

City of Pasadena
Building and Development Services Division
CERTIFICATE OF INSPECTION OF GAS PIPING

THIS IS TO CERTIFY that the building located at
2296 1/2 - 1st St.
has been inspected and that the gas piping has been approved for
connection to the gas supply.

Plumbing Inspector _____

Date _____

Building Inspector [Signature]

Date 4/3/90

Project No. 122635

White—Dept. Yellow—So. Calif. Gas Co.

Address _____ Date _____
TYPE OF SERVICE Light _____ Power _____ 1 Ph. _____ 3 Ph. _____ Set _____
Residence _____ Commercial _____ METER Reset _____

IDENTIFICATION _____
Apartment or House Number _____

CITY OF PASADENA--Building & Code Enforcement
Certificate of Approval of Electrical Installation

This is to certify that the building located at the above address has been inspected and that the electrical installation has been approved for connection to the electrical supply.

_____ Date _____
Electrical Inspector Permit No. _____
Approved: _____ Date _____
Building Inspector Electrical Contractor _____

To: BUILDING DEPARTMENT

JOB ADDRESS: 2796 HERITAGE RD
JOB NAME: Rose Townhomes #55
CONTRACTOR: KAUFMAN & BROAD
(714) 944-9003

Req'd: 60 Days
NEW: 1
OWNER: Kaufman & Broad
(714) 944-9003

Main Service from MH Sta Pullbox Lat Sta 2+53 Map 2-2-1478
1ø 120/240 Volts Service 1-3" conduit. 106 feet of 1/0 cable

MAINS: (1) 100 Amps 15 S 4 clip

RATE: D

Electrician to install a 3" ABS conduit from P/L due South appx. 35 ft.
to a combination pullbox and meter assembly located on the West wall
at the Northwest corner of house.

New meter load- 11Kts.-Disposal - 3 1/2 ton AC.

REG TAG needed.

Charges: \$748.99 to owner.

EJO 201-10 07/13/89 CS

CITY OF PASADENA

100 N. GARFIELD AVE. - RM. 103 PASADENA, CA. 91109-7215

CODE ENFORCEMENT DIVISION
PHONE: (818) 405-4200

MAILING ADDRESS

P.O. BOX 7115 - PASADENA, CA. 91109-7215

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.☐ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)
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 Worker's Compensation Laws

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031, 5) Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9) (commencing with Section 7000) of Division 3 of the Business and Professions Code or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work; and the structure is not intended or offered for sale (Sec. 7044) Business and Professions Code; The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale.☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044) Business and Professions Code; The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such project with a contractor(s) licensed pursuant to the Contractor's License Law.☐ I am exempt under Sec. _____ B & P.C. for this reason _____

Date _____

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

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 building construction, and hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes.

Signature of Applicant or Agent

Date

JOB ADDRESS 2796 HERITAGE DR		RECEIPT NO. 0045822	DATE 01/25/90	PROJECT 00123635
USE OF PERMIT 1. ST. TOWNH. (1692 SF) W/GARAGE (409 SF) PLAN C & PLUMBING FIXT.				
OWNER CAUFMAN & BROAD DEVELOPMENT		TRACT NAME TRACT 45347		
ADDRESS 1602 INLAND EMPIRE BL C110		MAP 45347-00		
CITY ONTARIO	STATE CA	ZIP CODE 91764	PHONE 714-944-9003	LOT # S-1
APPLICANT CAUFMAN & BROAD DEVELOPMENT		ZONING FSB S-1 RSB MOD CENS. TR 442		
CONTRACTOR ELECTRIC INC.		ELECTRICAL Per \$194.50		
ADDRESS 3092 BRONCO				
CITY JORDO	STATE CA	ZIP CODE 91760	PHONE 714-235-1030	
LICENSES 36467B C10				
ARCHITECT/ENGINEER JODDLEY, MICHAEL LLOYD				
ADDRESS 16 DUANE ST				
CITY LUTINE	STATE CA	ZIP CODE 92220	PHONE 714-551-4330	
COUNTER APP.		PAID BY CHECK	FEES: \$194.50	

ELECTRICAL		ELECTRICAL		TOTAL FEE	194.50
				Permit Fee	175.00
				Processing Fee	19.50
				Misc Fee	2.50
1. SMC 100-400AMP		1. COOKING UNITS		2. UNIT FIXTURES	23.50
2. ELE. FIXTURE		3. MTR. 1 1/2 HP			148.00

ORIGINAL

BUILDING INSPECTIONS	DATE	INSP.
(1) SETBACK		
(2) FOOTING & FORMS		
(3) STEEL		
(4) PROGRESS		
(5) BOND BEAM		
(6) ROOF DECK		
(7) FRAMING		
(8) INSULATION		
(9) SPEC. INSPECTION		
(10) ASSEMBLY		
(11) FIREPLACE		
(12) EXTERIOR LATH		
(13) DRY WALL		
(14) FINAL GRAD/LAND		
(15) FINAL BUILDING CORRECTIONS		

PLUMBING INSPECTIONS	DATE	INSP.
(16) SEWER/GROUND LINE		
(17) ROUGH PLUMBING		
(18) ROUGH GAS PIPING		
(19) FIXTURE		
(20) SEWAGE DISPOSAL		
(21) SEWER		
(22) WATER HEATER		
(23) PROGRESS		
(24) WATER SERVICE		
(25) FLOOR DRAIN SCUP		
(26) FINAL PLUMBING		

ELECTRICAL INSPECTIONS CONT.	DATE	INSP.
(27) FINAL ELECTRIC		

MECHANICAL INSPECTIONS	DATE	INSP.
(28) VENT SYSTEM		
(29) PLENUM & DUCT		
(30) GAS TEST		
(31) FURNACE		
(32) SAVE FUEL		
(33) INLETS-OUTLETS		
(34) COMBUSTION AIR		
(35) COMPRESSOR		
(36) ROUGH HVAC		
(37) FIVE DAMPER		
(38) SMOKE DETECTOR		
(39) HOOD		
(40) PROGRESS		
(41) FINAL MECHANICAL		

CITY/STATE SPECIAL INSPECTIONS	DATE	INSP.
(42) FINAL PROTECTION		
(43) FIRE PREVENTION		
(44) ELEVATOR		
(45) RADIATION		
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(100) COT. DATA		

CITY OF PASADENA

100 N. GARFIELD AVE. - RM. 103 PASADENA, CA. 91109-7215

CODE ENFORCEMENT DIVISION

PHONE: (818) 405-4200

MAILING ADDRESS

P.O. BOX 7115 — PASADENA, CA. 91109-7215

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I hereby affirm that I have a certificate of consent to self insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 5800, Lab. C.).

