

15314 Prairie Ave.

Temp Job Jacket
Kastich
2-15-91

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. 025455 Company ALL STATE

- Certified copy is hereby furnished.
 Certified copy is filed with the county building inspection department.

Date 12-22-90 Applicant [Signature]

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by 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 025455 Lic. Class P36

Contractor [Signature] Date 12-22-90

I am exempt under Sec. _____

B.&P.C. for this reason _____

Date: _____

Signature _____

SINGLE FAMILY

HOME 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, will do the work and the structure is not intended or offered for sale (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 regulating Plumbing, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Permittee [Signature] Date 12-22-90

20 0026 DPW 6/87
76A667A

APPLICATION FOR PLUMBING PERMIT

COUNTY OF LOS ANGELES

DEPT. OF PUBLIC WORKS

BL #5
45114

FOR APPLICANT TO FILL IN (PRINT OR TYPE)				BUILDING ADDRESS
NUMBER	FIXTURE OR ITEM	@	FEE	15314 PRAIRIE AVE
	WATER CLOSET			LOCALITY
	BATH TUB			NEAREST CROSS ST.
	SHOWER			OWNER <u>HAL BEGG R</u>
	LAVATORY			MAIL ADDRESS <u>15314 PRAIRIE AVE</u>
	SINK			CITY <u>LAUNDALE</u> TEL. NO. <u>6793225</u>
<u>1</u>	DISHWASHER		<u>12 75</u>	CONTRACTOR <u>SCARIS</u>
	CLOTHES WASHER			ADDRESS <u>23021 MOUNTAIN VIEW</u>
	SWIMMING POOL RECEPTOR			CITY <u>TORRANCE</u> TEL. NO. <u>530-1100</u>
	LAWN SPRINKLER SYSTEM			STATE LICENSE NO. <u>025455</u> LIC CLASS <u>P36</u>
	WATER HEATER			DISTRICT NO. <u>7-1</u> PROCESSED BY <u>[Signature]</u>
	GAS SYSTEM	OUTLETS		FINAL DATE
	OUTLETS OVER 5 PER SYSTEM			FINAL BY
Plan check fee				<p>VALIDATION</p> <p>01-1-13375</p> <p>13375</p> <p>12 1</p> <p>06438</p> <p>12-19</p> <p>02-17-01</p> <p>80</p>
PLUMBING PERMIT ISSUING FEE \$			<u>21 00</u>	
TOTAL FEE			<u>33 75</u>	
Plan check applicant				
Name				
Address				
City		Tel. No.		

SEE REVERSE FOR EXPLANATORY LANGUAGE

TEMPORARY FILE COPY

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. 025455 Company ALL STATE

Certified copy is hereby furnished.

Certified copy is filed with the county building inspection department.

Date 12-27-90 Applicant [Signature]

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

(This section need not be completed if the work involved by 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 025455 Lic. Class 136

Contractor SPANS Date 12-27-90

I am exempt under Sec. _____

B.&P.C. For this reason _____

Date: _____

Signature _____

SINGLE FAMILY

HOME 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, will do the work and the structure is not intended or offered for sale (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 regulating Plumbing, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

[Signature] 12-27-90
Signature of Permittee Date

20-0026 DPW 6/87
7BA667A

APPLICATION FOR PLUMBING PERMIT

BL # 45111

COUNTY OF LOS ANGELES

DEPT. OF PUBLIC WORKS

FOR APPLICANT TO FILL IN (PRINT OR TYPE)				BUILDING ADDRESS <u>15314 PRAIRIE AVE</u>	
NUMBER	FIXTURE OR ITEM	⊗	FEE	LOCALITY	NEAREST CROSS ST.
	WATER CLOSET				
	BATH TUB				
	SHOWER			OWNER <u>HALBERG P.</u>	
	LAVATORY			MAIL ADDRESS <u>15314 PRAIRIE AVE</u>	
	SINK			CITY <u>LAUNDALE</u> TEL. NO. <u>6793275</u>	
<u>1</u>	DISHWASHER		<u>12 75</u>	CONTRACTOR <u>SPANS</u>	
	CLOTHES WASHER			ADDRESS <u>23021 NURMANDIE</u>	
	SWIMMING POOL RECEPTOR			CITY <u>TORRANCE</u> TEL. NO. <u>530-7500</u>	
	LAWN SPRINKLER SYSTEM			STATE LICENSE NO. <u>025455</u> LIC CLASS <u>136</u>	
	WATER HEATER			DISTRICT NO. <u>7.01</u> PROCESSED BY <u>Rashida</u>	
	GAS SYSTEM	OUTLETS		FINAL DATE	VALIDATION
	OUTLETS OVER 5 PER SYSTEM			FINAL BY	#5 01* *3375 *3375 18E 1d 1 ***E 0643d 14817 02-14891
Plan check fee					
PLUMBING PERMIT ISSUING FEE \$			<u>21 00</u>		
TOTAL FEE			<u>33 75</u>		
Plan check applicant					
Name _____					
Address _____					
City _____ Tel. No. _____					

