D	74D	74D	74D	74D	74D	74D	74D	74D	74D	74D	74D	74D	74D	74D
Prop. Gas Service Regulator Max Inlet 5 PSI, Outlet 11" W.C.	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
30" Downturn Nozzle	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1	32XL-1
60" Downturn Nozzle	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Pipe Hanger Kit	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10
Hanger Adapter Kit, Provides 1" IPS 2 Point Suspension	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10	98x10
Air Recirculation Kit, Circulates Stratified Warm Ceiling Air Includes Relay in 2x4 Box and Two-Stage Thermostat	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
††Optional 6PAK Systems	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
See Page 4																

* Factory installed, all other options shipped separately.
 † Factory installed spark ignited pilot system with electronic flame supervision.
 ††Includes G60 ignition system on unit, with venter, venter adapter, 30" nozzle with vertical louvers, air recirculation kit and S/W switch shipped separately.
 **KVA transformer field installed. Not to be installed on unit. 114J, 115C, 116C = .75 KVA; 114K, 115D, 116D = 1.0 KVA; 114M, 115E, 116E = 1.5 KVA; 116B = 50 KVA
 ††Special TC99AV103A103 with switch on thermostat for summer operation of fan only. Includes relay mounted in 4x4 box. Shipped separately.

INSPECTION RECORD

For Applicant to Fill in

P.C. #

OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.	
		FRONT	LEFT	RIGHT	REAR
USE ZONE					
FIRE ZONE	Eav Prot. Setbacks				
PLANNING ACTION				PLANS 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					
R/W DEDICATION					
FEES AND BONDS					
ST. BOND	REV. CODE	AMOUNT			
WATER BOND					
WATER ASSMT. FEE (ACRG.)					
WATER ASSMT. FEE (FT.)					
PARKWAY TREE FEE					
PARK & REC. FEE (DIST.)					
DRAIN ASSMT. FEE (DIST.)					
PLAN RETENTION FEE	529	9	10		
BLDG. PLAN CHECK	520	44	88		
BLDG. PERMIT FEE	226	66	81		
ISSUANCE	535	6	00		
VALUATION	\$ 11,700.00	TOTAL FEES	126	79	
AUTHORIZED BY		DATE	5-6-80		

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 <i>SPRINKLERS</i>	<i>6-9-80</i>	<i>118</i>
UTILITY RELEASE		
IDENTIFICATION CODE		

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. *WCL 142 09548 010* Expiration Date *1-1-81*

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

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

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

Mike Lupo PERMIT APPLICANT SIGNATURE DATE *4-25-80*

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. *259736* and Classification *C-10* is in full force and effect.

(PRINT) CONTRACTOR *Mike Lupo* DATE *4-25-80*
(SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT

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

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

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

ADDRESS
12322 MONARCH STREET

LOT NO. BLK NO. TRACT NO. PERMIT NO.
AP 131-341-64

OWNER **ASSOCIATED SOUTHERN INVESTMENT** 15125A

MAILING ADDRESS CITY ZIP
7495 ANACONDA AVE G.G. 92641

ARCH
 ENGR.

MAILING ADDRESS CITY ZIP

TEL. NO. STATE LIC. NO. & TYPE

VALIDATION 05/06/80 #0237
 BDGPER 66.81
 PLANCK 44.88
 NO PGN 9.10

CONTRACTOR **ISSNCE ADVANCE FIRE PROTECTION** 126.79
 Mailing Address CITY ZIP
1451 W. LINDEE RD. 90631

TEL. NO. STATE LIC. NO.
526-2231 259936

PRESENT BLDG. USE PROPOSED BLDG. USE

DESCRIBE WORK TO BE DONE **INSTALLATION OF AUTOMATIC FIRE SPRINKLERS**

NEW ADD'N ALTER REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) **16,740** 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

