



APPLICATION FOR GRADING AND OTHER MISCELLANEOUS PERMITS

30940 HAWTHORNE BOULEVARD  
RANCHO PALOS VERDES, CA 90275-5391  
(310) 541-7702 FAX: (310) 377-8659

|   |  |  |   |
|---|--|--|---|
| BUILDING ADDRESS<br><b>29129 Whites Point Dr.</b>   | CLEARED BY   | APPLICATION TYPE                               | NO.   |
| LOT   | BLOCK  | TRACT  |   |
| OWNER<br><b>Hepner</b>  | THE FOLLOWING WORK IS AUTHORIZED BY THIS PERMIT:   |  |   |
| ADDRESS<br><b>29129 Whites Point Dr.</b>  | <input type="checkbox"/> STRUCT.   | <input checked="" type="checkbox"/> PLUMB.     | <input type="checkbox"/> MECH. <input type="checkbox"/> ELECT. <input type="checkbox"/> GRADING |
| CITY<br><b>Rancho Palos Verdes</b>  | <input type="checkbox"/> NEW   | <input checked="" type="checkbox"/> ALTER      | <input type="checkbox"/> ADDITION   |
| ARCHITECT/ENGINEER  | LIC. NO.   | <input type="checkbox"/> SUPERVISED GRADING    |   |
| ADDRESS   | <input type="checkbox"/> REPAIR <input type="checkbox"/> CONVERT <input type="checkbox"/> DEMO | <input type="checkbox"/> DUMP DEPOSIT REQUIRED |   |
| CITY  | ZIP  | PH.  | CUBIC YDS.  |
| CONTRACTOR<br><b>Marsh Plumbing Inc.</b>  | LIC. NO.<br><b>692342</b>  | DISCUSSION OF WORK AND CONDITIONS OF APPROVAL  |   |
| ADDRESS<br><b>20361 Prairie St #6</b>   | <b>Water Heater Change out</b>   |  |   |
| CITY<br><b>Chatsworth</b>   | ZIP<br><b>91311</b>  | PH.<br><b>4071247</b>                          |   |
| LICENSE NO.<br><b>105710</b>  | EXPIRATION DATE  |  |   |
| LICENSED CONTRACTOR'S 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 Class<br><b>C-36</b>  | License Number<br><b>642392</b>  |  |   |
| Date<br><b>1-28-97</b>  | Contractor<br><b>MARSH</b>   |  |   |
| ADDRESS<br><b>28781 Prairie St</b>  | CITY AND ZIP<br><b>CHATS WORTH 91311</b>   | PHONE<br><b>818-407-1247</b>                   |   |
| 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. 1097, Civ. C) Lender's Name   |  |  |   |
| Lender's Address  |  |  |   |
| OWNER-BUILDER DECLARATION   |  |  |   |
| I hereby affirm that I am exempt from the Contractor's License Law for the following reason:  |  |  |   |
| <input type="checkbox"/> 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.   |  |  |   |
| <input type="checkbox"/> I, as owner of the property, am exclusively contracting with licensed contractors to construct the project.  |  |  |   |
| <input type="checkbox"/> I am exempt under Sec. B&PC for this reason  |  |  |   |
| Date: INITIAL   |  |  |   |
| 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. POLICY NO. <b>NW0416547</b>  |  |  |   |
| COMPANY<br><b>Golden Eagle</b>  | DATE EXPIRES:<br><b>10-01-97</b>   |  |   |
| <input type="checkbox"/> Certified copy is hereby furnished   | CITY VERIFIED:   |  |   |
| <input checked="" type="checkbox"/> Certified copy is filed with the city   | APPLICANT:<br><b>R. Volman</b>   |  |   |
| Date:<br><b>1-28-97</b>   |  |  |   |
| CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE   |  |  |   |
| 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.   |  |  |   |
| 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 provision or this 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, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES. |  |  |   |
| Signature of Applicant or Agent<br><b>R. Volman</b>   |  | Date<br><b>1-28-97</b>                         |   |
| Print Applicant's / Agent's Name  |  |  |   |
| VALUATION   |  |  |   |
| PERMIT FEES   |  |  |   |
| ELECTRICAL:   | STRUCTURAL:  |  |   |
| PLUMBING: <b>28.00</b>  | GRADING:   |  |   |
| MECHANICAL  | ISSUANCE FEES: <b>22.00</b>  |  |   |
| GEO REVIEW:   | PLAN CHECK:  |  |   |
| ISSUANCE APPROVED: <b>OP</b>  | TOTAL PERMIT FEE: <b>50.00</b>   |  |   |
| DATE OF ISSUANCE: <b>1/28/97</b>  | PERMIT NUMBER: <b>18783</b>  |  |   |

BUILDING ADDRESS:

29129 Whites Point Dr. Rancho Palos Verdes 90275

|             | CITY USE ONLY            |                          |         |         |
|-------------|--------------------------|--------------------------|---------|---------|
|             | YES                      | NO                       | INITIAL | RECEIPT |
| SCHOOL FEES | <input type="checkbox"/> | <input type="checkbox"/> |         |         |
| EET         | <input type="checkbox"/> | <input type="checkbox"/> |         |         |
| OTHER       | <input type="checkbox"/> | <input type="checkbox"/> |         |         |
|             | <input type="checkbox"/> | <input type="checkbox"/> |         |         |

WHITE - INSPECTOR / BLUE - FILE / PINK - FILE / GOLD - OWNER / YELLOW - ASSESSOR

CHK #1252

1/28/97 RPV  
8677A000 9:53  
D132320  
\$AMT \$ 50.00  
18783##  
CHEK 50.00  
9##



| BUILDING ADDRESS                 |       |                            |         |  |
|----------------------------------|-------|----------------------------|---------|--|
| LOT                              | BLOCK | TRACT                      |         |  |
| OWNER                            |       |                            |         |  |
| ADDRESS                          |       |                            |         |  |
| CITY                             | ZIP   | PH.                        |         |  |
| SWIMMING POOL INSPECTIONS        |       |                            | REMARKS |  |
| INSPECTION                       | DATE  | APPROVED/INSPR'S SIGNATURE |         |  |
| LOCATION/DIG                     | SP1   |                            |         |  |
| STEEL/BONDING/PLUMBING TEST      | SP3   |                            |         |  |
| APPROVED TO GUNITE               | SP3   |                            |         |  |
|                                  |       |                            |         |  |
| UNDERGROUND ELECTRIC             | SP2   |                            |         |  |
| GAS TEST                         | SP3   |                            |         |  |
| FENCE ENCLOSURE                  | SP5   |                            |         |  |
| FINAL                            | SP12  |                            |         |  |
| GRADING INSPECTIONS              |       |                            |         |  |
| INSPECTION                       | DATE  | APPROVED/INSPR'S SIGNATURE |         |  |
| PRE GRADING MEETING              | GR1   |                            |         |  |
| TOE OF FILL                      | GR2   |                            |         |  |
| EXCAVATION                       | GR3   |                            |         |  |
| RET. WALL FOOT                   | GR4   |                            |         |  |
| MASONRY / FORMS                  | GR5   |                            |         |  |
|                                  |       |                            |         |  |
|                                  |       |                            |         |  |
|                                  |       |                            |         |  |
|                                  |       |                            |         |  |
|                                  |       |                            |         |  |
| DRAINAGE DEVICES                 | GR8   |                            |         |  |
| ROUGH GRADING & BUILDING RELEASE | GR7   |                            |         |  |
| FINAL                            | GR12  |                            |         |  |