EXPIRED

APR 06 1995

DUE TO THE PERMIT BEING EXPIRED
SIGNED [Signature]

SEE REVERSE FOR EXPLANATORY LANGUAGE

INSPECTOR COPY

APPROVALS	DATE	INSPECTOR'S SIGNATURE
UNDER SEAB WORK		
ROUGH PLUMBING		
GAS PIPING		
GAS VENT		
HOT WATER HEATER		
PLUMBING FIXTURES		
GAS TEST		
UTILITY CO. NOTIFIED		
FINAL	<i>Enter on Front</i>	
INDUSTRIAL WASTE APPROVAL		

INSPECTOR'S NOTES

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): 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 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 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 am exempt under Sec. _____

B & P.C. for this reason _____

Date _____

Owner _____

24
 2722 * 10
 58 2722 *
 3000 I 61
 0420
 1412

19-11-90 INSPECTOR'S NOTES

02 0 0 0 0 0 0

19-11-90

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 work involved by 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 _____ Lic. Class _____

Contractor _____ Date _____

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

_____ Date: _____

Signature _____

- Exemption for Reg. Maint. Elect.

SINGLE FAMILY HOME 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, will do the work and the structure is not intended or offered for sale (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 regulating Electrical wiring, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Permittee _____ Date _____

20-0018 DPW 4/87
76A663
(CE-806G)

APPLICATION FOR ELECTRICAL PERMIT
COUNTY OF LOS ANGELES **BUILDING AND SAFETY**

5

FOR APPLICANT TO FILL IN				JOB ADDRESS <u>15314 Prairie Ave.</u>	
	EACH	NO.	FEE		
New Residential Bldgs. & Pools	\$	—	\$	LOCALITY	
1 & 2-Family, Sq. Ft. _____				NEAREST CROSS ST	
Multi-family Sq. Ft. _____				OWNER OR FIRM NAME	
Residential Swimming Pools				MAIL ADDRESS	
Outlets: Rec _____ Light _____ Sw. _____				CITY _____ Tel. No. _____	
Total No. _____ First 20 _____ Additional _____				PLAN CHECK APPLICANT	
Lighting Fixtures				ADDRESS	
Total No. _____ First 20 _____ Additional _____				CITY _____ Tel. No. _____	
Fixed Appliances Not Over 1 HP				PERMIT APPLICANT	
Range _____ Heater _____ D.W. _____				ADDRESS	
Oven _____ Dryer _____ W.M. _____				CITY _____ Tel. No. _____	
Top _____ FAU _____ W.H. _____				LICENSE OR REG. NUMBER _____ Class _____	
Hood _____ Fan _____ Other _____				DISTRICT NO. _____ PROCESSED BY _____	
Disp. _____ Room Air Cond. _____				FINAL DATE <u>7/19/06</u>	
Power Apparatus & Large Appliances				FINAL BY <u>WOLATIM</u>	
Size & Type HP, KW, KVA, or KVAR				VALIDATION	
_____ Up to 1 Incl.					
_____ Over 1 to 10 Incl.					
_____ Over 10 to 50 Incl.					
_____ Over 50 to 100 Inc.					
_____ Over 100					
Services, Swbd., MCC & Panelboards					
0 - 200 Amp. Under 600 V					
201 - 1000 Amp. Under 600 V					
Over 1000 Amp. or Over 600 V					
Temp. Power Pole & Appurtenances					
Sign with One Branch Circuit					
Additional Sign Branch Circuits					
Misc. Conduits & Conductors					
Other (See Complete Fee Schedule) _____					
PERMIT FEE	(Sub-Total)				
PLAN CHECKING FEE					
PERMIT ISSUING FEE					
TOTAL FEE					

TEMPORARY FILE COPY

SEE REVERSE FOR EXPLANATORY LANGUAGE

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self insure, or a certificate of Worker's 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 work involved by 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 _____ Lic. Class _____

Contractor _____ Date _____

I am exempt under Sec. _____

B.&P.C. for this reason _____

Date: _____

Signature _____

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 OF APPLICANT OR AGENT _____

DATE _____

20-0046 DPW 9/89
76A364C

**APPLICATION FOR PERMIT
HEATING - VENTILATING - AIR CONDITIONING**

COUNTY OF LOS ANGELES

DEPT OF PUBLIC WORKS

BUILDING AND SAFETY DIV.