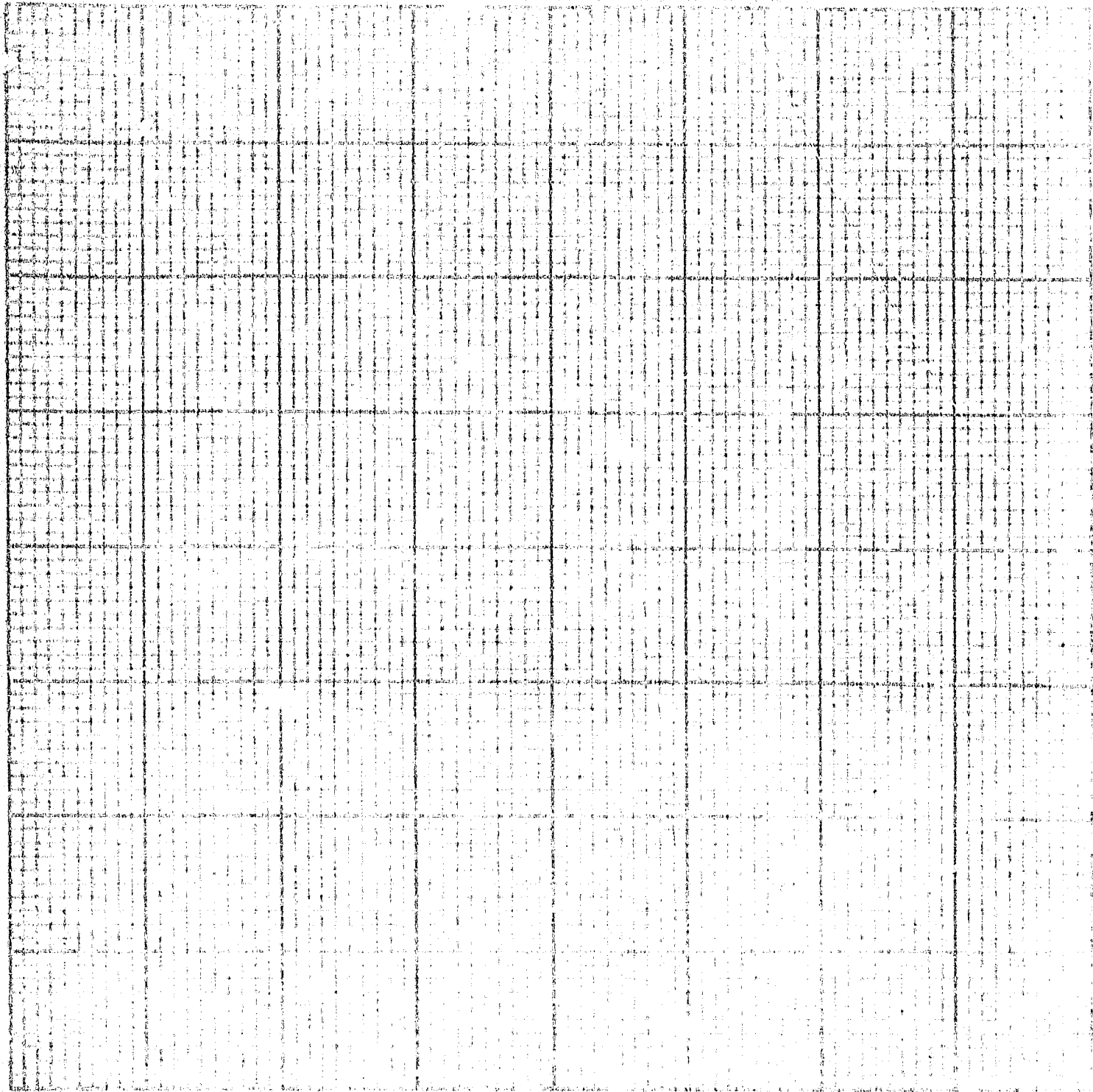
MOVING CONTRACTOR

ADDRESS

I, INSPECTOR

OWNER <i>ASSOC. SO. INVESTMENT</i>		JOB ADDRESS <i>12322 MONARCH</i>		PERMIT NO. <i>115125A</i>
NAME OF CONSTRUCTION LENDER & BRANCH <i>INVESTMENT</i>		ASSESSORS PARCEL NO.	LOT	BLOCK
		<i>131-341-6A</i>		
PLEASE CHECK ONE OR MORE				
<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish				
ADDRESS		DATE	JOB DESCRIPTION	PERMIT VALUE
		<i>5-6-80</i>	<i>FIRE SPRINKLERS</i>	<i>11700.00</i>

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.



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

PLOT PLAN APPROVED BY _____

MONARCH

012322

0003

STREET NAME

ADDRESS

APT. NO.

CARD NO.

BUILDING PERMIT

Inspection Requests
638-6771

General Information
638-6661

INSPECTION RECORD

For Applicant to Fill in

OCC. FAMILY	TYPE	OCC. LOAD		FIRE SPRINK.	
		FRONT	LEFT	RIGHT	REAR
USE NONE					
FIRE NONE	Exp. Proj. Setbacks	N/A			

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
CONCRETE FLOOR REINFORCING		
ROOF SHTG		
ROUGH FRAME	11/16/80	
INSULATION, ENERGY		
LATH OR DRYWALL	1/27/81	
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		

ADDRESS: 12322 MONARCH GARDEN GROVE

LOT NO. 131-341-64

OWNER: JIM McMULLAN

MAILING ADDRESS: 12300 MONARCH GARDEN GROVE 92641

TEL. NO. 891-5411

STATE LIC. NO. & TYPE

PLANNING ACTION: FILED PLANS DATE

LAND USE APPROVED BY: [Signature]

REMARKS:

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

REQ'D	PROVIDED

ST. BOND	REV. CODE	AMOUNT
WATER BOND		
WATER ASSMT. FEE (ACHG.)		
WATER ASSMT. FEE (FT.)		
PARKWAY TREE FEE		
PARK & REC. FEE (DIST.)		
GRAV. ASSMT. FEE (DIST.)		
PLAN RETENTION FEE		
BLDG PLAN CHECK	3520	374
BLDG PERMIT FEE	3226	1150
INSURANCE	3517	600
VALUATION	\$ 360.00	
TOTAL FEES		2124

LAND USE FINAL	
FINAL	10/15/81
UTILITY RELEASE	
IDENTIFICATION CODE	

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. _____ Expiration Date _____

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

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

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

Permit Applicant Signature: [Signature] DATE: 10/14/80

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: [Signature] DATE: _____

BUSINESS TAX CERTIFICATE (10)

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 Employed working for wages only; Section 7063