## APPLICATION FOR GRADING AND OTHER MISCELLANEOUS PERMITS

30940 HAWTHORNE BOULEVARD  
RANCHO PALOS VERDES, CA 90275-5391  
(310) 541-7702 FAX: (310) 377-8659

|   |  |  |     |
|---|--|--|-----|
| BUILDING ADDRESS<br><b>29129 WHITES POINT DR</b>  | CLEARED BY   | APPLICATION TYPE                               | NO. |
| LOT   | BLOCK  | TRACT  |     |
| OWNER<br><b>MR HELPER</b>   | THE FOLLOWING WORK IS AUTHORIZED BY THIS PERMIT:   |  |     |
| ADDRESS<br><b>29129 WHITES POINT DR</b>   | <input type="checkbox"/> STRUCT. <input type="checkbox"/> PLUMB. <input type="checkbox"/> MECH. <input type="checkbox"/> ELECT. <input type="checkbox"/> GRADING |  |     |
| CITY<br><b>R.P.V.</b> ZIP<br><b>90224</b> PH.<br><b>377 2595</b>  | <input type="checkbox"/> NEW <input type="checkbox"/> ALTER <input type="checkbox"/> ADDITION <input type="checkbox"/> SUPERVISED GRADING                        |  |     |
| ARCHITECT/ENGINEER  | LIC. NO.   | <input type="checkbox"/> DUMP DEPOSIT REQUIRED |     |
| ADDRESS   | <input type="checkbox"/> REPAIR <input type="checkbox"/> CONVERT <input type="checkbox"/> DEMO <input type="checkbox"/> CUBIC YDS.                               |  |     |
| CITY  | ZIP  | PH.  |     |
| CONTRACTOR<br><b>LEN WILLIAMS</b> LIC. NO.<br><b>432048</b>   | DISCRIPTION OF WORK AND CONDITIONS OF APPROVAL   |  |     |
| ADDRESS<br><b>4455 TORRANCE BL</b>  | <b>SCRAPE EXISTING GRAVEL NAIL PULT</b>  |  |     |
| CITY<br><b>TORRANCE</b> ZIP<br><b>CA</b> PH.<br><b>542048</b>   | <b>APPLY FIBERGLASS SHINGLE TO REAR MAXI-TILE MATERIAL ON FRONT</b>  |  |     |
| CITY BUSINESS LICENSE<br><b>01452</b> EXPIRATION DATE<br><b>DEC 1996</b>  | <b>INSTALL EITHER 72 ROUND MINERAL SURFACED NONPERFORATED CAP SHEET OR 90 ROUND NONPERFORATED CAP SHEET UNDERLAYMENT PER IESO REPORT # 3682</b>                  |  |     |
| LICENSED CONTRACTOR'S 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 Class<br><b>C 39</b>  | License Number<br><b>432048</b>  |  |     |
| Date<br><b>5-24-94</b>  | Contractor<br><b>LEN WILLIAMS</b>  |  |     |
| ADDRESS   |  |  |     |
| CITY AND ZIP  | PHONE  |  |     |
| 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. 1097, Civ. C.) Lender's Name  |  |  |     |
| Lender's Address  |  |  |     |
| OWNER-BUILDER DECLARATION   |  |  |     |
| I hereby affirm that I am exempt from the Contractor's License Law for the following reason:  |  |  |     |
| <input type="checkbox"/> 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.   |  |  |     |
| <input type="checkbox"/> I, as owner of the property, am exclusively contracting with licensed contractors to construct the project.  |  |  |     |
| <input type="checkbox"/> I am exempt under Sec. B&PC for this reason  |  |  |     |
| Date: INITIAL   |  |  |     |
| 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. POLICY NO.   |  |  |     |
| COMPANY<br><b>STATE</b>   | DATE EXPIRES:<br><b>DEC 1996</b>   |  |     |
| <input type="checkbox"/> Certified copy is hereby furnished   | CITY VERIFIED:   |  |     |
| <input type="checkbox"/> Certified copy is filed with the city  |  |  |     |
| Date:<br><b>5/24/94</b>   | APPLICANT:<br><b>Len Williams</b>  |  |     |
| CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE   |  |  |     |
| 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.   |  |  |     |
| 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 provision or this 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, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES. |  |  |     |
| Signature of Applicant or Agent<br><b>LEN WILLIAMS</b>  |  | Date<br><b>5/24/96</b>                         |     |
| Print Applicant's / Agent's Name  |  |  |     |
| VALUATION<br><b>7,000.00</b>  |  |  |     |
| PERMIT FEES   |  |  |     |
| ELECTRICAL:   | STRUCTURAL: <b>162.70</b>  |  |     |
| PLUMBING:   | GRADING:   |  |     |
| MECHANICAL  | ISSUANCE FEES: <b>22.00</b>  |  |     |
| GEO REVIEW:   | PLAN CHECK:  |  |     |
| ISSUANCE APPROVED:  | TOTAL PERMIT FEE: <b>\$184.70</b>  |  |     |
| DATE OF ISSUANCE:<br><b>5/24/96</b>   | PERMIT NUMBER:<br><b>17802</b>   |  |     |

| CITY USE ONLY |                          |                          |         |         |
|---------------|--------------------------|--------------------------|---------|---------|
|               | YES                      | NO                       | INITIAL | RECEIPT |
| SCHOOL FEES   | <input type="checkbox"/> | <input type="checkbox"/> |         |         |
| EET           | <input type="checkbox"/> | <input type="checkbox"/> |         |         |
| OTHER         | <input type="checkbox"/> | <input type="checkbox"/> |         |         |
|               | <input type="checkbox"/> | <input type="checkbox"/> |         |         |

D132320  
\$AMT \$ 184.70  
17802#  
CHEK 184.70  
4495A000 10:11  
3\*#



|                                  |         |                            |                    |               |
|----------------------------------|---------|----------------------------|--------------------|---------------|
| BUILDING ADDRESS                 |         |                            | INSPECTIONS RECORD |               |
| LOT                              | BLOCK   | TRACT                      |                    |               |
| OWNER                            |         |                            |                    |               |
| ADDRESS                          |         |                            |                    |               |
| CITY                             | ZIP     | PH.                        |                    |               |
| SWIMMING POOL INSPECTIONS        |         |                            | REMARKS            |               |
| INSPECTION                       | DATE    | APPROVED/INSPR'S SIGNATURE |                    |               |
| LOCATION/DIG                     | SP1     |                            |                    |               |
| STEEL/BONDING/PLUMBING TEST      | SP3     |                            |                    |               |
| APPROVED TO GUNITE               | SP3     |                            |                    |               |
|                                  |         |                            |                    |               |
| UNDERGROUND ELECTRIC             | SP2     |                            |                    |               |
| GAS TEST                         | SP3     |                            |                    |               |
| FENCE ENCLOSURE                  | SP5     |                            |                    |               |
| FINAL                            | SP12    |                            |                    |               |
| GRADING INSPECTIONS              |         |                            |                    |               |
| INSPECTION                       | DATE    | APPROVED/INSPR'S SIGNATURE |                    |               |
| PRE GRADING MEETING              | GR1     |                            |                    |               |
| TOE OF FILL                      | GR2     |                            |                    |               |
| EXCAVATION                       | GR3     |                            |                    |               |
| RET. WALL FOOT                   | GR4     |                            |                    |               |
| MASONRY / FORMS                  | GR5     |                            |                    |               |
| UNDERLAYMENT                     | 5/30/96 | SAA                        |                    |               |
|                                  |         |                            |                    |               |
|                                  |         |                            |                    |               |
|                                  |         |                            |                    |               |
|                                  |         |                            |                    |               |
|                                  |         |                            |                    |               |
|                                  |         |                            |                    |               |
|                                  |         |                            |                    |               |
|                                  |         |                            |                    |               |
| DRAINAGE DEVICES                 | GR6     |                            |                    |               |
| ROUGH GRADING & BUILDING RELEASE | GR7     |                            |                    |               |
| FINAL                            | GR12    |                            |                    |               |
| Roof                             | 6/11/96 | Steve M. Goya              | DATE OF ISSUANCE   | PERMIT NUMBER |







RANCHO PALOS VERDES

DEPARTMENT OF PLANNING, BUILDING, AND CODE ENFORCEMENT

RE-ROOF INFORMATION SHEET

ADDRESS 29129 Whitespoint Dr

ICBO RESEARCH REPORT NUMBER FOR CLASS "A" ROOF 3682

28 SQUARE FEET OF ROOF X \$2.50/SQ.FT. = ~~4500~~ 700 VALUATION

SLOPE OF ROOF 3:12

IS EXISTING ROOF BEING REMOVED? SCRAPE GRAVEL

EXISTING ROOF WEIGHT 300 NEW ROOF WEIGHT ~~300~~ 4#/sf.

I Don Williams WILL INSURE THAT ITEMS REQUIRING INSPECTION  
SIGNATURE OF APPLICANT

WILL NOT BE COVERED WITHOUT INSPECTION AND APPROVAL BY THE CITY INSPECTOR.

I ALSO UNDERSTAND THAT IF A FINAL INSPECTION IS NOT OBTAINED WITHIN 180 DAYS  
THIS PERMIT WILL BE EXPIRED.