Policy No. _____ Company _____

☐ Certified copy is hereby furnished.☒ Certified copy is filed with the city building inspection department.

Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number _____ Lic. Class _____

Contractor _____ Date _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

Lic. or Reg. No. _____ Date _____

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☐ I, as owner of the property, or my employee with wages as their sole compensation, will do the work; and the structure is not intended or offered for sale (Sec. 7044) Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale.

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044) Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law.

☐ I am exempt under Sec. _____ B. & P.C. for this reason _____

Date _____ Owner _____

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

I certify that I have read this application and state that the above information is correct, agree to comply with all city ordinances and state laws relating to building construction, and hereby authorize representatives of the city to act upon the above-mentioned property for the city's purposes.

Signature of Applicant or Agent _____

JOB ADDRESS 2296 HERITAGE DR		RECEIPT NO. 0046078	DATE 01/31/90	PROJECT 00123634
USE OF PERMIT 2 ST. TOWNH. (1697 SF) W/GARAGE (409 SF) PLAN C & PL. F. EXT. & ME				
OWNER KAUFMAN & BROAD DEVELOPMENT				
ADDRESS 3402 INLAND EMPIRE BLVD C110				
CITY ONTARIO		STATE CA	ZIP CODE 91764	PHONE 714-944-9003
APPLICANT KAUFMAN & BROAD DEVELOPMENT				
CONTRACTOR LOTSHAW AIR CONDITIONING				
ADDRESS 1177 ARDMORE ST				
CITY CANYON CREST HEIGHTS		STATE CA	ZIP CODE 92507	PHONE 714-781-6513
LICENSES 420822 C20				
ARCHITECT/ENGINEER WOODLEY, MICHAEL LLOYD				
ADDRESS 16 DUANE ST				
CITY IRVINE		STATE CA	ZIP CODE 92720	PHONE 714-551-4330
COUNTER APP.		PAID BY CHECK	FEES: \$56.50	

MECHANICAL	MECHANICAL	TOTAL FEE	\$56.50
		Permit Fee	38.00
		Processing Fee	18.50
1 PERM - 1000 BTU	1 CHG 3 - 15 HP		36.00

ORIGINAL

BUILDING INSPECTIONS	DATE	INSP.
(1) SETBACK		
(2) FOOTING & FORMS		
(3) STEEL		
(4) PROGRESS		
(5) BOND BEAM		
(6) ROOF DECK		
(7) FRAMING		
(8) INSULATION		
(9) SPEC. INSPECTION		
(10) ASSEMBLY		
(11) FIREPLACE		
(12) EXTERIOR LATH		
(13) DRY WALL		
(14) FINAL GRAD/LAND		

(15) FINAL BUILDING

CORRECTIONS:

PLUMBING INSPECTIONS	DATE	INSP.
(16) SEWER/GROUND LINE		
(17) ROUGH PLUMBING		
(18) ROUGH GAS PIPING		
(19) FIXTURE		
(20) SEWAGE DISPOSAL		
(21) SEWER		
(22) WATER HEATER		
(23) PROGRESS		
(24) WATER SERVICE		
(25) ROOF DRAIN SCUP		

(26) FINAL PLUMBING

CORRECTIONS:

ELECTRICAL INSPECTIONS	DATE	INSP.
(27) POWER POLE TEMP		
(28) UNDERGROUND		
(29) CONDUIT		
(30) ROUGH ELECTRIC		
(31) WIRING		
(32) GROUNDING WIRE		
(33) BONDING		
(34) FIXTURES		
(35) SERVICE		
(36) PROGRESS		

CONTINUED IN NEXT COLUMN

ELECTRICAL INSPECTIONS-CONT.	DATE	INSP.
(37) FINAL ELECTRIC		

CORRECTIONS:

MECHANICAL INSPECTIONS	DATE	INSP.
(38) VENT SYSTEM		
(39) PLENUM & DUCT	2/6/90	198
(40) GAS TEST		
(41) FURNACE		
(42) SAVE FUEL		
(43) INLETS-OUTLETS		
(44) COMBUSTION AIR		
(45) COMPRESSOR		
(46) ROUGH HVAC		
(47) FIRE DAMPER		
(48) SMOKE DETECTOR		
(49) HOOD		
(50) PROGRESS		

(51) FINAL MECHANICAL

CORRECTIONS:

OCCUPANCY/SPECIAL INSPECTIONS	DATE	INSP.
(52) FINAL INSPECTION		
(53) FIRE PREVENT		
(54) OCCUPANCY/TEMP		
(55) REQUESTED		
(56) OCCUPANCY/FINAL		
(57) OCCUPANCY/OTHER		
(58) COMPLAINT/ZONE		
(59) COMPLAINT/BLDG.		
(60) COMPLAINT/OTHER		

CORRECTIONS-ADDITIONAL COMMENTS

CITY OF PASADENA

100 N. GARFIELD AVE. - RM. 103 PASADENA, CA. 91109-7215

CODE ENFORCEMENT DIVISION

PHONE: (818) 405-4200

MAILING ADDRESS

P.O. BOX 7115 - PASADENA, CA. 91109-7215

WORKER'S COMPENSATION DECLARATION

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Date _____ Applicant _____

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Date 5/5/89 Applicant Michael Lloyd

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number _____ Lic. Class _____

Contractor _____ Date _____

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Lic. or Reg. No. _____ Date _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5) Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9) (commencing with Section 7000) of Division 3 of the Business and Professions Code or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work; and the structure is not intended or offered for sale (Sec. 7044) Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale.

