

15417 S. Larch

BUS LMC

# APPLICATION FOR BUILDING PERMIT

COUNTY OF LOS ANGELES

BUILDING AND SAFETY

## WORKERS' 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 county 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 the Workers' 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 429664 Lic. Class C-39

Contractor Robert Torres Date 5-20-85

I am exempt under Sec. \_\_\_\_\_

B.&P.C. for this reason \_\_\_\_\_

Date: \_\_\_\_\_

Signature R. Torres  
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).

## 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 County ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature AS Ulloa Date 5-22-85  
Signature of Applicant or Agent Date

FOR APPLICANT TO FILL IN					
BUILDING ADDRESS	<u>15417 Larch AV</u>				
CITY	<u>Lawndale</u>	ZIP			
SIZE OF LOT	NO. OF BLDGS. NOW ON LOT				
TRACT	BLOCK	LOT NO.			
OWNER	<u>Pedro Machado</u>				
ADDRESS	<u>15417 Larch AV</u>				
CITY	<u>Lawndale Ca,</u>	ZIP <u>90260</u>			
ARCHITECT OR ENGINEER	TEL. NO.				
ADDRESS	<u>551 W 7th St</u>				
CONTRACTOR	<u>Robert Torres</u>	TEL. NO. <u>514-8977</u>			
ADDRESS	<u>351 W 7th St</u>				
CITY	<u>San Pedro</u>	LIC. CLASS <u>C-39</u>			
SQ. FT. SIZE	NO. OF STORIES	NO. OF FAMILIES		CHECK ONE	
<u>1,900</u>	<u>1</u>			NEW <input checked="" type="checkbox"/>	
DESCRIPTION OF WORK <u>Tear-off old roof apply new roof on existing roof</u>					ADD <input type="checkbox"/>
USE OF EXISTING BLDG. <u>Dwell Unit</u>					ALTER <input type="checkbox"/>
APPLICANT (PRINT)					REPAIR <input checked="" type="checkbox"/>
ADDRESS					DEMOL <input type="checkbox"/>
PRESENT BUILDING ADDRESS					
LOCALITY					
MOVING CONTRACTOR					TEL. NO.
ADDRESS					
REQUIRED SET BACK	YARD	HWY	TOTAL SETBACK FROM PROP. LINE	EXIST. WIDTH	
FRONT P.L.					
SIDE P.L.					
P.C. Fee \$			Permit Fee <u>39.37</u>		
Investigation Fee			Issuance Fee <u>15.75</u>		
			Total Fee <u>55.12</u>		

BUILDING ADDRESS	<u>15417 S. LARCH</u>				
LOCALITY	<u>LAWNDALE</u>				
NEAREST CROSS ST.	<u>154 ST</u>				
ASSESSOR MAP BOOK	<u>4076</u>	PAGE	<u>14</u>	PARCEL <u>3</u>	
USE ZONE	<u>R-2</u>	MAP NO.	<u>4156</u>		
SPECIAL CONDITIONS					
DISTRICT	<u>701</u>	GROUP	<u>R-3</u>	TYPE CONST.	<u>I</u>
FIRE ZONE	<u>3</u>	PROCESSED BY <u>FARMER</u>			
STATISTICAL CLASSIFICATION					
CLASS NO.	<u>21</u>	DWELL. UNITS		<u>0</u>	APT. CONDO.

SEWER MAP	BK. <u>G</u> PG. <u>24</u>	
VALUATION		
\$ <u>2000.00</u>		
\$		
FINAL DATE	<u>5/24/85</u>	
FINAL By	<u>[Signature]</u>	

W.C.  
4-19-86

## VALIDATION

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INSPECTOR COPY

SEE REVERSE FOR EXPLANATORY LANGUAGE

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