FOR APPLICANT TO FILL IN (PRINT OR TYPE ONLY)			BUILDING ADDRESS
NO.	TYPE OF APPLIANCE OR EQUIPMENT	FEE	15314 Prairie
	ABSORPTION UNIT, BTU _____		Localite
	AIR HANDLING UNIT, CFM _____		NEAREST CROSS ST.
	BOILER, BTU _____		ASSESSOR MAP BOOK
1	COMPRESSOR, BTU 36,000 - 32 TO	32.70	PAGE
	VENTILATION SYSTEM		PARCEL
	EVAPORATIVE COOLER		DISTRICT NO.
	FURNACE: FAU _____ GRAVITY _____		7.01
	FLOOR _____ BTU _____		PROCESSED BY
	HEATER: SUSPENDED _____ UNIT _____		M. Serrano
	WALL _____		APPROVALS
			DATE
			INSPECTOR'S SIGNATURE
			ROUGH
			FINAL
Plan check fee			
PERMIT ISSUING FEE \$ 3.60			
TOTAL FEE 106.30			
PLAN CHECK APPLICANT			
NAME Air West Air Conditioning			
ADDRESS 1806 Santa Clara St.			
CITY Hollywood		TEL. NO. 714-788-7897	
OWNER PULLI MARRONE			
MAIL ADDRESS 15314 Prairie			
CITY Lindero		TEL. NO. 310-677-3715	
CONTRACTOR Air West Air Conditioning			
ADDRESS 1806 Santa Clara St.			
CITY Hollywood		TEL. NO. 714-788-7897	
STATE LICENSE NO. 723715		LIC. CLASS C-26	

VALIDATION

01*

86630

86630

00-84-05

TEMPORARY FILE COPY

SEE REVERSE FOR EXPLANATORY LANGUAGE

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 work involved by 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 _____ Lic. Class _____

Contractor _____ Date _____

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

Signature _____ Date _____

- Exemption for Reg. Maint. Elect.

SINGLE FAMILY HOME 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, will do the work and the structure is not intended or offered for sale (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 regulating Electrical wiring, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.

Signature of Permittee _____ Date _____

20-0019 DPW 4/87
76A663
(CE-806G)