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☐ I am exempt under Sec. _____ of P.C. for this reason _____

Date _____ Owner _____

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____

Lender's Address _____

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 building construction, and hereby authorize representation of this city to enter upon the above-mentioned premises for inspection purposes.

Signature of Applicant Michael Lloyd Date 5/5/89

Signature of Applicant

JOB ADDRESS 2226 HERITAGE DR		RECEIPT NO. 0038242	DATE 05/02/89	PROJECT 00123635
USE OF PERMIT 2-4 STORY TOWNHOUSE (1697 SF) WITH GARAGE (409 SF) PLAN C				
OWNER KAUFMAN & BROAD DEVELOPMENT		TRACT NAME TRAIL 45347		
ADDRESS 3602 INLAND EMPIRE BLVD 110		MAP 125347-00	LOT# 155	ZONE
CITY ONTARIO	STATE CA	ZIP CODE 91764	PHONE 944-9003	FSB S-1
APPLICANT KAUFMAN & BROAD DEVELOPMENT		BUILDING \$705.14		
CONTRACTOR KAUFMAN & BROAD DEVELOPMENT				
ADDRESS 3602 INLAND EMPIRE BLVD 110				
CITY ONTARIO	STATE CA	ZIP CODE 91764	PHONE 944-9003	
LICENSES				
ARCHITECT/ENGINEER WOODLEY, MICHAEL LLOYD				
ADDRESS 16 DUANE ST				
CITY IRVINE	STATE CA	ZIP CODE 92720	PHONE 944-551-4330	COUNTER APP. PAID BY check
		FEES: \$2,106.65		

Construction Fee	11,495.00
5% M. L. P. Fee	16.51
BUILDING	TOTAL FEES \$705.14
Current Valuation	687.64
Processing Fee	17.50
Building Fee	687.64

ORIGINAL

BUILDING INSPECTIONS	DATE	INSP.
(1) SETBACK	11-3-81	
(2) FOOTING & FORMS	11-3-81	182
(3) STEEL	11-3-81	
(4) PROGRESS		
(5) BOND BEAM		
(6) ROOF DECK <i>Leathery</i>	1/6/90	173
(7) FRAMING	2/6/90	175
(8) INSULATION		
(9) SPEC. INSPECTION		
(10) ASSEMBLY		
(11) FIREPLACE	2/6/90	
(12) EXTERIOR LATH	2/8/90	178
(13) DRY WALL	2/8/90	179
(14) FINAL GRAD/LAND	4/5	
(15) FINAL BUILDING	4/5/90	180

CORRECTIONS:

PLUMBING INSPECTIONS	DATE	INSP.
(16) SEWER / GROUND LINE	11-3-81	412
(17) ROUGH PLUMBING		
(18) ROUGH GAS PIPING		
(19) FIXTURE		
(20) SEWAGE DISPOSAL		
(21) SEWER		
(22) WATER HEATER		
(23) PROGRESS		
(24) WATER SERVICE		
(25) ROOF DRAIN SCUP		
(26) FINAL PLUMBING		

ELECTRICAL INSPECTIONS	DATE	INSP.
(27) POWER POLE TEMP		
(28) UNDERGROUND		
(29) CONDUIT		
(30) ROUGH ELECTRIC		
(31) WIRING		
(32) GROUNDING WIRE		
(33) BONDING		
(34) FIXTURES		
(35) SERVICE		
(36) PROGRESS		

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ELECTRICAL INSPECTIONS - CONT.	DATE	INSP.
(37) FINAL ELECTRIC		

CORRECTIONS:

MECHANICAL INSPECTIONS	DATE	INSP.
(38) VENT SYSTEM		
(39) PLENUM & DUCT		
(40) GAS TEST		
(41) FURNACE		
(42) SAVE FUEL		
(43) INLETS-OUTLETS		
(44) COMBUSTION AIR		
(45) COMPRESSOR		
(46) ROUGH HVAC		
(47) FIRE DAMPER		
(48) SMOKE DETECTOR		
(49) HOOD		
(50) PROGRESS		

(51) FINAL MECHANICAL

CORRECTIONS:

OCCUPANCY - SPECIAL INSPECTIONS	DATE	INSP.
(52) FINAL INSPECTION		
(53) FIRE PREVENT		
(54) OCCUPANCY TEMP		
(55) REQUESTED		
(56) OCCUPANCY/FINAL		
(57) OCCUPANCY/OTHER		
(58) COMPLAINT ZONE		
(59) COMPLAINT BUG		
(60) COMPLAINT OTHER		

CITY OF PASADENA

100 N. GARFIELD AVE. - RM. 103 PASADENA, CA 91109-7215

CODE ENFORCEMENT DIVISION
PHONE: (818) 405-4200

MAILING ADDRESS:

P.O. BOX 7115 PASADENA, CA 91109-7215

WORKERS COMPENSATION DECLARATION

I hereby affirm that I have a certificate of coverage for workers compensation insurance, or a certificate of Workers Compensation Insurance, or a certified copy thereof (Sec. 3800, Sub. C).

Policy No. _____ Company _____

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Date _____ Applicant _____

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Date _____ Applicant _____

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License Number _____ Lic. Class _____

Contractor _____ Date _____

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OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason: (Sec. 7031.5) Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9) (commencing with Section 7000) of Division 3 of the Business and Professions Code or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500).

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044) Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he did not build or improve for the purpose of sale.☐ I, as owner of the property, am exclusively contracting with licensed contractor to construct the project (Sec. 7044) Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law.☐ I am exempt under Sec. _____ B & P.C. for this reason _____

Date _____ Owner _____

CONSTRUCTION LENDING AGENCY

I hereby affirm that I am a construction lending agency for the performance of the work for which this permit is issued (Sec. 3529, Civ. C.).