DO NOT WRITE BELOW THIS LINE  
TO BE FILLED OUT BY CITY BUILDING INSPECTOR

|                         |  |  |
|-------------------------|--|--|
| STRUCTURAL UPGRADE      | ( ) REQUIRED                                     | ( <input checked="" type="checkbox"/> ) NOT REQUIRED |
| SHEATHING INSPECTION    | ( ) REQUIRED                                     | ( <input checked="" type="checkbox"/> ) NOT REQUIRED |
| UNDERLAYMENT INSPECTION | ( <input checked="" type="checkbox"/> ) REQUIRED | ( ) NOT REQUIRED                                     |



**WEIGHT OF BUILDING MATERIALS**  
**(APPROXIMATE)**

WEIGHTS IN POUNDS PER SQUARE FOOT

**ROOFING**

|                                 |      |
|---------------------------------|------|
| WOOD SHINGLES                   | 3.0  |
| WOOD SHAKES                     | 6.0  |
| ASPHALT SHINGLES                | 2.2  |
| SPANISH TILE                    | 19.0 |
| TILE WITH MORTAR - - ADD 10 PSF |      |
| COPPER                          | 1.5  |
| CEMENT TILE                     | 16.0 |
| SLATE (1.4")                    | 10.0 |

**COMPOSITION:**

|                               |     |
|-------------------------------|-----|
| 2-45# cap sheets              | 1.3 |
| 2-15# felts and 90# cap sheet | 2.0 |
| 3-15# felts and 400# gravel   | 5.8 |

**SHEATHING**

|                        |      |
|------------------------|------|
| 1 x 6 SPACED SHEATHING | 1.25 |
|------------------------|------|

**PLYWOOD**

|          |     |
|----------|-----|
| 1/2 INCH | 1.5 |
| 3/4 INCH | 2.2 |
| 3/8 INCH | 1.1 |

**DRYWALL**

|          |     |
|----------|-----|
| 1/2 INCH | 2.0 |
| 5/8 INCH | 3.0 |

|                  |     |
|------------------|-----|
| RIGID INSULATION | 1.5 |
|------------------|-----|

**MK 10/95**

n:\BUILDING\FORMS\RE-ROOF"





RANCHO PALOS VERDES

APPLICATION FOR A BUILDING PERMIT AND A CERTIFICATE OF USE & OCCUPANCY

30940 HAWTHORNE BOULEVARD  
RANCHO PALOS VERDES, CA 90274  
(213) 377-0360

1 — BUILDING INSPECTOR

| TRACT   | BLOCK | LOT | THE FOLLOWING WORK IS AUTHORIZED IN THIS PERMIT:  |                        |
|---|-------|-----|---|------------------------|
| BUILDING ADDRESS <b>29129 WHITES POINT</b>  |       |     | <input type="checkbox"/> STRUCT. <input type="checkbox"/> PLUMB. <input type="checkbox"/> MECH. <input type="checkbox"/> ELECT. SPECIFY OTHER BELOW   |                        |
| AREA CROSS STREET   |       |     |   |                        |
| OWNER <b>MR. &amp; MRS. ABE HEPNER</b>  |       |     | TYPE OF PROJECT: <input type="checkbox"/> NEW <input checked="" type="checkbox"/> ALTER <input type="checkbox"/> ADDITION   |                        |
| ADDRESS <b>29129 WHITES POINT DR.</b>   |       |     | <input type="checkbox"/> REPAIR <input type="checkbox"/> CONVERT <input type="checkbox"/> DEMO <input type="checkbox"/> OCCUPANCY PMT.  |                        |
| CITY <b>Rancho Palos Verdes, Ca.</b> ZIP <b>(213)</b> PH. <b>377-6278</b>   |       |     | ZONE:   | APPLICATION TYPE: NO.: |
| ARCHITECT/DESIGNER <b>E. Jerome Tamen, AIA</b> NO. <b>C006530</b>   |       |     | STRUCTURE HEIGHT:   |                        |
| ADDRESS <b>1326 16th St. Santa Monica Ca</b>  |       |     | CLEARED BY: DATE:   |                        |
| CITY <b>90404</b> ZIP <b>(213)</b> PH. <b>451-8919</b>  |       |     | REMARKS / SPECIAL CONDITIONS:   |                        |
| ENGINEER <b>N.A.</b> LIC. NO.   |       |     |   |                        |
| ADDRESS   |       |     |   |                        |
| CITY ZIP PH.  |       |     |   |                        |
| <b>LICENSED CONTRACTORS DECLARATION</b><br>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.<br>License Class _____ License Number _____<br><br>Date _____ Contractor _____<br>ADDRESS _____<br>CITY AND ZIP _____ PHONE: _____  |       |     | <b>ALL WORK ON INTERIOR</b>   |                        |
| <b>CONSTRUCTION LENDING AGENCY</b><br>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) LENDERS NAME _____<br>LENDERS ADDRESS _____   |       |     | DUMP DEPOSIT REQUIRED:  |                        |
| <b>OWNER-BUILDER DECLARATION</b><br>I hereby affirm that I am exempt from the Contractor's License Law for the following reason:<br><input type="checkbox"/> 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.<br><input checked="" type="checkbox"/> I, as owner of the property, am exclusively contracting with licensed contractors to construct the project.<br><input type="checkbox"/> I am exempt under Sec. _____, B&PC for this reason _____<br><b>9/5/87</b> Date: _____ OWNER: <i>[Signature]</i>  |       |     | OCC. CLASS TYPE CONST. CODE YEAR: OCC. CODE #:  |                        |
| <b>WORKERS' COMPENSATION DECLARATION</b><br>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. POLICY NO. _____<br>COMPANY _____<br><input type="checkbox"/> Certified copy is hereby furnished. DATE EXPIRES: _____<br><input type="checkbox"/> Certified copy is filed with the City of Rancho Palos Verdes. CITY VERIFIED: _____<br>Date: _____ APPLICANT: _____<br><b>CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE</b><br>(This section need not be completed if permit is for \$100 or less)<br>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.<br>Date: _____ APPLICANT: _____<br>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. |       |     | USE/OCCUPANCY NEW SIZE SQ. FT. EXISTING ADD.<br><b>MASTER BATH REMO</b> <b>2807</b><br>2<br>3<br>4<br>TOTAL VALUATION: <b>\$14,000.00</b>   |                        |
| 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, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES.<br><i>[Signature]</i> <b>10/8/87</b><br>Signature of Applicant or Agent Date<br>Print Applicants/Agents Name  |       |     | GRADING PMT. REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO GRADING PMT. NO. DATE<br>ROUGH GRADING APPROVED BY: REMARKS INSTNS./<br><b>F 2-12-88</b>   |                        |
| INSTNS./REMARKS:  |       |     | <b>PERMIT FEES</b><br>ELECT. SERV. METER STRUCTURAL <b>\$225.00</b><br>ELECTRICAL: <b>\$154.00</b> ISSUANCE FEE <b>\$16.00</b><br>PLUMBING: <b>54.00</b> SUBTOTAL<br>MECHANICAL: <b>8.00</b><br>GAS SERV. METER PLAN CHECK <b>\$16.00</b><br>PRE GRADE INSPN. TOTAL PERMIT FEE: <b>334.40</b> |                        |
|   |       |     | PLAN CHECK BY: ISSUANCE APPROVED  |                        |

BUILDING ADDRESS **29129 WHITES POINT**

VALIDATION (OFFICE USE ONLY)



## TYPE INSPECTION

## INSPECTION RECORDS

| PLUMBING  | DATE    | APPROVED/INSPR'S<br>SIGNATURE | REMARKS                        |
|---|---------|-------------------------------|--------------------------------|
| GROUND SOIL   |         |                               |                                |
| GROUND WATER  |         |                               |                                |
| TOP OUT   | 11-2-87 |                               |                                |
| SEWER   |         |                               |                                |
| GAS TEST  |         |                               |                                |
| SANI.-DIST. CERT. REQ'D.                                    |         |                               |                                |
| FINAL PLUMBING  | 2/12/88 |                               |                                |
| MECHANICAL  | DATE    | APPROVED/INSPR'S<br>SIGNATURE | REMARKS                        |
| UNDERGROUND   |         |                               |                                |
| ROUGH   |         |                               |                                |
| COMB. VENT.   |         |                               |                                |
| AIR COND.   |         |                               |                                |
| VENT FAN  | 11-2-87 |                               |                                |
| FINAL MECHANICAL  | 2/12/88 |                               |                                |
| ELECTRICAL  | DATE    | APPROVED/INSPR'S<br>SIGNATURE | REMARKS                        |
| TEMP. CONSTN. POWER   |         |                               |                                |
| UNDERGROUND:<br>PVC-METAL-D.B.C.                            |         |                               |                                |
| ROUGH WIRING<br>RECEPT. SPACING-<br>SERVICE - CIRCUIT       | 11-2-87 |                               | CHECK GROUND BUS AT INSULATION |
| FIXTURES - TRIM<br>BONDINGS                                 |         |                               |                                |
| POOL LIGHT  |         |                               |                                |
| REQ'D. FENCE/WALL   |         |                               |                                |
| FINAL ELECTRICAL  | 2/12/88 |                               |                                |
| STRUCTURAL  | DATE    | APPROVED/INSPR'S<br>SIGNATURE | REMARKS                        |
| FOUNDATION: LOCATION<br>REINFORCED <input type="checkbox"/> |         |                               |                                |
| SLAB: REINF. <input type="checkbox"/>                       |         |                               |                                |
| MEMBRANE <input type="checkbox"/>                           |         |                               |                                |
| UNDERPINNING  |         |                               |                                |
| MASONRY BOND BEAM   |         |                               |                                |
| FIREPLACE   |         |                               |                                |
| ROOF FRAMING<br>ROOF SHEATHING                              |         |                               |                                |
| FRAMING   | 11-2-87 |                               |                                |
| INSULATION<br>SOUND/ENERGY                                  | 11-3-87 |                               |                                |
| LATH EXTERIOR   |         |                               |                                |
| LATH INTERIOR   |         |                               |                                |
| DRYWALL   | 11-3-87 |                               |                                |
| PLASTER, BROWN COAT   |         |                               |                                |
|   |         |                               |                                |
|   |         |                               |                                |
|   |         |                               |                                |
| BUILDING FINAL  | 2/12/88 |                               |                                |
| ZONING FINAL  |         |                               |                                |