Other: _____

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

CONTRACTOR: OWNER/BOILER

MAILING ADDRESS: _____ CITY: _____ ZIP: _____

VEL. NO. _____ STATE LIC. NO. _____

PRESENT BLDG. USE: IND

PROPOSED BLDG. USE: _____

DESCRIBE WORK TO BE DONE: PARTITION WALLS FOR INSPECTION ROOM

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: _____

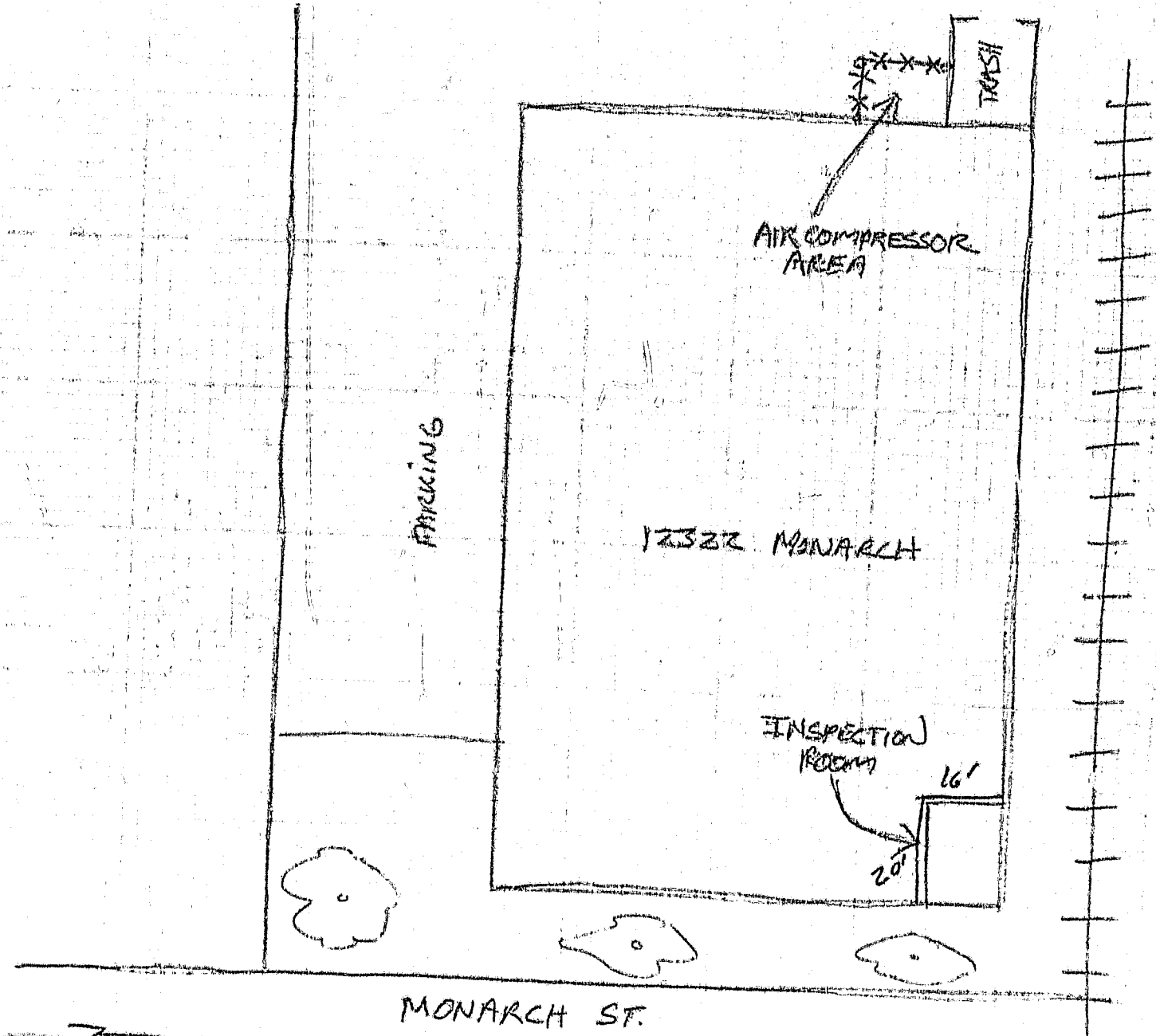
AUTHORIZED BY: [Signature] DATE: 10-14-80

I, INSPECTOR

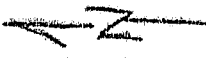
OWNER Juan McMullan		JOB ADDRESS 12322 MONARCH		PERMIT NO. 117475A
NAME OF CONSTRUCTION LEADER & BRANCH		ASSESSOR'S PARCEL NO. LOT 131-341-64	BLOCK	TRACT
ADDRESS		CITY		
PLEASE CHECK ONE OR MORE				
<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Move <input type="checkbox"/> Demolish				
DATE 10/14/80		JOB DESCRIPTION PARTITION WALLS FOR INSPECTION ROOM		PERMIT VALUE 360.00

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.

Room



MONARCH ST.



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

By _____

PLOT PLAN APPROVED BY _____

BUILDING PERMIT

Inspection Requests
638-6771

General Information
638 6661

INSPECTION RECORD

For Applicant to Fill in

PG #

COCCU PANCY **B2** TYPE **WALL** (LOAD) FIRE SPRINK. APPROVAL DATE INSPECTOR

USE ZONE **F4D** FRONT LEFT RIGHT REAR FOUNDATION & LOCATION

FIRE ZONE [Law Proj] [Sotricks] CONCRETE FLOOR REINFORCING ROOF SHTG

PLANNING ACTION **RENEW** [1/10/83] PLANS DATE **10/4/83** ROUGH FRAME INSULATION ENERGY LATH OR DRYWALL PLAS. BROWN CT SOUND INSULATION SMOKE DETECTOR PARKING LANDSCAPING

LAND USE APPROVED BY **[Signature]** DATE **10/4/83**

REMARKS: **Supervisor let to permit #1375784**

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

PARCEL MAP [] REG'D [] PROVIDED []

R/W DEDICATION []

LAND USE FINAL [] FINAL [] UTILITY RELEASE [] IDENTIFICATION CODE []

FEES AND BONDS		REV. CODE	AMOUNT
ST. BOND			
WATER BOND			
WATER ASSMT FEE (A.C.H.C.)			
WATER ASSMT FEE (FT 1)			
PARKWAY TREE FEE			
PARK & REC FEE (DIST)			
DRAIN ASSMT FEE (DIST)			
PLAN RETENTION FEE			
BLDG. PLAN CHECK			
BLDG. PERMIT FEE			
ISSUANCE			
VALUATION 1600.00			
TOTAL FEES			3.1

AUTHORIZED BY [Signature] DATE **10/4/83**

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

ADDRESS **12322 MONARCH ST**

LOT NO. **3** BLOCK NO. **3** TRACT NO. **134** PERMIT NO. **132001A**

OWNER **Assoc. Southern** TEL. NO. **898-8716**

MAILING ADDRESS **7495 ANACONDA G.G. 92641** CITY **PARAMOUNT** ZIP **92623**

ARCH ENGR **ROBERT P. ZAMBONI**

MAILING ADDRESS **8008 JACKSON ST** CITY **PARAMOUNT** STATE LIC. NO. & TYPE **92123**

TEL. NO. **213) 634-5057**

VALIDATION **1H3211A10-04*83** E-PER **27.00** CASH **27.00**

CONTRACTOR **MARSHALL CONSTRUCTION CO INC**

MAILING ADDRESS **2615 W. MAGNOLIA BLVD** CITY **BURBANK** STATE LIC. NO. **91505**

TEL. NO. **213) 849-4051**

PRESENT BLDG USE **WAREHOUSE OFFICES** PROPOSED BLDG USE **same**

DESCRIBE WORK TO BE DONE **CATWALKS ABOVE 1st FLOOR CEILING**

NEW ADD'N ALTER REPAIR DEMOLISH

FLOOR AREA (SQ. FT.) **0** NO. OF STORIES **2** NO. OF DWELLING UNITS **0**

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

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. **001593-83-046** Expiration Date **1/1/84**

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

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

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

Monterey Warren 10/4/83

PERMIT APPLICANT SIGNATURE DATE

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. **269245** and Classification **1st** is in full force and effect.