Lender's Name _____

Lender's Address _____

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 building construction. I hereby authorize representatives of this city to enter upon the above-noted property for inspection purposes.

Signature of Applicant or Agent _____

Date _____

JOB ADDRESS 10744 HERITAGE DR		RECEIPT NO. 0043356	DATE 11.02.94	PROJECT 00123635
USE OF PERMIT 2 ST. TOWNHRS. (1600 SF) W/DRAPAGE (400 SF) PLUMBING FIXT.				
OWNER KAUFMAN & BROAD DEVELOPMENT				
ADDRESS 3612 INLAND EMPIRE BL C110				
CITY ONTARIO	STATE CA	ZIP CODE 91764	PHONE 914-944-9003	
APPLICANT KAUFMAN & BROAD DEVELOPMENT		TRACT NAME TRACT 45347		
CONTRACTOR PREMIER PLUMBING CO		MAP 140347-00		
ADDRESS 2259 HAMMER AVE		LOT #		
CITY NORCO	STATE CA	ZIP CODE 91760	PHONE 914-421-1800	ZONE
LICENSES 451501 C3c		FSB S-1 S-2 RSH MOD CENS TR		
ARCHITECT/ENGINEER MICHAEL J. MICHAEL LLOYD		PLUMBING Per \$133.50		
ADDRESS 14 DUNN ST		GAS SYSTEM Per \$29.00		
CITY IRVINE	STATE CA	ZIP CODE 92614	PHONE 949-261-4400	
		COUNTER A/P.	PAID BY CHECK	FEES \$162.50

BUILDING INSPECTIONS	DATE	INSP.
(1) SETBACK		
(2) FOOTING & FORMS		
(3) STEEL		
(4) PROGRESS		
(5) BOND BEAM		
(6) ROOF DECK		
(7) FRAMING		
(8) INSULATION		
(9) SPEC. INSPECTION		
(10) ASSEMBLY		
(11) FIREPLACE		
(12) EXTERIOR LATH		
(13) DRY WALL		
(14) FINAL GRAD/LAND		
(15) FINAL BUILDING		

CORRECTIONS:

PLUMBING INSPECTIONS	DATE	INSP.
(16) SEWER/GROUND LINE		
(17) ROUGH PLUMBING	2/6/89	03
(18) ROUGH GAS PIPING	2/6/89	03
(19) FIXTURE		
(20) SEWAGE DISPOSAL		
(21) SEWER		
(22) WATER HEATER		
(23) PROGRESS		
(24) WATER SERVICE		
(25) ROOF DRAIN SCUP		

(26) FINAL PLUMBING

4/8/90 03

CORRECTIONS:

ELECTRICAL INSPECTIONS	DATE	INSP.
(27) POWER POLE TEMP		
(28) UNDERGROUND		
(29) CONDUIT		
(30) ROUGH ELECTRIC		
(31) WIRING		
(32) GROUNDING WIRE		
(33) BONDING		
(34) FIXTURES		
(35) SERVICE		
(36) PROGRESS		

CONTINUED IN NEXT COLUMN

ELECTRICAL INSPECTIONS-CONT.	DATE	INSP.
(37) FINAL ELECTRIC		

CORRECTIONS:

MECHANICAL INSPECTIONS	DATE	INSP.
(38) VENT SYSTEM		
(39) PLENUM & DUCT		
(40) GAS TEST		
(41) FURNACE		
(42) SAVE FUEL		
(43) INLETS-OUTLETS		
(44) COMBUSTION AIR		
(45) COMPRESSOR		
(46) ROUGH HVAC		
(47) FIRE DAMPER		
(48) SMOKE DETECTOR		
(49) HOOD		
(50) PROGRESS		
(51) FINAL MECHANICAL		

CORRECTIONS:

OCCUPANCY/SPECIAL INSPECTIONS	DATE	INSP.
(52) FINAL INSPECTION		
(53) FIRE PREVENT		
(54) OCCUPANCY/TEMP		
(55) REQUESTED		
(56) OCCUPANCY/FINAL		
(57) OCCUPANCY/OTHER		
(58) COMPLAINT/ZONE		
(59) COMPLAINT/BLDG.		
(60) COMPLAINT/OTHER		

CORRECTIONS/ADDITIONAL COMMENTS:

New permit

Summary

Details

Location

Additional Info

Workflow

Linked Records

Holds

Contacts (8)

Fees (1)

Bonds

Activities (4)

* Permit Type
Building Residential (1 or 2 units)

* Work Class
General

* Status
Finaled

Project
123635 (123635)

* District
4

Assigned To

Application Date
05/02/1989

Issue Date
05/02/1989

Expiration Date
07/21/1990

Last Inspection Date
04/03/1990

Finaled Date
04/03/1990

Description
BU - 2 ST. TOWNHS. (1697 SF) W/GARAGE (409 SF) PLA + PL FIXT. + ME

New permit

Summary

Details

Location

Additional Info

Workflow

Linked Records

Holds

Contacts (8)



Fees (1)

* Permit Type
Electrical PermitProject
123635 (123635)Application Date
05/02/1989* Work Class
Electrical* District
4Issue Date
01/25/1990* Status
Finaled

Assigned To

Expiration Date
07/21/1990Last Inspection Date
04/03/1990Finaled Date
04/03/1990Description
EL - 2 ST. TOWNHS. (1697 SF) W/GARAGE (409 SF) PLA + PL FIXT. + ME

New permit

- Summary
- Details
- Location
- Additional Info
- Workflow
- Linked Records
- Holds
- Contacts (8)
- Fees (1)
- Bonds

* Permit Type
Plumbing Permit

* Work Class
Gas

* Status
Closed

Project
123635 (123635)

* District
4

Assigned To

Application Date
05/02/1989

Issue Date
11/02/1989

Expiration Date
07/21/1990

Last Inspection Date

Finaled Date

Description
GA - 2 ST. TOWNHS. (1697 SF) W/GARAGE (409 SF) PLA + PL FIXT. + ME

New permit

Summary

Details

Location

Additional Info

Workflow

Linked Records

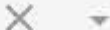
Holds

Contacts (8)