SEE REVERSE FOR EXPLANATORY LANGUAGE



| APPROVALS                 | DATE                  | INSPECTOR'S SIGNATURE |
|---------------------------|-----------------------|-----------------------|
| UNDER SLAB 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 5 (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 \_\_\_\_\_

# INSPECTOR'S NOTES

407122  
800000  
800100  
800100  
10-0310



# APPLICATION FOR PERMIT HEATING - VENTILATING - AIR CONDITIONING

1

## BUILDING AND SAFETY DIVISION

| FOR APPLICANT TO FILL IN<br>(PRINT OR TYPE ONLY)   |   |              |      | BUILDING ADDRESS   |  |
|--|---|--------------|------|--|--|
| NO.  | TYPE OF APPLIANCE OR EQUIPMENT  | FEE          |      | LOCALITY   |  |
|  | ABSORPTION UNIT, BTU _____  |              |      | NEAREST CROSS ST.  |  |
|  | AIR HANDLING UNIT, CFM _____  |              |      | OWNER  |  |
|  | BOILER, BTU _____   |              |      | MAIL ADDRESS   |  |
| 1  | COMPRESSOR, BTU <u>60,000</u>   | <u>15.00</u> |      | CITY <u>R. P. V.</u> TEL. NO. <u>377-6298</u>                |  |
|  | VENTILATION SYSTEM  |              |      | CONTRACTOR <u>Tom Gamble &amp; Sons</u>                      |  |
|  | EVAPORATIVE COOLER  |              |      | ADDRESS <u>459-E Alondra Blvd</u>                            |  |
| 1  | FURNACE: FAN <input checked="" type="checkbox"/> GRAVITY FLOOR _____ BTU <u>125,000</u> | <u>30.00</u> |      | CITY <u>GARDENA</u> TEL. NO. <u>327-0141</u>                 |  |
|  | HEATER: SUSPENDED _____ UNIT _____ WALL _____   |              |      | STATE LICENSE NO. <u>162339</u> LIC. CLASS <u>920</u>        |  |
|  |   |              |      | DISTRICT NO. _____ GROUP _____ ZONE _____ PROCESSED BY _____ |  |
|  |   |              |      | INSPECTION RECORD  |  |
|  | Plan check fee 25% of above.  |              |      |  |  |
|  | PERMIT ISSUING FEE \$   | <u>10.50</u> |      |  |  |
|  | TOTAL FEE   | <u>55.50</u> |      |  |  |
| PLAN CHECK APPLICANT   |   |              |      |  |  |
| NAME   |   |              |      |  |  |
| ADDRESS  |   |              |      |  |  |
| CITY   |   |              |      | TEL. NO.   |  |
| <p>I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING HEATING, VENTILATING, AIR CONDITIONING.</p> <p>I HEREBY CERTIFY THAT I AM NOT ACTING IN VIOLATION OF CHAPTER 9, DIVISION 3 OF THE BUSINESS AND PROFESSIONAL CODE OF THE STATE OF CALIFORNIA.</p> <p>SIGNATURE OF PERMITTEE <u>Tom Gamble</u></p> |   |              |      |  |  |
| PLAN CHECK VALIDATION  |   | CK.          | M.O. | CASH   |  |
| PERMIT VALIDATION  |   | CK.          | M.O. | CASH   |  |

INSPECTOR COPY

3 3 22 MAY 25 E 4 1

55.50 2



## APPLICATION FOR ELECTRICAL PERMIT

1

## BUILDING AND SAFETY DIVISION

## FOR APPLICANT TO FILL IN

|   | EACH | NO. | FEE   |
|---|------|-----|-------|
| New Residential Bldgs. & Pools            |      |     |       |
| 1 & 2 Family Sq. Ft. _____                | \$   | —   | \$    |
| Multi-family Sq. Ft. _____                |      | —   |       |
| Residential Swimming Pools                |      |     |       |
| Outlets: Light, Switch & Receptacle       |      |     |       |
| First 20                                  |      |     |       |
| Additional                                |      |     |       |
| Lighting Fixtures                         |      |     |       |
| First 20                                  |      |     |       |
| Additional                                |      |     |       |
| Fixed Appliances Not Over 1 HP            |      |     |       |
| Range _____ Heater _____ D.W. _____       |      |     |       |
| Oven _____ Dryer _____ W.M. _____         |      |     |       |
| Top _____ FAU _____ W.H. _____            |      |     |       |
| Hood _____ Fan _____                      |      |     |       |
| Disp. _____ A.C. _____                    |      |     |       |
| Power Apparatus & Large Appliances        |      |     |       |
| Size & Type HP, KW, KVA, or KVAR          |      |     |       |
| Up to 1 Incl.                             |      |     |       |
| <u>5HP</u> Over 1 to 10 Incl.             | 1    |     | 7.50  |
| Over 10 to 50 Incl.                       |      |     |       |
| Over 50 to 100 Incl.                      |      |     |       |
| Over 100                                  |      |     |       |
| Services                                  |      |     |       |
| 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           |      |     |       |
| (Other) _____                             |      |     |       |
| PERMIT FEE (Sub-Total)                    |      |     |       |
| PLAN CHECKING FEE (One-Fourth Permit Fee) |      |     |       |
| PERMIT ISSUING FEE                        |      |     | 10.50 |
| TOTAL FEE                                 |      |     | 18.00 |

|                        |                           |
|------------------------|---------------------------|
| JOB ADDRESS            | 29129 - Whites Point DR   |
| LOCALITY               | R.P.V.                    |
| NEAREST CROSS ST.      |                           |
| OWNER OR FIRM NAME     | A. HEPPNER                |
| MAIL ADDRESS           | SAM C                     |
| CITY                   | R.P.V. Tel. No. 377-6298  |
| PLAN CHECK APPLICANT   |                           |
| ADDRESS                |                           |
| CITY                   | Tel. No.                  |
| PERMIT APPLICANT       | Tom Gamble & Sons         |
| ADDRESS                | 459-E-Alondra Blvd        |
| CITY                   | GARDENA Tel. No. 327-0141 |
| LICENSE OR REG. NUMBER | 162339 Class. C20         |

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

PERMITEE SIGNATURE *Tom Gamble*

|                      |         |                       |               |
|----------------------|---------|-----------------------|---------------|
| DISTRICT NO.         | 1206    | PROCESSED BY          | <i>Bowley</i> |
| APPROVALS            | DATE    | INSPECTOR'S SIGNATURE |               |
| TEMP. POWER POLE     |         |                       |               |
| UNDERSLAB WORK       |         |                       |               |
| ROUGH CONDUIT        |         |                       |               |
| WIRING               |         |                       |               |
| FIXTURES             |         |                       |               |
| POWER AUTHORIZED     |         |                       |               |
| UTILITY CO. NOTIFIED | 5/26/78 | <i>Remel</i>          |               |
| FINAL                |         |                       |               |
| NOTES                |         |                       |               |

PLAN CHECK VALIDATION

CK.

M.O.

CASH

PERMIT VALIDATION

CK.

M.O.

CASH

331 MAY 25 E 02

18.00

INSPECTOR COPY



APPLICATION FOR ELECTRICAL PERMIT *RPO.* **1**

COUNTY OF LOS ANGELES  
DEPARTMENT OF COUNTY ENGINEER  
BUILDING AND SAFETY DIVISION

## FOR APPLICANT TO FILL IN

## New Residential Bldgs &amp; Pools

1 & 2-Family, Sq. Ft.                     Multi-family Sq. Ft.                     Residential Swimming Pools                     

## Outlets: Light, Switch &amp; Receptacle

First 20

Additional

## Lighting Fixtures

First 20

Additional

## Fixed Appliances Not Over 1 HP

Range        Heater        D.W.       Oven        Dryer        W.M.       Top        FAU        W.H.       Hood        Fan       Disp.        A.C.       

## Power Apparatus &amp; Large Appliances

Size & Type gdc HP, KW, KVA, or KVAR           Up to 1 Incl.           Over 1 to 10 Incl.           Over 10 to 50 Incl.           Over 50 to 100 Incl.           Over 100

## Services

0- 200 Amp. Under 600 V

201-1000 Amp. Under 600 V

Over 1000 Amp. or Over 600 V

## Temp. Power Pole &amp; Appurtenances

Sign with One Branch Circuit

Additional Sign Branch Circuits

(Other)                     

PERMIT FEE

(Sub-Total)

PLAN CHECKING FEE

(One-Fourth Permit Fee)

PERMIT ISSUING FEE

\$6.00

TOTAL FEE

JOB

ADDRESS 29129 White Plains

LOCALITY

NEAREST  
CROSS ST.

OWNER OR

FIRM NAME Heedner

MAIL

ADDRESS 29129 White PlainsCITY RPO.

Tel. No.

PLAN CHECK

APPLICANT

ADDRESS

CITY

Tel. No.