MARSHALL CONSTRUCTION CO INC **Monterey Warren** 10/4/83

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

BUSINESS TAX CERTIFICATE NO. **269245** **EXPIRATION DATE** **10/4/83**

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

RELOCATION

PRESENT BLDG. ADDRESS

MOVING CONTRACTOR

ADDRESS

CITY OF GARDEN GROVE

PLOT PLAN

PUBLIC WORKS & DEVELOPMENT 1

OWNER <i>Assoc. Southern</i>	100 ADDRESS <i>12322 Monarch St</i>	PERMIT NO. <i>131678A</i>	
NAME OF CONSTRUCTION LENDER & BRANCH <i>NONE</i>	ASSESSORS PARCEL NO. <i>PM-33-134</i>	OF <i>3</i>	BLOCK TRACT
ADDRESS	CITY		
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			
DATE <i>10/4/93</i>	JOB DESCRIPTION <i>CATWALKS ABOVE T BIR COLINES</i>		PERMIT VALUE <i>1600.00</i>

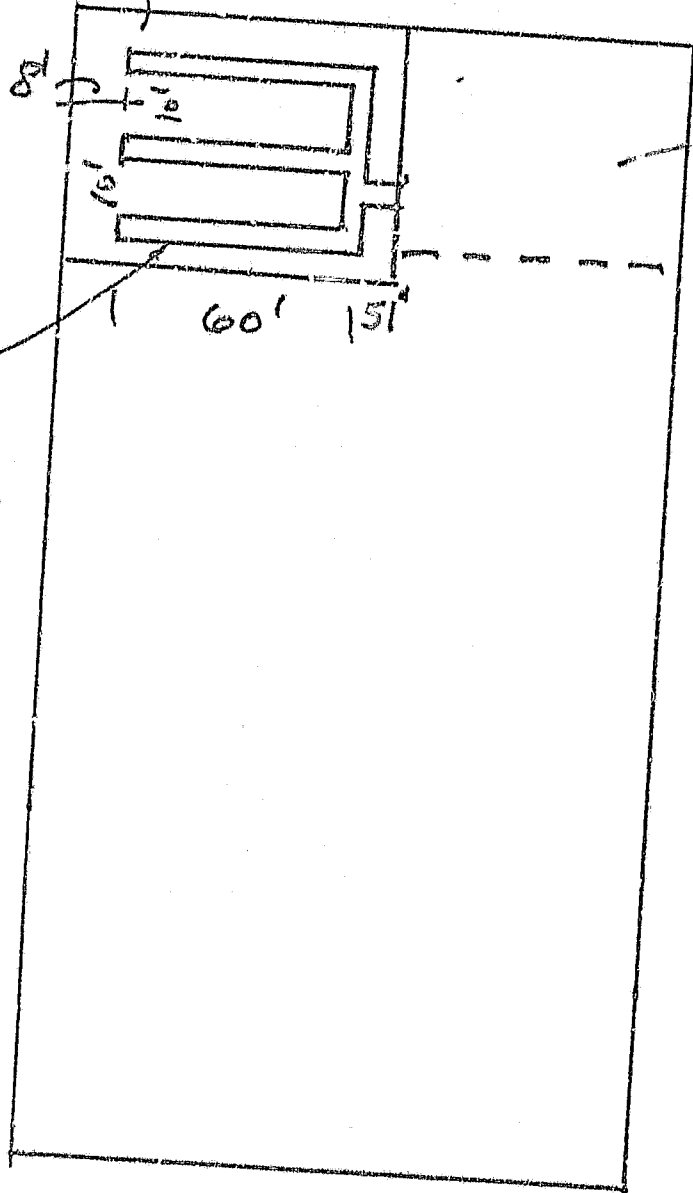
SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS.

12322 Monarch.

New offices.

NORTH.

See permit # 131678A.



EXIST. OFFICES

NEW CATWALK AT 10' 6\"

PLOT PLAN APPROVED BY _____

#1 Building Insp./#2 Assessor/#3 Permitted/#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 type="checkbox"/> OH		
AMPS	VOLTS	RIG. CONDUIT
THREE PHASE SERVICE SIZE <input type="checkbox"/> 3 Wire <input type="checkbox"/> 4 Wire <input type="checkbox"/> UG <input type="checkbox"/> OH		
AMPS	VOLTS	RIG. CONDUIT

APPROVAL	DATE	INSPECTOR
Underground		
Conduit		
Wiring - Rough	11-8-83	JD
Hoater		
Fixtures & Trim		
Motors		
Sub Panel	11-8-83	JD
P. Bar	11-15-83	JD
Ufer		
Service		
FINAL	11-15-83	JD
Utility Notified		

IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE
Residential (R-1 & R-3) sq. ft.			
Garage, Resid. (M) 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 ϕ			
Sub-Panels 3 ϕ 200 Amp	1	550	550
Outlets	40	0.55	24.50
Fixtures	50	0.50	25.00
Fixtures, Merc. Quartz, etc.			
Heater--Not Over 1650 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			
Over 10, Not Over 30 each			
Indv. Circuits			
Time Clock			
Sign			
Sign Hookup			

ADDRESS 12322 MONARCH ST	
LOT NO. BLK NO. TRACT NO.	ELECTRIC PERMIT NO. 132228A
OWNER BELL INDUSTRIES	
OWNER'S ADDRESS 11812 SAN VICENTE BLVD LA.	
NEW BUILDING OR ADDITION - AREA SQ. FT.	EXISTING BUILDING REMODEL AREA SQ. FT.
VALIDATION E-PER 55.00 1H6629A10-24*83 CHECK 55.00	
ELECTRICAL CONTRACTOR SUNBURST Electric Inc	STATE LIC. NO. & TYPE 388533 CIO
ADDRESS 12771 WESTERN AVE G.G.	PHONE 891.3304
WORKER'S COMPENSATION REQUIREMENTS	
State Compensation Insurance Policy No. 1/84 <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 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. JD Bane 11/17/83 PERMIT APPLICANT SIGNATURE DATE	
BUSINESS TAX CERTIFICATE INFORMATION I certify that the following Contractor's License No. 388533 and Classification CIO is in full force and effect. Sunburst JD Bane 11/17/83 (PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE	
BUSINESS TAX CERTIFICATE NO. _____ EXPIRATION DATE _____ I certify that I am exempt from Section 7931.5 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 \$100: 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.	