Fees (1)

Bonds

* Permit Type
Mechanical Permit

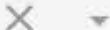


Project
123635 (123635)

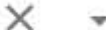


Application Date
05/02/1989

* Work Class
Mechanical



* District
4



Issue Date
01/31/1990

* Status
Finaled



Assigned To



Expiration Date
07/21/1990

Last Inspection Date
04/03/1990

Finaled Date
04/03/1990

Description
ME - 2 ST. TOWNHS. (1697 SF) W/GARAGE (409 SF) PLA + PL FIXT. + ME

New permit

Summary

Details

Location

Additional Info

Workflow

Linked Records

Holds

Contacts (8)

Fees (1)

* Permit Type Plumbing Permit	Project 123635 (123635)	Application Date 05/02/1989
* Work Class Plumbing	* District 4	Issue Date 11/02/1989
* Status Finaled	Assigned To	Expiration Date 07/21/1990
		Last Inspection Date 04/03/1990
		Finaled Date 04/03/1990
Description PL - 2 ST. TOWNHS. (1697 SF) W/GARAGE (409 SF) PLA + PL FIXT. + ME		

175 N. Garfield Ave. Pasadena, CA 91109-7215 (626) 744-4200

MECHANICAL PERMIT

* (See Permit Expiration Warning Below)

Description of Work: MECHANICAL FOR 90,000 BTU FURNACE & 4 TON COMPRESSOR REPLACEMENT IN SAME LOCATION - NO DUCT WORK

Phone: 818-735-7876

Owner: PAUL UPCHURCH
2796 HERITAGE DR PASADENA, CA 91107

Phone:

Contractor: SERVICE CHAMPIONS **License #:** 799170
22911 SAVI RANCH PKWY YORBA LINDA, CA 92887

Phone: 714-777-7777

PERMIT EXPIRATION*

PERMIT EXPIRATION
 EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK ON THE SITE AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED ON THE SITE BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. THE BUILDING OFFICIAL IS AUTHORIZED TO GRANT, IN WRITING, ONE OR MORE EXTENSIONS OF TIME, FOR PERIODS NOT MORE THAN 180 DAYS EACH. THE EXTENSION SHALL BE REQUESTED IN WRITING AND JUSTIFIABLE CAUSE DEMONSTRATED. (C.B.C. SECTION 105.5)

CONSTRUCTION HOURS

CONSTRUCTION HOURS
IF THIS PROJECT IS IN OR WITHIN 500 FEET OF A RESIDENTIAL DISTRICT, CONSTRUCTION WORK AND THE OPERATION OF CONSTRUCTION EQUIPMENT SHALL TAKE PLACE ONLY DURING THE FOLLOWING HOURS (SEE ORDINANCE 6993 AMENDING MUNICIPAL CODE P.M.C. 9.36.110) :

MONDAY THRU FRIDAY: 7:00 A.M. - 7:00 P.M.

SATURDAY: 8:00 A.M. - 7:00 P.M.

SUNDAY & HOLIDAYS: NOT PERMITTED

USE OF STREET OR SIDEWALK

USE OF STREET OR SIDEWALK
IF THE PUBLIC RIGHT-OF-WAY WILL BE OCCUPIED FOR THIS PROJECT. A PERMIT IS REQUIRED BY THE PUBLIC WORKS DEPARTMENT. CALL (626) 744-4195.
(P.M.C. 12.12.080)

UTILITY SERVICE CUTS IN PUBLIC STREETS

UTILITY SERVICE CUTS IN PUBLIC STREETS
PLEASE BE INFORMED THAT THE CITY OF PASADENA HAS A MORATORIUM ON EXCAVATIONS IN RECENTLY PAVED STREETS. THE DEPARTMENT OF PUBLIC WORKS WILL ALLOW CUTTING OF A MORATORIUM STREET ONLY FOR EMERGENCIES OR NEW INSTALLATIONS WHERE NO OTHER SERVICE OPTIONS EXIST. ALTERNATIVE UTILITY CONNECTION OPTIONS MUST BE CONSIDERED. THE PERMITTEE WILL BE REQUIRED TO EXTENSIVELY REPAVE THE STREET IF NO ALTERNATIVES EXIST.

PLEASE CHECK THE "STREET EXCAVATION MORATORIUM AND FUTURE IMPROVEMENTS MAP - 2003" TO DETERMINE IF YOUR LOCATION IS AFFECTED. IF YOU HAVE ANY QUESTIONS REGARDING THIS POLICY, CONTACT THE DEPARTMENT OF PUBLIC WORKS PERMIT COUNTER AT (626) 744-4195.

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number: 799170 License Class: C20 C36
Contractor Name: SERVICE CHAMPIONS Expiration Date: 9-30-14

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting my professional capacity (Section 7051, Business and Professions Code).

License/Registration Number: _____ Date: _____

OWNER-BUILDER DECLARATION (ALSO SEE ATTACHED ACKNOWLEDGMENT)

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

Owner: _____ Signature _____ Print Name _____ Date: _____

WORKERS' COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following:

☐ I have and will maintain a certificate of consent to self-insured for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued; or

☐ I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier: EVRBEST Policy Number: CA1000157 0131

(This section need not be completed if the permit being issued by the City is for one hundred dollars (\$100) or less); or

☐ 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 Workers' Compensation Laws of California, and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Applicant: _____ Date: 9-4-14

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (sec. 3097, Civ. C.).

Lender's Name: _____ Lender's Address: _____

ASBESTOS NOTIFICATION

I am aware of South Coast Air Quality Management District rule 1403 and I certify that notification of asbestos removal is not applicable to this project and further I certify that if asbestos removal is necessary a notification letter has or will be sent to AQMD or EPA and be in compliance of all requirements.