PERMIT

APPLICANT Pacific InstallerADDRESS 6917-A ArtesiaCITY La Brea

Tel. No.

3278351

LICENSE OR

REG. NUMBER 211898

Class.

C20

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION  
AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY  
WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING  
ELECTRICAL WIRING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR  
LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF  
CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE  
DESCRIBED RESIDENTIAL PROPERTY.

PERMITEE

SIGNATURE AE Boss

DISTRICT NO.

12.06

PROCESSED BY

O'Neal

APPROVALS

DATE

INSPECTOR'S  
SIGNATURE

TEMP. POWER POLE

UNDERSLAB WORK

ROUGH CONDUIT

WIRING

FIXTURES

POWER AUTHORIZED

UTILITY CO. NOTIFIED

FINAL

NOTES

PLAN CHECK VALIDATION

CK.

M.O.

CASH

PERMIT VALIDATION

CK.

MO.

CASH

LABO 266576 FEB 17

24

6.00

INSPECTORS COPY

O'Neal



## APPLICATION FOR BUILDING PERMIT

FOR APPLICANT TO FILL IN (Print or type only)

1

|  |                |                            |   |
|--|----------------|----------------------------|---|
| BUILDING ADDRESS 29129 WHITE POINT DR  |                |                            |   |
| CITY Rancho Palos Verdes ZIP 90274   |                |                            |   |
| SIZE OF LOT 120X65   |                | NO. OF BLDGS. NOW ON LOT 1 |   |
| TRACT 23053  | BLOCK          | LOT NO 192                 |   |
| OWNER MIC & MRS A. NEPNER  |                | TEL. NO. 377-6278          |   |
| ADDRESS 29129 WHITE POINT DR   |                |                            |   |
| CITY Rancho Palos Verdes   |                | ZIP 90274                  |   |
| ARCHITECT OR ENGINEER  |                | TEL. NO.                   |   |
| ADDRESS  |                |                            |   |
| CONTRACTOR ANTHONY POOKS   |                | TEL. NO. 861-0381          |   |
| ADDRESS 5871 FIRESTONE   |                | LIC. NO. 190179            |   |
| CITY SOUTH GATE  |                | LIC. CLASS                 |   |
| CONSTRUCTION LENDER NAME AND BRANCH  |                |                            |   |
| ADDRESS  |                | CITY                       |   |
| SQ. FT. SIZE 308   | NO. OF STORIES | NO. OF FAMILIES            | CHECK ONE                               |
| DESCRIPTION OF WORK  |                |                            | NEW <input checked="" type="checkbox"/> |
| WOOD DECK (Pool Deck)  |                |                            | ADD <input type="checkbox"/>            |
| 44X7   |                |                            | ALTER <input type="checkbox"/>          |
| USE OF EXISTING BLDG.  |                |                            | REPAIR <input type="checkbox"/>         |
| APPLICANT (PRINT) Norman Croot   |                |                            | DEMOL <input type="checkbox"/>          |
| BY (SIGNATURE) Norman Croot  |                |                            |   |
| VALUATION \$ 725 <sup>00</sup>   |                |                            |   |
| I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING BUILDING CONSTRUCTION. I CERTIFY THAT IN DOING THE WORK AUTHORIZED HEREBY I WILL NOT EMPLOY ANY PERSON IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA IN RELATING TO WORKMEN'S COMPENSATION INSURANCE. |                |                            |   |
| SIGNATURE OF PERMITTEE Norman Croot  |                |                            |   |
| ADDRESS 18105 E. Valley Blvd   |                |                            |   |
| CITY LA Puente   |                | TEL. NO. 964-7589          |   |

|   |                                    |   |                 |
|---|------------------------------------|---|-----------------|
| BUILDING ADDRESS 29129 Whitespoint Dr.  |                                    |   |                 |
| LOCALITY R.P.V.   |                                    |   |                 |
| NEAREST CROSS ST. VERDE RIDGE HAWTHORNE   |                                    |   |                 |
| ASSESSOR MAP BOOK   |                                    | PAGE  | PARCEL          |
| DISTRICT 12.06  | GROUP Deck                         | TYPE CONST.   | FIRE ZONE 3     |
| STATISTICAL CLASSIFICATION CLASS NO. 20 DWELL. UNITS 0  |                                    |   | SEWER MAP BK PG |
| USE ZONE RA   | MAP NO. 027H165 SPECIAL CONDITIONS |   |                 |
| ROAD DEPARTMENT APPROVAL REQUIRED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |                                    |   |                 |
| BLDG. SETBACK FROM FRONT PROP. LINE OF (STREET)   |                                    |   |                 |
| HIGHWAY +   | YARD =                             | TOTAL SETBACK FROM FRONT PROP. LINE   | TYPE OF HIGHWAY |
| +   | =                                  |   | EXISTING WIDTH  |
| BLDG. SETBACK FROM SIDE PROP. LINE OF (STREET)  |                                    |   |                 |
| HIGHWAY +   | YARD =                             | TOTAL SETBACK FROM SIDE PROP. LINE  | TYPE OF HIGHWAY |
| +   | =                                  |   | EXISTING WIDTH  |
| CORNER CUTOFF YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>                     |                                    |   |                 |
| IN OPEN SPACE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>                     |                                    |   |                 |
| IN COASTAL ZONE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>                   |                                    |   |                 |
| ENVIRONMENTAL IMPACT  |                                    | CATEGORICAL EXEMPTION YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |                 |
|   |                                    | EXEMPTION DECLARATION SIGNED (DATE)   |                 |
|   |                                    | IMPACT REPORT PROCESSED (DATE)  |                 |
| FINAL DATE 7/31/75 BY W. Woods  |                                    |   |                 |
| P.C. FEE \$ 9.00  |                                    | PMT. FEE \$ 15.00   |                 |

INSPECTOR COPY

PLAN CHECK VALIDATION

CK

M.O. CASH

598495 JUL 8 2 3 F 9.00

PERMIT VALIDATION

CK

M.O. CASH

624575 JUL 18 1 F 15.00

Jelen

Bewley



## PLANS TO APPLICANT

## INSPECTOR'S NOTES

|     |      |          |      |          |
|-----|------|----------|------|----------|
| TO: |      | RETURNED |      | APPROVED |
| NO. | DATE | NO.      | DATE |          |
|     |      |          |      |          |
|     |      |          |      |          |
|     |      |          |      |          |
|     |      |          |      |          |

| APPROVALS  | REQUIRED |    | DATE RECEIVED<br>OR APPROVED |
|--|----------|----|------------------------------|
|  | YES      | NO |                              |
| WATER CERTIFICATE                                |          |    |                              |
| HEALTH DEPARTMENT                                |          |    |                              |
| FIRE DEPARTMENT                                  |          |    |                              |
| GRADING  |          |    |                              |
| GEOLOGICAL                                       |          |    |                              |
| PEDESTRIAN PROTECTION<br>(FENCE) (CANOPY)        |          |    |                              |
| SPECIAL INSPECTION<br>(CONC.) (MASNRY.) (WELDG.) |          |    |                              |
| LOT DRAINAGE                                     |          |    |                              |
| PARKING  |          |    |                              |
|  |          |    |                              |
|  |          |    |                              |

| APPROVALS                          | DATE    | INSPECTOR'S SIGNATURE |
|------------------------------------|---------|-----------------------|
| LOCATION -<br>(SETBACK & YARDS)    | 7/18/75 | Woods                 |
| FOUNDATIONS                        |         |                       |
| FRAME                              |         |                       |
| LATH/DRYWALL<br>INTERIOR           |         |                       |
| LATH-EXTERIOR                      |         |                       |
| HOUSE NUMBER -<br>CORRECT & POSTED |         |                       |
|                                    |         |                       |
| FINAL -<br>ENTER ON FRONT          |         |                       |
|                                    |         |                       |
|                                    |         |                       |
|                                    |         |                       |



# APPLICATION FOR PERMIT HEATING - VENTILATING - AIR CONDITIONING

1

COUNTY OF LOS ANGELES  
DEPARTMENT OF COUNTY ENGINEER  
BUILDING AND SAFETY DIVISION

## FOR APPLICANT TO FILL IN (PRINT OR TYPE ONLY)

| NO. | TYPE OF APPLIANCE OR EQUIPMENT                            | FEE          |  |
|-----|---|--------------|--|
|     | ABSORPTION UNIT, BTU _____                                |              |  |
|     | AIR HANDLING UNIT, CFM _____                              |              |  |
| 1   | BOILER, BTU <u>380</u>                                    | <u>11.25</u> |  |
|     | COMPRESSOR, BTU _____                                     |              |  |
|     | VENTILATION SYSTEM  |              |  |
|     | EVAPORATIVE COOLER  |              |  |
|     | FURNACE: FAU _____ GRAVITY _____<br>FLOOR _____ BTU _____ |              |  |
|     | HEATER: SUSPENDED _____ UNIT _____<br>WALL _____          |              |  |
|     |   |              |  |
|     |   |              |  |
|     |   |              |  |
|     | Plan check fee 25% of above. See reverse.                 |              |  |
|     | PERMIT ISSUING FEE \$                                     | <u>4.60</u>  |  |
|     | TOTAL FEE   | <u>15.75</u> |  |

### PLAN CHECK APPLICANT

NAME

ADDRESS

CITY

TEL. NO.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION  
AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY  
WITH ALL ORDINANCES AND LAWS REGULATING HEATING, VENTI-  
LATING, AIR CONDITIONING.