IDENTIFICATION CODE

ITEM	CODE	FEES
Plan Retention Fee		
Plan Check		
Permit		55.00
Issuance supplement to pmt #	132222 A	55.00
TOTAL FEES		55.00

BUILDING PERMIT NO. SIGN PERMIT NO. VENT. HEAT, AIR COND. PERMIT NO.

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



GARDEN GROVE

CITY OF GARDEN GROVE, CALIFORNIA

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

DOCUMENTATION FORM

BUILDING LIGHTING COMPLIANCE

Documented by _____

Project Title Santa Ana Plaza

Date _____

Location 12650 S. HANCOCK

Checked by _____

Project Designer A. E. Nide

Date _____

Room No.	Room Sq. Ft.	RCR	Task Areas	Note Appl.	Sq. Ft. /Occ.	No. Occ.	Sq. Ft. /Task	Total Sq. Ft.	Watts /Sq. Ft.	Allotted Watts	Design Watts
1	100	4.2	LOBBY	⌆	100	1	100	100	5	500	
4	156	4.2			100	1	100	100	1.5	150	
9A	182	4.2	GEN OFFICE		100	2	100	200	1.5	300	640
5	192	4.2	OFFICE		100	2	100	200	5.0	1000	300
30	1932	1.2	SALES OFFICE		100	19	100	1900	5.0	9500	6560
31	378	2.9	LUNCH RM								192
32	292 1/2	3.6	SALES RM		100	3	100	300	4.0	1200	600

ELECTRICAL PERMIT

Inspection Requests
638-6771

General Information
638-6661

INSPECTION RECORD

FEES

For Applicant to Fill in

SINGLE PHASE SERVICE SIZE <input type="checkbox"/> UG <input type="checkbox"/> OH		AMPS	VOLTS	RIG. CONDUIT
THREE PHASE SERVICE SIZE <input type="checkbox"/> 3 Wire <input type="checkbox"/> 4 Wire <input type="checkbox"/> UG <input type="checkbox"/> OH		AMPS	VOLTS	RIG. CONDUIT
APPROVAL	DATE	INSPECTOR		
Underground				
Conduit				
Wiring - Rough	10-18-83	[Signature]		
Heater				
Fixtures & Trim				
Motors				
Ufer				
Service				
FINAL	11-14-83	[Signature]		
Utility Notified				

IF NOT LISTED BELOW SEE CODE	NO.	EA.	FEE
Residential (R-1 & R-3) sq. ft.			
Garage, Resid. (M) 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 φ			
Sub-Panels 3 φ			
Outlets	6		3
Fixtures	2		1
Fixtures, Merc. Quartz, etc.			
Heater—Not Over 1650 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			
Over 10, Not Over 30 each			
Indv. Circuits			
Time Clock			
Sign			
Sign Hookup			

ITEM	CODE	FEE
Plan Retention Fee		
Plan Check		
Permit Issuance	3027	4
	3517	10
TOTAL FEES		14

ADDRESS
12322 MONARCH ST

LOT NO. BLK NO. TRACT NO. ELECTRIC PERMIT NO.
132222A

OWNER
BELL INDUSTRIES

OWNER'S ADDRESS
1812 SAN VICENTE BLVD

CITY
LA

NEW BUILDING OR ADDITION - AREA
1812

EXISTING BUILDING REMODEL AREA
LA

SG. FT. SQ. FT. OCCUPANCY GROUP USE OF BUILDING AND OR NUMBER OF UNITS

VALIDATION
E-PER **4.00**
ISS **10.00**
CHECK **14.00**

ISS **1#5454A10-18*83**

ELECTRICAL CONTRACTOR
SUNBURST Electric

STATE LIC. NO. & TYPE
388533 C10

ADDRESS
12771 WESTERN AVE

CITY
G.C.

PHONE
8913304

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. _____ Expiration Date **1/84**

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 in connection with this permit.

Permit Applicant Signature: **[Signature]** DATE: **10/17/83**

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. **388533** and Classification **C10** is in full force and effect.

Contractor: **SUNBURST** (PRINT) CONTRACTOR

Signature: **[Signature]** (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT

Date: **10/17/83** (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 704C

Employer working for wages only: Section 7053

Other: _____

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

DATE _____

BUILDING PERMIT NO. _____ SIGN PERMIT NO. _____ VENT. HEAT, AIR COND. PERMIT NO. _____

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

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

HEATING, VENTILATING,
REFRIGERATION & AIR COND. PERMIT

Inspection Requests
638-6771

General Information
632-6631

INSPECTION RECORD

H10

For Applicant to Fill in

ROVALS	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			
DUCTS			Installation of Appliance Vent Only			
SINGLE DUCT FAN VENT			Repair, Alteration or Addition to any Heating or Cooling System	2		13.00
			Incidental Gas Piping			
KITCHEN HOOD			Each Range Hood Incl. Duct and Fan			
			Each Vent Fan Connected to a Single Duct			
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
BOILER OR COMPRESSOR			Absorption System to & Incl. 100M B.T.U.			
			Boiler or Compressor to & Incl. 15 Hp.			
DECORATIVE APPLIANCE			Absorption System to & Incl. 500M B.T.U.			
			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.			
			Air Handling Unit to & Incl. 10M C.F.M.			
			Air Handling Unit over 10M C.F.M.			
			OTHER:			
FINAL	11/15/83	Approved				
UTILITY CO. NOTIFIED						
IDENTIFICATION CODE			ITEM	CODE		FEES
			Plan Retention Fee			
			Plan Check			
			Permit	3229		19.50
			Issuance	32577		10.00
			TOTAL FEES			\$29.50
BUILDING PERMIT NO.		ELECTRIC PERMIT NO.				
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.			LAND USE	AUTHORIZED BY	BUILDING	DATE
				JTR		11/15/83