Applicant, Contractor or Agent: _____ Date: 9-4-14

Information can be obtained from SCAQMD web site at: <http://www.aqmd.gov/comply/asbestos/asbestos.html>. Any questions, call the Asbestos Hot Line at 909-396-2336.

CITY BUSINESS LICENSE NOTIFICATION

City Business Licenses are required of all architects, engineers, building designers, contractors, subcontractors, and tradesmen doing business or performing work in the City of Pasadena. It is the duty of the general contractor or if owner/builder, the owner to see that each subcontractor is so licensed.

PERMIT DECLARATION

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

Signature: _____ Print Name: ALLEN JACOBY

Date: 9-4-14

Please circle: Owner Architect of Record Agent of Owner Contractor Other: AGT



PASADENA PERMIT CENTER
www.cityofpasadena.net/permitcenter

APPLICATION FOR MECHANICAL PERMIT

PLEASE FILL OUT COMPLETELY IN INK.

Job Address: 2796 HERITAGE DRIVE

Case #:

MEC2014-00920

Unit/Floor: Zip: 91107

☒ RESIDENTIAL ☐ COMMERCIAL Date: 09/04/2014

Description of Work: CHANGE OUT A/C 4 TON & FURNACE 90,000 BTU IN SAME LOCATIONS,
NO DUCT WORK

IS ANY EQUIPMENT ON EXTERIOR OF STRUCTURE? ☒ NO ☐ YES If yes, then approval of equipment location is required.

CONTACT PERSON/AGENT: JACOBY

Telephone: [818] 735-7876

Fax: []

Address: 5858 DOVETAIL DRIVE

City: AGOURA HILLS

State: CA

Email:

Zip: 91301

CONTRACTOR: SERVICE CHAMPIONS/AME

Telephone: [714] 777-7777

Fax: []

Address: 22911 SAVI RANCH PKWY

City: YORBA LINDA

State: CA

State License No.: 799170

Email:

Zip: 92887

PROPERTY OWNER /TENANT: ED + PAUL (UPCHURCH)

Telephone: [626] 524-7754

Fax: []

Address: SAME

City:

State:

Email:

Zip:

QTY	FIXTURE COUNT	FEE	QTY	FIXTURE COUNT	FEE
	DUAL PACKAGE (Heating & Cooling) UNITS:			VENTILATION SYSTEM	
	Up to 3 HP			Up to 10,000 CFM	
	> 3 and up to 15 HP			>10,000 and up to 30,000 CFM	
	> 15 and up to 30 HP			Over 30,000 CFM	
	> 30 and up to 50 HP			VENTILATION FAN	
	Over 50 HP			FLOOR FURNACE	
	FURNACE			SPACE HEATER	
1	Up to 100,000 BTU			HOOD - Commercial	
	Over 100,000 BTU			APPLIANCE VENT - Residential	
	COMPRESSOR			EVAPORATIVE COOLER	
	Up to 3 HP			V-BOX WITH DUCTS	
1	> 3 and up to 15 HP			REGISTERS (supply or return)	
	> 15 and up to 30 HP			SMOKE DETECTORS IN DUCTS / FIRE /	
	> 30 and up to 50 HP			SMOKE DAMPERS	
	Over 50 HP			PRE-FABRICATED FIREPLACE	
	BOILER			OTHER EQUIPMENT:	
	Up to 3 HP				
	> 3 and up to 15 HP			GAS SYSTEMS - separately metered	
	> 15 and up to 30 HP			How many systems?	
	> 30 and up to 50 HP			Number of Outlets?	
	Over 50 HP				
	AIR HANDLING UNIT			SUB-TOTAL	
	Up to 10,000 CFM			PROCESSING FEE	
	Over 10,000 CFM			TOTAL	
	REPAIR OF HEATING OR COOLING UNIT				

I certify that I have filled out this application completely and state that the above information is correct.

SIGN BELOW

Applicant's Signature: [Signature]

Date: 09/04/2014

OFFICE USE ONLY				OVER THE COUNTER APPROVALS			
BUILDING	n/c	ZONING APPROVAL	n/c	D & HP APPROVAL	n/c	FIRE	n/c
11	9/4/14	[Signature]	9/4/14	[Signature]		[Signature]	

PLANNING AND DEVELOPMENT DEPARTMENT//
BUILDING SECTION

175 NORTH GARFIELD AVENUE
PASADENA CA 91109

T 626 744 4200
F 626 744 3979

ADDRESS:	2196	Heritage
CASE NO.:	MEC2014-009	
<input type="checkbox"/> ZONING	(628)744-	
By _____	DATE _____	<input type="checkbox"/> FINAL INSP.
<input type="checkbox"/> DESIGN & HISTORIC PRESERVATION	(628)744-4009	
By _____	DATE _____	<input type="checkbox"/> FINAL INSP.
<input type="checkbox"/> FIRE PREVENTION	(628)744-4668	
By _____	DATE _____	<input type="checkbox"/> FINAL INSP.
<input type="checkbox"/> PUBLIC WORKS	(628)744-4195	
By _____	DATE _____	<input type="checkbox"/> FINAL INSP.
<input type="checkbox"/> (628)744-		
By _____	DATE _____	<input type="checkbox"/> FINAL INSP.
<input type="checkbox"/> (628)744-		
By _____	DATE _____	<input type="checkbox"/> FINAL INSP.
<input type="checkbox"/> BUILDING	(628)744-4200	
By _____	DATE 9/2/14	<input type="checkbox"/> FINAL INSP.

ATTACHED FOR
JOUSE AND THE FOLLOWING
WORK

Heating – Plumbing – Electrical – Heating
 Ventilation – Air Conditioning – Signs – Fire Alarms
 and Detectors – Work in the Public Right of Way

NOTES

Nothing in this report or the work authorized hereby is not copyrighted or otherwise made the property of the U.S. Government and is not to be distributed or abandoned for financial gain.