I HEREBY CERTIFY THAT I AM NOT ACTING IN VIOLATION  
OF CHAPTER 9, DIVISION 3, OF THE BUSINESS AND PROFESSIONAL  
CODE OF THE STATE OF CALIFORNIA.

SIGNATURE  
OF PERMITTEE

PLAN CHECK VALIDATION

CK. M.O. CASH

|                   |                    |            |      |
|-------------------|--------------------|------------|------|
| BUILDING ADDRESS  | 29129 Whites Point |            |      |
| LOCALITY          | Rancho P V         |            |      |
| NEAREST CROSS ST. | Hawthorne          |            |      |
| OWNER             | Abe Hepner         |            |      |
| MAIL ADDRESS      | same               |            |      |
| CITY              | TEL. NO.           | 377 6278   |      |
| CONTRACTOR        | DELTA INC          |            |      |
| ADDRESS           | 12425 Carmenita    |            |      |
| CITY              | TEL. NO.           | 944 8926   |      |
| STATE LICENSE NO  | 272825             | LIC. CLASS | c-36 |

DISTRICT NO. GROUP ZONE PROCESSED BY

12.06 IRAI O'Neal

### INSPECTION RECORD

BL# OK

INSPECTOR COPY

APPROVALS

DATE

INSPECTOR'S SIGNATURE

ROUGH

FINAL

PERMIT VALIDATION

CK.

M.O.

CASH

LAC 496075 JUN 64 1 F 15.75 36

O'Neal



## 1

HARVEY T. BRANDT, COUNTY ENGINEER

| FOR APPLICANT TO FILL IN (PRINT OR TYPE)  |                           |             |       |
|---|---------------------------|-------------|-------|
| NUMBER  | FIXTURE OR ITEM           | @           | FEE   |
|   | WATER CLOSET              | 1.75        |       |
|   | BATH TUB                  | 1.75        |       |
|   | SHOWER                    | 1.75        |       |
|   | LAVATORY                  | 1.75        |       |
|   | SINK                      | 1.75        |       |
|   | DISHWASHER                | 1.75        |       |
|   | CLOTHES WASHER            | 1.75        |       |
| X   | SWIMMING POOL RECEPTOR    | 1.75        |       |
|   | LAWN SPRINKLER SYSTEM     | 1.75        |       |
|   | WATER HEATER              | 1.75        |       |
| 1   | GAS SYSTEM OUTLETS        | 1.75        | 2 6 3 |
|   | OUTLETS OVER 5 PER SYSTEM | .30         |       |
|   |                           |             |       |
|   |                           |             |       |
|   |                           |             |       |
|   |                           |             |       |
|   |                           |             |       |
| Plan check fee  |                           | See Reverse |       |
| PLUMBING PERMIT ISSUING FEE \$  |                           |             | 4 50  |
|   |                           | TOTAL FEE   | 7 13  |
| Plan check applicant  |                           |             |       |
| Name  |                           |             |       |
| Address   |                           |             |       |
| City  |                           | Tel. No.    |       |
| <p>I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING.</p> <p>I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF, AND INTEND TO RESIDE IN THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.</p> |                           |             |       |
| SIGNATURE OF PERMITTEE  |                           |             |       |

|                           |       |                    |                       |
|---------------------------|-------|--------------------|-----------------------|
| BUILDING ADDRESS          |       | 29129 Whites Point |                       |
| LOCALITY                  |       | Rancho P V         |                       |
| NEAREST CROSS ST.         |       | Hawthorne          |                       |
| OWNER                     |       | Abe Hepner         |                       |
| MAIL ADDRESS              |       | same               |                       |
| CITY                      |       | TEL. NO.           | 377 6278              |
| CONTRACTOR DELTA INC      |       |                    |                       |
| ADDRESS 12425 Carmenita   |       |                    |                       |
| CITY                      |       | TEL. NO.           | 944 8926              |
| STATE LICENSE NO.         |       | LIC CLASS          | c-36'                 |
| DISTRICT NO.              | GROUP | ZONE               | PROCESSED BY          |
| 12-06                     | I     | RAI                | O'Neal                |
| INDUSTRIAL WASTE APPROVAL |       |                    |                       |
| INSTRUCTION RECORD        |       |                    |                       |
| BL# 00739                 |       |                    |                       |
|                           |       |                    |                       |
|                           |       |                    |                       |
|                           |       |                    |                       |
|                           |       |                    |                       |
|                           |       |                    |                       |
|                           |       |                    |                       |
|                           |       |                    |                       |
| APPROVALS                 |       | DATE               | INSPECTOR'S SIGNATURE |
| UNDER SLAB WORK           |       |                    |                       |
| ROUGH PLUMBING            |       |                    |                       |
| GAS PIPING                |       | 6/18/75            | Wood                  |
| GAS VENT                  |       |                    |                       |
| HOT WATER HEATER          |       |                    |                       |
| PLUMBING FIXTURES         |       | 2-4-76             | Wood                  |
| GAS TEST                  |       | 6/18/75            | Wood                  |
| UTILITY CO. NOTIFIED      |       |                    |                       |
| FINAL                     |       | 2-4-76             | Wood                  |

INSPECTOR COPY

## PLAN CHECK VALIDATION

CK

M. O.

CASH

LAC 495975 JUN 6

6

5 F

M.O.

CASH

713

to

O'Neal



# APPLICATION FOR ELECTRICAL PERMIT

COUNTY OF LOS ANGELES  
DEPARTMENT OF COUNTY ENGINEER  
BUILDING AND SAFETY DIVISION

JOB ADDRESS 29129 Whites Point

LOCALITY *RRV*

NEAREST CROSS ST.

OWNER OR FIRM NAME Abe Hepner

MAIL ADDRESS as job

CITY TEL. NO. 377-6278

PLAN CHECK APPLICANT

ADDRESS

CITY TEL. NO.

PERMIT APPLICANT Cobine Electric Co.

ADDRESS 1607 Chestnut St.

CITY Alhambra TEL. NO. 282-0315

LICENSE OR REG. NUMBER 229847 CLASS. C-10

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

PERMITEE SIGNATURE *R. Cobine*

DISTRICT NO.

PROCESSED BY

APPROVALS

DATE

INSPECTOR'S SIGNATURE

TEMP. POWER POLE

UNDERSLAB WORK

ROUGH CONDUIT

WIRING

FIXTURES

POWER AUTHORIZED

UTILITY CO. NOTIFIED

FINAL

NOTES:

## FOR APPLICANT TO FILL IN

### OUTLETS

| RECEPT.  |   |          | NO. | EACH | FEE |
|----------|---|----------|-----|------|-----|
| LIGHT    | 1 | TOTAL    |     | \$   | \$  |
| SWITCH   | 1 |          |     |      |     |
|          |   | FIRST 20 | 2   | .25  | 76  |
|          |   | OVER 20  |     | .10  |     |
| LIGHTING |   | FIRST 20 | 1   | .25  | 38  |
| FIXTURES |   | OVER 20  |     | .10  |     |

### RESIDENTIAL APPLIANCES

RANGE DRYER WTR. HTR.

STA. COOK DISP. F.A.U.

SPACE HTR. AIR COND.

CLOTHES WASH. DISHWASH.

FAN OTHER

1.00

MOTORS, TRANSFORMERS  
IND. HEATERS, ETC.  
SIZE & TYPE

RATING  
HP. KW. KVA.  
OVER TO

0 - 1

1.00

1 - 10

3.00

9 00

10 - 50

5.00

50 - 100

10.00

100 - 500

15.00

SIGN, GAS  
TUBE, OR  
MARQUEE

SIGN AND ONE CIRCUIT

5.00

ADDITIONAL CIRCUITS

1.00

SERVICE NOT OVER 600 VOLTS OR 200 AMP

3.00

SERVICE OVER 600 VOLTS OR 200 AMP

10.00

TEMP SERVICE, POLE, & APPURTENANCES

5.00

TEMP LIGHT OR RECEPT. SYSTEM

3.00

PERMIT FEE (SUB TOTAL)

10 14

PLAN CHECK FEE

PERMIT ISSUING FEE

3.00

4 50

TOTAL FEE

14 54

PLAN CHECK VALIDATION

CK.

M.O.

CASH

PERMIT VALIDATION

CK.

M.O.