ADDRESS
Bell Industries,
12322 Monarch St. Garden Grove

LOT NO. BLK NO. TRACT NO. PERMIT NO.
132576A

OWNER
Bell Industries

OWNER'S ADDRESS
11812 San Vicente Blvd. Los Angeles, CA 90049

NEW BUILDING OR ADDITION - AREA SQ. FT. EXISTING BUILDING REMODEL AREA SQ. FT. OCCUPANCY GROUP USE OF BUILDING AREA OR NUMBER OF UNITS
XX

VALIDATION
H-FER 19.50
ISS 10.00
1#9408A11-10-83 CHECK 29.50

HEATING CONTRACTOR
General Conditioning Company
STATE LIC. NO. & TYPE
C20
408617

ADDRESS
1340 N. Dynamics St. Anaheim Ste. K
CITY PHONE
714
524 1450

WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. 71664402 Expiration Date 1-1-84

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 note 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 in compliance with this permit.

PERMIT APPLICANT SIGNATURE
DATE

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. 400817 and Classification C20 is in full force and effect.

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

BUSINESS TAX CERTIFICATE NO. EXPIRATION DATE

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

Other:

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

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

BUILDING PERMIT

P.C. #

INSPECTION RECORD

For Applicant to Fill in

OCGU-PANTRY B2 TYPE III N	OCCL. LOAD	FIRE SPRINK. YES		
USE ZONE P4D	FRONT	LEFT	RIGHT	REAR
FIRE ZONE	Eav Proj.	Setbacks	NO CHANGE	
PLANNING ACTION NONE	PROVIDED PLANS		DATE 9.22.83	
LAND USE APPROVED BY JPR	REMARKS:			
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.	DATE	INITIAL	
PARCEL MAP	REQ'D	PROVIDED		
R/W DEDICATION				
FEES AND BONDS				
ST. BOND	REV. CODE	AMOUNT		
WATER BOND				
WATER ASSMT. FEE (ACRG.)				
WATER ASSM. FEE (FT.)				
PARKWAY TREE FEE				
PARK & REC. FEE (DIST.)				
DRAIN ASSMT. FEE (DIST.)				
PLAN RETENTION FEE	3542	2.00		
BLDG. PLAN CHECK	3527	54.74		
BLDG. PERMIT FEE	3226	81.17		
ISSUANCE	3517	10.00		
VALUATION 10000.00	TOTAL FEES	147.91		
AUTHORIZED BY JPR	DATE 9.22.83			

APPROVAL	DATE	INSPECTOR
FOUNDATION & LOCATION		
CONCRETE FLOOR		
REINFORCING		
ROOF SHTG		
ROUGH FRAME	10/19/83	
INSULATION, ENERGY	10/21/83	
LATH OR DRYWALL		
PLAS. BROWN CT.		
SOUND INSULATION		
SMOKE DETECTOR		
PARKING		
LANDSCAPING		
LAND USE FINAL		
FINAL	11/16/83	
UTILITY RELEASE		

IDENTIFICATION CODE

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WORKER'S COMPENSATION REQUIREMENTS

State Compensation Insurance Policy No. **001593-83-046** Expiration Date **1/84**

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.

Marshall Construction **9/22/83**

BUSINESS TAX CERTIFICATE INFORMATION

I certify that the following Contractor's License No. **269245** and Classification **B-1** is in full force and effect.