APPLICATION FOR ELECTRICAL PERMIT
COUNTY OF LOS ANGELES
BUILDING AND SAFETY

5

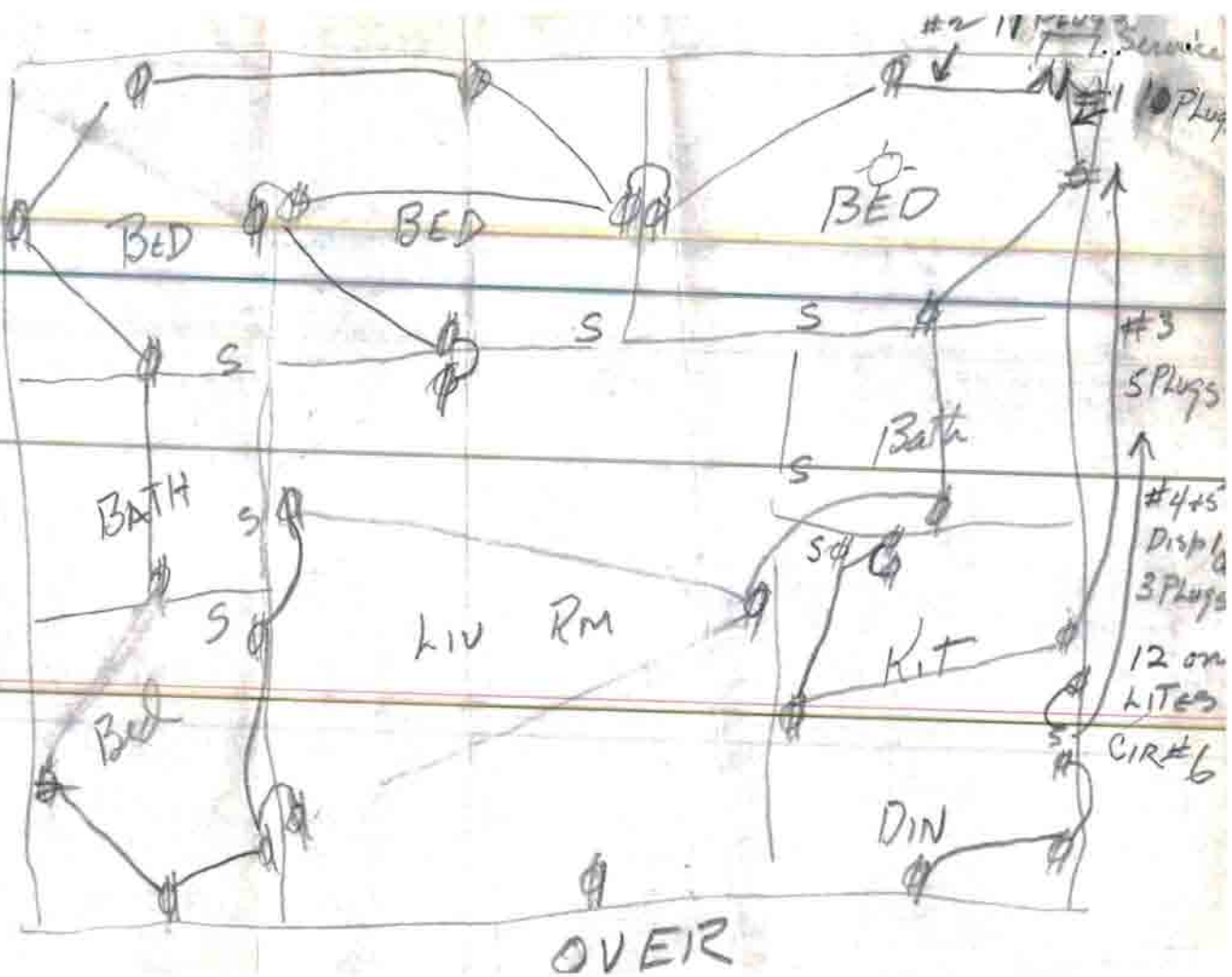
FOR APPLICANT TO FILL IN				JOB ADDRESS
	EACH	NO.	FEE	
New Residential Bldgs. & Pools				15314 Prairie Ave.
1 & 2-Family, Sq. Ft. _____	\$ _____	_____	\$ _____	LOCALITY _____
Multi-family Sq. Ft. _____				NEAREST CROSS ST. _____
Residential Swimming Pools _____				OWNER OR FIRM NAME _____
Outlets: Rec _____ Light _____ Sw _____				MAIL ADDRESS _____
First 20 _____				CITY _____ Tel. No. _____
Total No. _____ Additional _____				PLAN CHECK APPLICANT _____
Lighting Fixtures _____				ADDRESS _____
First 20 _____				CITY _____ Tel. No. _____
Total No. _____ Additional _____				PERMIT APPLICANT _____
Fixed Appliances Not Over 1 HP _____				ADDRESS _____
Range _____ Heater _____ DW. _____				CITY _____ Tel. No. _____
Oven _____ Dryer _____ W.M. _____				LICENSE OR REG. NUMBER _____ Class _____
Top _____ FAU _____ W.H. _____				DISTRICT NO. _____ PROCESSED BY _____
Hood _____ Fan _____ Other _____				FINAL DATE _____
Disp. _____ Room Air Cond. _____				FINAL BY _____
Power Apparatus & Large Appliances				<div style="border: 1px solid black; padding: 5px;"> <p style="text-align: center;">VALIDATION</p> </div>
Size & Type HP, KW, KVA, or KVAR				
_____ Up to 1 Incl.				
_____ Over 1 to 10 Incl.				
_____ Over 10 to 50 Incl.				
_____ Over 50 to 100 Inc.				
_____ Over 100				
Services, Swbd., MCC & Panelboards				
0 - 200 Amp. Under 600 V				
201 - 1000 Amp. Under 600 V				
Over 1000 Amp. or Over 600 V				
Temp. Power Pole & Appurtenances				
Sign with One Branch Circuit				
Additional Sign Branch Circuits _____				
Misc. Conduits & Conductors				
Other (See Complete Fee Schedule) _____				
PERMIT FEE		(Sub-Total)		
PLAN CHECKING FEE				
PERMIT ISSUING FEE				
TOTAL FEE				

SEE REVERSE FOR EXPLANATORY LANGUAGE

TEMPORARY FILE COPY



PHONE: 753-3131



1 Service all 4 apt

1 Cdr washer

1 Cdr house bits on T.C. 4 LITES

Service 1 1/2 PIPE # 1 FW # 6 ground

All four apt injured the same

6000

4

240

Time Elap