CASH

LAC 495875 JUN 6 2 F 14.54

O'Neal

INSPECTOR COPY



## CITY OF RANCHO PALOS VERDES

## APPLICATION FOR PLUMBING PERMIT

1

COUNTY OF LOS ANGELES  
DEPARTMENT OF COUNTY ENGINEER  
BUILDING AND SAFETY DIVISION

FOR APPLICANT TO FILL IN (PRINT OR TYPE)

| NUMBER | FIXTURE OR ITEM           | @ | FEE |
|--------|---------------------------|---|-----|
|        | WATER CLOSET              |   |     |
|        | BATH TUB                  |   |     |
|        | SHOWER                    |   |     |
|        | LAVATORY                  |   |     |
|        | SINK                      |   |     |
|        | DISHWASHER                |   |     |
|        | CLOTHES WASHER            |   |     |
| 1      | SWIMMING POOL RECEPTOR    |   | 203 |
|        | LAWN SPRINKLER SYSTEM     |   |     |
|        | WATER HEATER              |   |     |
|        | GAS SYSTEM OUTLETS        |   |     |
|        | OUTLETS OVER 5 PER SYSTEM |   |     |
| 1      | Fresh Water               |   | 203 |

Plan check fee

PLUMBING PERMIT ISSUING FEE \$

TOTAL FEE

Plan check applicant

Name

Address

City

Tel. No.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF, AND INTEND TO RESIDE IN THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

SIGNATURE OF PERMITTEE

BUILDING ADDRESS

LOCALITY

NEAREST CROSS ST.

OWNER

MAIL ADDRESS

CITY

TEL. NO.

CONTRACTOR

ADDRESS

CITY

TEL. NO.

STATE LICENSE NO.

LIC CLASS

DISTRICT NO.

GROUP

ZONE

PROCESSED BY

INDUSTRIAL WASTE APPROVAL

INSPECTION RECORD

APPROVALS

DATE

INSPECTOR'S SIGNATURE

UNDER SLAB WORK

ROUGH PLUMBING

GAS PIPING

GAS VENT

HOT WATER HEATER

PLUMBING FIXTURES

GAS TEST

UTILITY CO. NOTIFIED

FINAL

PERMIT VALIDATION

CK.

M.O.

CASH

PLAN CHECK VALIDATION

CK.

M.O.

CASH

LAGO 432275 MAY 23 5 F

9.76

INSPECTOR COPY

Bewley



# CITY OF RANCHO PALOS VERDES

## APPLICATION FOR BUILDING PERMIT

FOR APPLICANT TO FILL IN (Print or type only)

1

|   |                |                          |   |
|---|----------------|--------------------------|---|
| BUILDING ADDRESS <b>29129 Whites Pt Drive</b> |                |                          |   |
| CITY <b>Rancho Palos Verdes 90274</b>         |                |                          |   |
| SIZE OF LOT <b>65X120</b>                     |                | NO. OF BLDGS. NOW ON LOT |   |
| TRACT <b>28053</b>                            | BLOCK <b>1</b> | LOT NO <b>192</b>        |   |
| OWNER <b>A Herdner</b>                        |                | TEL. NO.                 |   |
| ADDRESS <b>29040 DORNBURG DR</b>              |                |                          |   |
| CITY <b>Rancho Palos Verdes 90274</b>         |                |                          |   |
| ARCHITECT OR ENGINEER <b>R J KODZIEJ</b>      |                | TEL. NO. <b>861-0381</b> |   |
| ADDRESS <b>5871 E Fildstone Blvd</b>          |                |                          |   |
| CONTRACTOR <b>Anthony Fox</b>                 |                | TEL. NO. <b>861-0388</b> |   |
| ADDRESS <b>5871 E Fildstone</b>               |                | LIC. NO. <b>190179</b>   |   |
| CITY <b>Fildstone</b>                         |                | LIC. CLASS <b>C 53</b>   |   |
| CONSTRUCTION LENDER NAME AND BRANCH           |                |                          |   |
| ADDRESS                                       |                | CITY                     |   |
| SQ. FT. SIZE <b>471</b>                       | NO. OF STORIES | NO. OF FAMILIES          | CHECK ONE                               |
| DESCRIPTION OF WORK <b>Swim Pool</b>          |                |                          | NEW <input checked="" type="checkbox"/> |
|   |                |                          | ADD <input type="checkbox"/>            |
|   |                |                          | ALTER <input type="checkbox"/>          |
|   |                |                          | REPAIR <input type="checkbox"/>         |
|   |                |                          | DEMOL <input type="checkbox"/>          |
| USE OF EXISTING BLDG.                         |                |                          |   |
| APPLICANT (PRINT) <b>R J Kodziej</b>          |                | TEL. NO. <b>861-0388</b> |   |
| BY (SIGNATURE) <b>R J Kodziej</b>             |                |                          |   |
| VALUATION <b>\$5400</b>                       |                |                          |   |

|   |                          |   |                                |
|---|--------------------------|---|--------------------------------|
| BUILDING ADDRESS <b>29129 Whitespoint Dr</b>  |                          |   |                                |
| LOCALITY <b>Rancho</b>  |                          |   |                                |
| NEAREST CROSS ST. <b>Verde Ridge</b>  |                          |   |                                |
| ASSESSOR MAP BOOK   |                          | PAGE  | PARCEL                         |
| DISTRICT <b>1206</b>  | GROUP <b>Pool</b>        | TYPE CONST. <b>3</b>  | FIRE ZONE <b>Bewley</b>        |
| STATISTICAL CLASSIFICATION  |                          |   | SEWER MAP                      |
| CLASS NO. <b>31</b> DWELL. UNITS <b>0</b>   |                          |   | <b>2</b> BK <b>88</b> PG       |
| USE ZONE <b>R1</b>  | MAP NO. <b>027 H 165</b> |   |                                |
| SPECIAL CONDITIONS  |                          |   |                                |
| ROAD DEPARTMENT APPROVAL REQUIRED YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> |                          |   |                                |
| BLDG. SETBACK FROM FRONT PROP. LINE OF (STREET)   |                          |   |                                |
| HIGHWAY +   | YARD =                   | TOTAL SETBACK FROM FRONT PROP. LINE   | TYPE OF EXISTING HIGHWAY WIDTH |
| +   | =                        |   |                                |
| BLDG. SETBACK FROM SIDE PROP. LINE OF (STREET)  |                          |   |                                |
| HIGHWAY +   | YARD =                   | TOTAL SETBACK FROM SIDE PROP. LINE  | TYPE OF EXISTING HIGHWAY WIDTH |
| +   | =                        |   |                                |
| CORNER CUTOFF YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>                     |                          |   |                                |
| IN OPEN SPACE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>                     |                          |   |                                |
| IN COASTAL ZONE YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>                   |                          |   |                                |
| ENVIRONMENTAL IMPACT  |                          | CATEGORICAL EXEMPTION YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |                                |
|   |                          | EXEMPTION DECLARATION SIGNED (DATE)   |                                |
|   |                          | IMPACT REPORT PROCESSED (DATE)  |                                |
| Plancher  |                          | 29.25   |                                |
| Paid  |                          | 14.63   |                                |
| due   |                          | 14.62   |                                |
| FINAL DATE <b>2/4/76</b>  |                          | BY <b>Wood</b>  |                                |
| P.C. FEE \$ <b>14.63</b>  |                          | PMT. FEE \$ <b>48.75</b>  |                                |

|                       |       |                   |       |
|-----------------------|-------|-------------------|-------|
| PLAN CHECK VALIDATION |       | PERMIT VALIDATION |       |
| 397775 MAY 12 21 F    | 14.63 | 432175 MAY 23 1 F | 48.75 |
| 432075 MAY 23 23 F    | 14.62 |                   |       |
| Bewley                |       | Bewley            |       |



## INSPECTOR'S NOTES

| TO:  |         | RETURNED              |      | APPROVED                     |
|--|---------|-----------------------|------|------------------------------|
| NO.  | DATE    | NO.                   | DATE |                              |
|  |         |                       |      |                              |
|  |         |                       |      |                              |
|  |         |                       |      |                              |
| APPROVALS  |         | REQUIRED              |      | DATE RECEIVED<br>OR APPROVED |
|  |         | YES                   | NO   |                              |
| WATER CERTIFICATE                                |         |                       |      |                              |
| HEALTH DEPARTMENT                                |         |                       |      |                              |
| FIRE DEPARTMENT                                  |         |                       |      |                              |
| GRADING  |         |                       |      |                              |
| GEOLOGICAL                                       |         |                       |      |                              |
| PEDESTRIAN PROTECTION<br>(FENCE) (CANOPY)        |         |                       |      |                              |
| SPECIAL INSPECTION<br>(CONC.) (MASNRY.) (WELDG.) |         |                       |      |                              |
| LOT DRAINAGE                                     |         |                       |      |                              |
| PARKING  |         |                       |      |                              |
|  |         |                       |      |                              |
|  |         |                       |      |                              |
|  |         |                       |      |                              |
| APPROVALS  | DATE    | INSPECTOR'S SIGNATURE |      |                              |
| LOCATION -<br>(SETBACK & YARDS)                  | 6/18/75 | Woods                 |      |                              |
| FOUNDATIONS                                      |         |                       |      |                              |
| FRAME  |         |                       |      |                              |
| LATH/DRYWALL<br>INTERIOR                         |         |                       |      |                              |
| LATH-EXTERIOR                                    |         |                       |      |                              |
| HOUSE NUMBER -<br>CORRECT & POSTED               |         |                       |      |                              |
| FINAL -<br>ENTER ON FRONT                        | 7/28/75 | Woods                 |      |                              |
|  |         |                       |      |                              |
|  |         |                       |      |                              |
|  |         |                       |      |                              |