Marshall Construction **9/22/83**

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

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

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

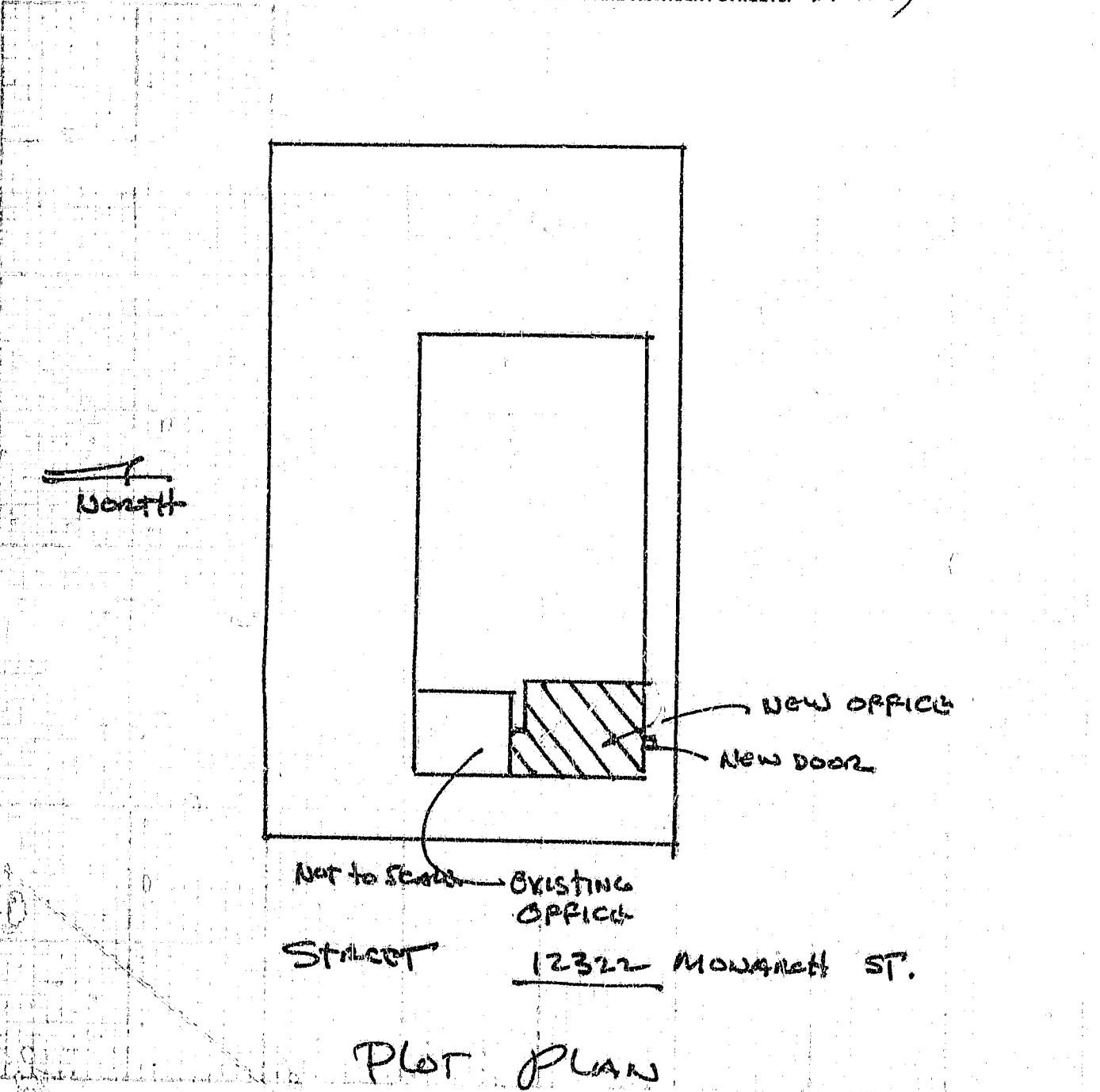
Other: _____

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

ADDRESS 12322 MONARCH ST		
LOT NO.	BLK NO.	TRACT NO.
PARCEL MAP BOOK 3	134	131078A
OWNER Assoc. SOUTHERN	TEL. NO. 898-8716	
MAILING ADDRESS 7495 ANACONDA GG 92641		
SEARCH ENGR. ROBERT P. ZAMBONI		
MAILING ADDRESS 8008 JACKSON ST PARAMOUNT CA. 90723		
TEL. NO. (213) 634-5057	STATE LIC. NO. & TYPE	
VALIDATION		
	PL RET	2.00
	B-PLAN	54.74
	B-PER	81.17
	ISS	10.00
CONTRACTOR #1556A 9-22-83 CHECK 147.91		
MARSHALL CONSTRUCTION Co INC		
MAILING ADDRESS 2615 W. MAGNOLIA BLVD		
CITY SUNTE 107 DUEBANK CA 91505		
TEL. NO. (213) 849-4051	STATE LIC. NO. 269245	
PRESENT BLDG. USE SMUR	PROPOSED BLDG. USE SMUR	
DESCRIBE WORK TO BE DONE ADD OFFICES ON FIRST FLOOR. (NEW WALLS, T-BAR CEILING, ALTER STAIRS, NEW EXTERIOR DOOR)		
NEW <input type="checkbox"/> ADD'N <input type="checkbox"/> ALTER <input checked="" type="checkbox"/> REPAIR <input type="checkbox"/> DEMOLISH <input type="checkbox"/>		
FLOOR AREA (SQ. FT.)	NO. OF STORIES 2	NO. OF DWELLING UNITS 0
If work is not started within 180 days from date of issue or if abandoned for more than 180 days, this permit will be null and void.		
A FEE MAY BE CHARGED FOR RE-INSPECTION DUE TO NEGLIGENCE, INCOMPLETE WORK, OR FAILURE TO MAKE CORRECTIONS.		
RELOCATION		
PRESENT BLDG. ADDRESS		
MOVING CONTRACTOR		
ADDRESS		

OWNER <i>Assoc. So.</i>		JOB ADDRESS <i>12322 Monarch St</i>		PERMIT NO. <i>13167</i>
NAME OF CONSTRUCTION LENDER & BRANCH <i>NONE</i>		ASSESSORS PARCEL NO. <i>131-66-05</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>9-22-83</i>	JOB DESCRIPTION <i>NEW OFFICE ADD WALLS, CEILING, NEW DOOR, ALTER.</i>	PERMIT VALUE <i>\$10000.00</i>