**CITY OF PASADENA
Permit Center**

175 N. Garfield Ave. Pasadena, CA 91109-7215 (626) 744-4200

Permit #: PLM2010-00806

PLUMBING PERMIT

Job Address : 2796 HERITAGE DR CONDOMINIUM

Parcel No. : 5751-023-041

Project Name :

Description of Work: INSTALL WATER HEATER

Applicant: DON MITCHELL
1520 W LINDEN ST RIVERSIDE CA 92507

Phone: 951 341-0004

Owner: PAUL UPCHURCH
2796 HERITAGE DR PASADENA, CA 91107

Phone: 858 361-2872

Contractor: RESCUE ROOTERS
1520 W LINDEN ST RIVERSIDE, CA 92507

License #: 765155

Phone: 951 344-9371

* **Issued Date:** 07 / 14 / 10

* (See Permit Expiration Warning Below)

PERMIT FEES		Fixture Counts	
Fee Description	Amount	Item	Quantity
Plumbing Fixtures Fee	\$33.00	Water Heater	1
Processing fee	\$57.00		
Permit Fees Subtotal:	\$90.00		
Total Calculated Fees: \$90.00			
Waived Fees Subtotal:			
Total Fees :			

PERMIT EXPIRATION*

EVERY PERMIT ISSUED SHALL BECOME INVALID UNLESS THE WORK ON THE SITE AUTHORIZED BY SUCH PERMIT IS COMMENCED WITHIN 180 DAYS AFTER ITS ISSUANCE, OR IF THE WORK AUTHORIZED ON THE SITE BY SUCH PERMIT IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AFTER THE TIME THE WORK IS COMMENCED. THE BUILDING OFFICIAL IS AUTHORIZED TO GRANT, IN WRITING, ONE OR MORE EXTENSIONS OF TIME, FOR PERIODS NOT MORE THAN 180 DAYS EACH. THE EXTENSION SHALL BE REQUESTED IN WRITING AND JUSTIFIABLE CAUSE DEMONSTRATED. (C.B.C. SECTION 105.5)

PERMITS FOR WORK IN RESIDENTIAL ZONES SHALL BE COMPLETED WITHIN A MAXIMUM OF 18 MONTHS FROM DATE OF ISSUANCE, UNLESS APPROVAL IS OBTAINED FOR AN EXTENSION. WHEN A PERMIT IN A RESIDENTIAL ZONE EXPIRES, THE PERMITTEE SHALL FOLLOW THE REQUIREMENTS AS SET FORTH IN ORDINANCE 6774, SECTION D. WORK MAY NOT CONTINUE OR RESUME FOR A PERIOD OF NOT LESS THAN 1 YEAR AT WHICH TIME A NEW PERMIT AND FEES MAY BE APPLIED FOR.

CONSTRUCTION HOURS

IF THIS PROJECT IS IN OR WITHIN 500 FEET OF A RESIDENTIAL DISTRICT, CONSTRUCTION WORK AND THE OPERATION OF CONSTRUCTION EQUIPMENT SHALL TAKE PLACE ONLY DURING THE FOLLOWING HOURS (SEE ORDINANCE 6993 AMENDING MUNICIPAL CODE P.M.C. 9.36.110):

MONDAY THRU FRIDAY: 7:00 A.M. - 7:00 P.M.

SATURDAY: 8:00 A.M. - 7:00 P.M.

SUNDAY & HOLIDAYS: NOT PERMITTED

USE OF STREET OR SIDEWALK

IF THE PUBLIC RIGHT-OF-WAY WILL BE OCCUPIED FOR THIS PROJECT, A PERMIT IS REQUIRED BY THE PUBLIC WORKS DEPARTMENT. CALL (626) 744-4195 (P.M.C. 12.12.080)

UTILITY SERVICE CUTS IN PUBLIC STREETS

PLEASE BE INFORMED THAT THE CITY OF PASADENA HAS A MORATORIUM ON EXCAVATIONS IN RECENTLY PAVED STREETS. THE DEPARTMENT OF PUBLIC WORKS WILL ALLOW CUTTING OF A MORATORIUM STREET ONLY FOR EMERGENCIES OR NEW INSTALLATIONS WHERE NO OTHER SERVICE OPTIONS EXIST. ALTERNATIVE UTILITY CONNECTION OPTIONS MUST BE CONSIDERED. THE PERMITTEE WILL BE REQUIRED TO EXTENSIVELY REPAVE THE STREET IF NO ALTERNATIVES EXIST.

PLEASE CHECK THE "STREET EXCAVATION MORATORIUM AND FUTURE IMPROVEMENTS MAP - 2003" TO DETERMINE IF YOUR LOCATION IS AFFECTED. IF YOU HAVE ANY QUESTIONS REGARDING THIS POLICY, CONTACT THE DEPARTMENT OF PUBLIC WORKS PERMIT COUNTER AT (626) 744-4195.

LICENSED CONTRACTORS DECLARATION

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number: 765155 License Class: C36 C42
Contractor: RESOLVE ROOSTER Exp. Date: 7-31-10

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

License/Registration Number: _____ Exp. Date: _____

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

Owner: _____ Date: _____

WORKERS' COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following:

☐ I have and will maintain a certificate of consent to self insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued; or

☒ I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier: LIBERTY MUTUAL Policy Number: WL 7-631-508631-G19

(This section need not be completed if the permit being issued by the City is for one hundred dollars (\$100) or less); or

☒ 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 Workers' Compensation Laws of California, and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Applicant: DON MITCHELL Date: 7-14-10

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST, AND ATTORNEY'S FEES.

CONSTRUCTION LENDING AGENCY

I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (sec. 3097, Civ. C.).

Lender's Name: _____ Lender's Address: _____

ASBESTOS NOTIFICATION

☒ I certify that notification of asbestos removal is not applicable to this project.
☐ I certify asbestos removal is necessary and a notification letter has or will be sent to AQMD or EPA

Applicant or Agent: DON MITCHELL Date: 7-14-10

Information can be obtained from SCAQMD web site at: <http://www.aqmd.gov/comply/asbestos/asbestos.html>. Any questions, call the Asbestos Hot Line at 909-396-2336.