SHOW NORTH ARROW, PROPERTY LINES AND ADJACENT STREETS. *STAIRS*



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

By _____

PLOT PLAN APPROVED BY _____

BUILDING PERMIT

Inspection Requests
638-6771

General Information
638-6661

P.C. #

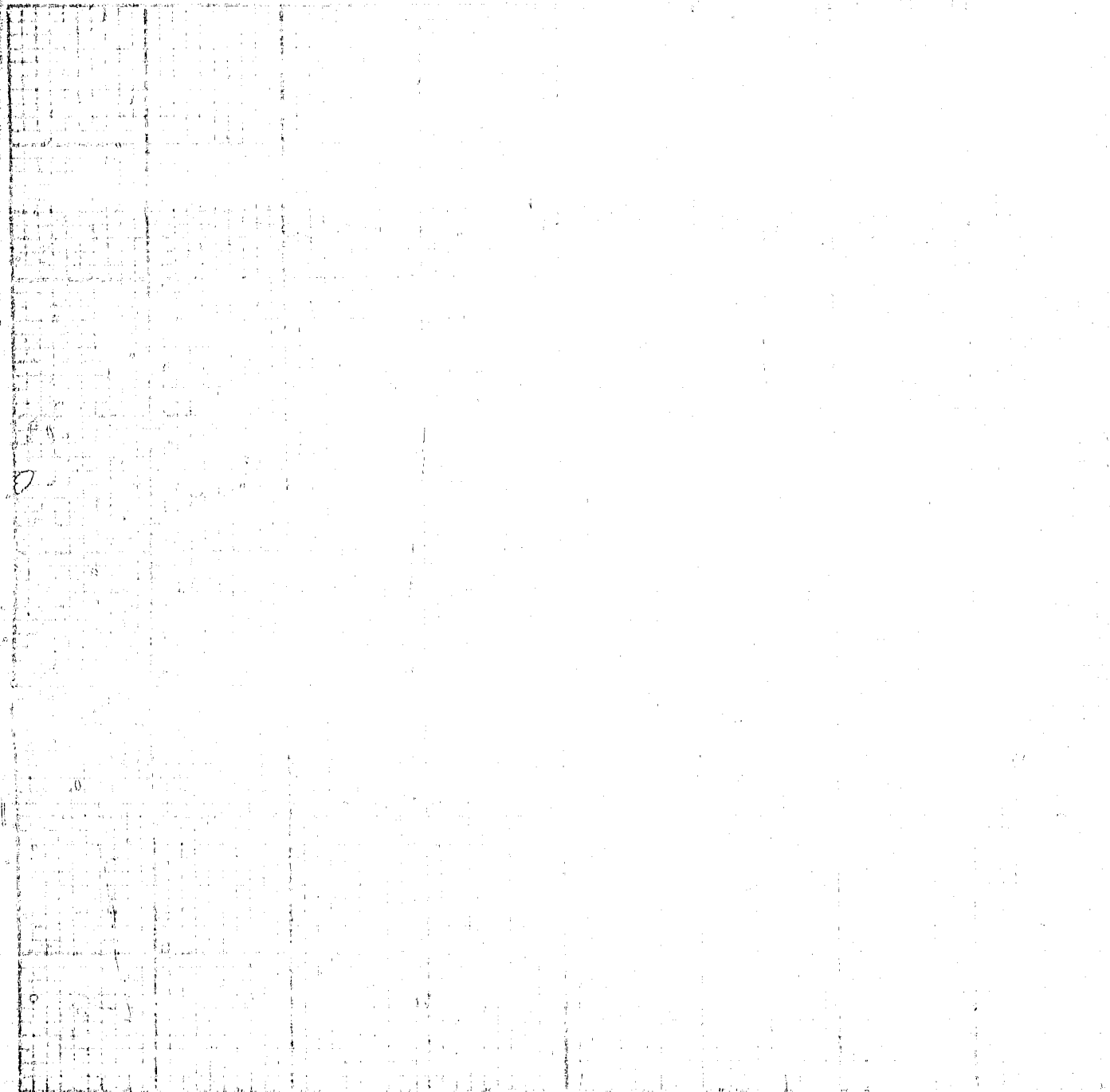
INSPECTION RECORD

For Applicant to Fill in

OCCUPANCY	TYPE	OCC. LOAD		FIRE SPRINK.		APPROVAL	DATE	INSPECTOR	ADDRESS
USE ZONE		FRONT	LEFT	RIGHT	REAR	FOUNDATION & LOCATION			12322 MONARCH
FIRE ZONE	Evap Proj. Setbacks					CONCRETE FLOOR			LOT NO. BLK NO. TRACT NO. PERMIT NO. 132146A
PLANNING ACTION						REINFORCING			OWNER G.G. INDUSTRIAL BLDG #35
LAND USE APPROVED BY					PLANS	ROOF SHTG			TEL. NO.
REMARKS:					DATE	ROUGH FRAME			MAILING ADDRESS 12322 MONARCH, G.G.
						INSULATION, ENERGY	NEGATIVE		CITY ZIP
						LATH OR DRYWALL	NOV 18 1983		MAILING ADDRESS
						PLAS. BROWN CT.			CITY ZIP
						SOUND INSULATION			TEL. NO.
						SMOKE DETECTOR	Pub. Works & Devel. Dept.		STATE LIC. NO. & TYPE
						PARKING			VALIDATION
						LANDSCAPING			PL RET 2.00
G.G. SANT. DIS. FEE REQ'D.	O.C. SANT. DIS. FEE REQ'D.			DATE	INITIAL				B-PLAN 26.18
									B-PER 39.00
									ISS 10.00
PARCEL MAP				REQ'D	PROVIDED				CONTRACTOR 144845A10-13283 CHECK 77.18
R/W DEDICATION									ADVANCE FIRE PROTECTION
FEES AND BONDS						LAND USE FINAL			MAILING ADDRESS
	REV. CODE	AMOUNT				FINAL	11-9-83	G. Halburdt	CITY ZIP
ST. BOND						UTILITY RELEASE			1451 W. LAMBERT LA HABRA 90631
WATER BOND						IDENTIFICATION CODE			
WATER ASSMT. FEE (ACRG.)						WORKER'S COMPENSATION REQUIREMENTS			
WATER ASSMT. FEE (FT.)						State Compensation Insurance Policy No. _____ Expiration Date _____			
PARKWAY TREE FEE						<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.			
PARK & REC. FEE (DIST.)						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.			
DRAIN ASSMT. FEE (DIST.)						<input 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.			
PLAN RETENTION FEE	3542	2.00				MANUEL CUENCA 10-6-83			
BLDG. PLAN CHECK	3527	26.18				PERMIT APPLICANT SIGNATURE			
BLDG. PERMIT FEE	3226	39.00				BUSINESS TAX CERTIFICATE INFORMATION			
ISSUANCE	3517	10.00				I certify that the following Contractor's License No. _____ and Classification _____ in full force and effect.			
VALUATION	\$ 2400.00	TOTAL FEES	77.18			ADVANCE FIRE MANUEL CUENCA 10-6-83			
AUTHORIZED BY				DATE		(PRINT) CONTRACTOR (SIGNATURE) CONTRACTOR OR AUTHORIZED AGENT DATE			
INSPECTOR				10-13-83		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 \$100: 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			
						RELOCATION			
						PRESENT BLDG. ADDRESS			
						MOVING CONTRACTOR			
						ADDRESS			

OWNER G.G. INDUSTRIAL BLDG #35		JOB ADDRESS 12322 MONARCH		PERMIT NO. 132146A
NAME OF CONSTRUCTION LENDER & BRANCH		ASSESSORS PARCEL NO. 131-661-05	LOT	BLOCK TRACT
		PLEASE CHECK ONE OR MORE		
		<input 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 10-13-83	JOB DESCRIPTION FIRE SPRINKLERS	PERMIT VALUE \$2400

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.

PLOT PLAN APPROVED BY _____

By _____