CITY BUSINESS LICENSE NOTIFICATION

City Business Licenses are required of all architects, engineers, building designers, contractors, subcontractors, and tradesmen doing business or performing work in the City of Pasadena. It is the duty of the general contractor or if owner/builder, the owner to see that each subcontractor is so licensed.

PERMIT DECLARATION

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

Signature: [Signature] Print Name: DON MITCHELL

Date: 7-14-10

Please circle: Owner Architect of Record Agent of Owner Contractor Other: _____



APPLICATION FOR PLUMBING PERMIT

PLEASE FILL OUT COMPLETELY IN INK.

Job Address: 2796 HERITAGE DR Case #: P1M2010-00806
Unit/Floor: _____ Zip: 91107 ☒ RESIDENTIAL ☐ COMMERCIAL Date: _____
Description of Work: WATER HEATER INSTALL

IS ANY EQUIPMENT ON EXTERIOR OF STRUCTURE? ☒ NO ☐ YES If yes, then approval of equipment location is required.

CONTACT PERSON/AGENT: DON MITCHELL Telephone: (911) 341-9371 Fax: (911) 341-9004
Address: 1520 WILSON ST City: RIVERSIDE State: CA

Contractor: RESCUE ROOFING Telephone: (911) 341-9371 Fax: (911) 341-9004
Address: 1520 WILSON ST City: RIVERSIDE State: CA
State License No.: 765155 Email: _____ Zip: 92507

PROPERTY OWNER / TENANT: PAUL D. HURCH Telephone: (818) 361-2872 Fax: [] _____
Address: 2796 HERITAGE DR City: PASADENA State: CA
Email: _____ Zip: 91107

QTY	FIXTURE COUNT	FEE	QTY	FIXTURE COUNT	FEE
	BATHTUB		<u>1</u>	WATER HEATER	
	SHOWER			LAWN SPRINKLER CONTROL VALVE	
	TUB / SHOWER			WATER SERVICE (install / repair / alter)	
	LAVATORY			WATER PIPING / REPIPE PER UNIT	
	TOILETS			DRAINAGE OR VENT PIPING (repair / alter)	
	WATER HEATER			WATER TREATING EQUIPMENT	
	KITCHEN SINK			HEATER SYSTEM PRESSURE REGULATOR	
	WASHING MACHINE			GREASE / SAND INTERCEPTOR	
	GARBAGE DISPOSAL			INDUSTRIAL WASTE PRETREATMENT	
	DISHWASHER			INTERCEPTOR (including vent)	
	LAUNDRY TRAY			VACUUM BREAKERS	
	FLOOR / SLOP SINK			BACKFLOW PROTECTIVE DEVICE	
	FLOOR DRAIN			OTHER FIXTURES:	
	URINAL			EARTHQUAKE SHUT OFF VALVE	
	BAR SINK			GAS SYSTEMS - separately metered	
	DRAIN TRAP PRIMERS			How many systems?	
	DENTAL CUSPIDORS			Number of Outlets?	
	WASTE & VENT				
	BUILDING SEWER (new / replacement)				
	SEWER CAP				
	ON-SITE SEWER MANHOLE				
	SUMP PUMP / SEWER EJECTOR				
	PRIVATE SEWAGE DISPOSAL SYSTEM				
	RAIN WATER SYSTEM (per drain)				
				SUB-TOTAL	
				PROCESSING FEE	
				TOTAL	

I certify that I have filled out this application completely and state that the above information is correct.

SIGN BELOW

Applicant's Signature: _____

Date: 7-14-10

* OFFICE USE ONLY				OVER THE COUNTER APPROVALS			
BUILDING	n/c	ZONING APPROVAL	n/c	D & HP APPROVAL	n/c	FIRE	n/c

**CONTRACTOR PLEASE FILL OUT COMPLETELY IN INK.
LICENSED CONTRACTORS DECLARATION**

I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.

License Number: _____ License Class: _____

Contractor: _____ Date: _____

☐ I am exempt from the licensing requirements as I am a licensed architect or a registered professional engineer acting in my professional capacity (Section 7051, Business and Professions Code).

License/Registration Number: _____ Date: _____

**OWNER PLEASE FILL OUT COMPLETELY IN INK.
OWNER-BUILDER DECLARATION**

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

☐ I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business and Professions Code).

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

SIGN BELOW

Applicant: _____ Date: _____

**CONTRACTOR PLEASE FILL OUT COMPLETELY IN INK.
WORKER'S COMPENSATION DECLARATION**

I hereby affirm under penalty of perjury one of the following:

☐ I have and will maintain a certificate of consent to self insure for workers' compensation, as provided for by section 3700 of the Labor Code, for the performance of the work for which this permit is issued; or

☐ I have and will maintain workers' compensation insurance, as required by Section 370.0 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier: _____ Policy Number: _____

(This section need not be completed if the permit being issued by the City is for one hundred dollars (\$100) or less); or

☐ 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 Workers' Compensation Laws of California, and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

SIGN BELOW

Applicant: _____ Date: _____

*WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000), IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEYS FEES.

CONSTRUCTION LENDING AGENCY

hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (sec. 3097, C)

Lender's Name: _____

Lender's Address: _____

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 building construction, and hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes.

SIGN BELOW

SIGNATURE OF APPLICANT OR AGENT: _____ **DATE:** _____

RESCUE ROOTER

475 E. Arrow Hwy
Azusa, CA 91702

(626) 858-9284
(626) 966-1047 FAX

07/07/2010

To Whom It May Concern:

This letter is to confirm that the following employee of Rescue Rooter is authorized to pull plumbing permits and city license as needed under contractors license number #765155.

Don Mitchell

Please contact me at 800-859-5945 if you have any questions.

Sincerely,

[Signature]
Jon Swartz
Manager

State of California
County of Riverside
07/07/2010

before me, Maria V. Joseph

, Notary Public

Personally appeared Jon Swartz

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacity(ies), and that by his signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

[Signature]
Signature of Notary Public