# APPLICATION FOR ELECTRICAL PERMIT

COUNTY OF LOS ANGELES  
DEPARTMENT OF COUNTY ENGINEER  
BUILDING AND SAFETY DIVISION  
JOHN A. LAMBIE, COUNTY ENGINEER  
COLEMAN W. JENKINS, SUPERINTENDENT OF BUILDING

## FOR APPLICANT TO FILL IN

| RECEIPT   | NO.                         | EACH  | FEE   |
|---|-----------------------------|-------|-------|
| LIGHT 24 } TOTAL 94                                 | FIRST 20                    | 20    | 5.00  |
| SWITCH 24 } 94                                      | OVER 20                     | 74    | 7.40  |
| LIGHTING } TOTAL 24                                 | FIRST 20                    | 20    | 5.00  |
| FIXTURES } 24                                       | OVER 20                     | 4     | 4.00  |
| RANGE DRYER 1 WTR. HTR. 1                           |                             |       |       |
| STA. COOK 2 DISP. 1 F.A.U. 1                        |                             |       |       |
| SPACE HTR. 2 AIR COND. 1                            |                             |       |       |
| CLOTHES WASH. 1 DISHWASH. 1                         |                             |       |       |
| FAN 2 OTHER   | 11                          | 1.00  | 11.00 |
| MOTORS, TRANSFORMERS IND. HEATERS, ETC. SIZE & TYPE | RATING HP. KW. KVA. OVER TO |       |       |
|   | 0 - 1                       | 1.00  |       |
|   | 1 - 10                      | 3.00  |       |
|   | 10 - 50                     | 5.00  |       |
|   | 50 - 100                    | 10.00 |       |
|   | 100 - 500                   | 15.00 |       |
| SIGN, GAS TUBE, OR MARQUEE                          | SIGN AND ONE CIRCUIT        | 3.00  |       |
|   | ADDITIONAL CIRCUITS         | 1.00  |       |
| SERVICE NOT OVER 600 VOLTS OR 200 AMP               | 3.00                        | 3.00  |       |
| SERVICE OVER 600 VOLTS OR 200 AMP                   | 5.00                        |       |       |
| TEMP SERVICE, POLE, & APPURTENANCES                 | 3.00                        |       |       |
| PERMIT FEE (SUB TOTAL)                              |                             |       |       |
| PLAN CHECK FEE (50% PERMIT FEE)                     |                             |       |       |
| PERMIT ISSUING FEE                                  | 3.00                        | 3.00  |       |
| SUPPLEMENTARY PERMIT ISSUING FEE                    | 1.00                        |       |       |
| TOTAL FEE   |                             |       | 34.80 |

## PLAN CHECK VALIDATION

CK. M.O. CASH

|                      |                            |
|----------------------|----------------------------|
| BUILDING ADDRESS     | 29129 Whites Point Drive   |
| LOCALITY             | Palos Verdes               |
| NEAREST CROSS ST.    | 192                        |
| OWNER                | Zuckerman Building Co.     |
| MAIL ADDRESS         |                            |
| CITY                 | TEL. NO.                   |
| PLAN CHECK APPLICANT |                            |
| ADDRESS              |                            |
| CITY                 | TEL. NO.                   |
| CONTRACTOR           | Walton Electric Eng. Corp. |
| ADDRESS              | 2612 South Peck Road       |
| CITY                 | Monrovia                   |
| TEL. NO.             | 446-2131                   |
| LICENSE NO.          | 151170                     |
| CLASS.               | C-10                       |

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING ELECTRICAL WIRING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF, AND INTEND TO RESIDE IN, THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

SIGNATURE OF PERMITTEE

W. M. Raymond

|              |       |      |              |
|--------------|-------|------|--------------|
| DISTRICT NO. | GROUP | ZONE | PROCESSED BY |
| 12           | I     | RA   | Zayon        |

NOTES:

| APPROVALS            | DATE    | INSPECTOR'S SIGNATURE |
|----------------------|---------|-----------------------|
| TEMP. POWER POLE     |         |                       |
| UNDERSLAB WORK       |         |                       |
| ROUGH CONDUIT        |         |                       |
| WIRING               | 7-12-71 | W. M. Raymond         |
| FIXTURES             | 3-3-72  | Heb                   |
| POWER AUTHORIZED     |         |                       |
| UTILITY CO. NOTIFIED | 3-6-72  |                       |
| FINAL                | 3-3-72  | Heb                   |

JOSEPH C. ROOCHAN  
SUPERVISING ELECTRICAL ENGINEER

## PERMIT VALIDATION

CK. M.O. CASH

LAC 029871 MAY 21 2 A 34.80



## APPLICATION FOR PERMIT

## SEWER-SEWAGE DISPOSAL

1

COUNTY OF LOS ANGELES  
DEPARTMENT OF COUNTY ENGINEER  
BUILDING AND SAFETY DIVISION  
JOHN A. LAMBIE, COUNTY ENGINEER  
COLEMAN W. JENKINS, S.U.P.T. OF BUILDING

FOR APPLICANT TO FILL IN  
(PRINT OR TYPE ONLY)

|                   |   |                 |
|-------------------|---|-----------------|
| LEGAL DESCRIPTION | LOT NO.   | 192             |
| BLOCK             | TRACT   | 28053           |
| SIZE OF LOT       | NO. OF BLDGS. NOW ON LOT  | 1               |
| USE OF BUILDINGS  | Dwell & Gar.  |                 |
| CONTRACTOR        | Lomita Trenching & Exc Co.  |                 |
| ADDRESS           | P.O. 462  |                 |
| CITY              | TEL. NO.  | Lomita 325-2380 |
| STATE LICENSE NO. | LIC CLASS   | 213528 SC-42    |
| NO.               | DESCRIPTION OF WORK   | FEE             |
| 1                 | HOUSE SEWER CONNECTING TO PUBLIC SEWER @ \$5.00                             | 7 00            |
|                   | SEPTIC TANK, SEEPAGE PIT OR PITS AND/OR DRAINFIELD @ \$10.00                |                 |
|                   | HOUSE SEWER CONNECTING TO PRIVATE DISPOSAL SYSTEM @ \$3.00                  |                 |
|                   | CONNECT ADDITIONAL BLDG. OR WORK TO HOUSE SEWER @ \$3.00                    |                 |
|                   | OVERFLOW SEEPAGE PIT, DRAINFIELD EXTN., CESSPOOL, DRYWELL, MANHOLE @ \$5.00 |                 |
|                   | ALTER, REPAIR OR ABANDON HOUSE SEWER OR DISPOSAL SYSTEM @ \$3.00            |                 |

|                       |           |    |       |
|-----------------------|-----------|----|-------|
| OWNER'S AUTHORIZATION | PERMIT    | \$ | 3 00  |
|                       | TOTAL FEE |    | 10 00 |

I HAVE AT THIS DATE A CONTRACT WITH THE HEREIN NAMED CONTRACTOR TO CONNECT THE ABOVE DESCRIBED EXISTING DWELLING TO THE PUBLIC SEWER.

SIGNED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 19\_\_\_\_

OWNER OR OWNERS AGENT \_\_\_\_\_

ADDRESS \_\_\_\_\_

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING AND SEWERS.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF, AND INTEND TO RESIDE IN, THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

SIGNATURE OF PERMITTEE *Larry De France*

|                   |                        |                         |  |
|-------------------|------------------------|-------------------------|--|
| BUILDING ADDRESS  | 29129 Whiter Point Dr. |                         |  |
| LOCALITY          | P. V. Peninsula        |                         |  |
| NEAREST CROSS ST. | Hawthorne Blvd         |                         |  |
| OWNER             | Zuckerman Bldg Co.     |                         |  |
| MAIL ADDRESS      | P.O. Box 2010          |                         |  |
| CITY              | TEL. NO.               | P.V. Peninsula 377-5573 |  |

|              |       |       |        |              |
|--------------|-------|-------|--------|--------------|
| DISTRICT NO. | GROUP | CLASS | MAP PG | PROCESSED BY |
| 12           | I     |       | index  | Esvin        |

## CONNECTION DATA

|                   |                          |                          |    |
|-------------------|--------------------------|--------------------------|----|
| STATION           | 2+97.0                   | DEPTH                    | 6  |
| MANHOLE REFERENCE | 98.72' N. of UPPER LOWER |                          |    |
| Y.                | TYPE OF CONNECTION CURB  | LENGTH FROM M.L. TO P.L. | 35 |
| CO. IMP. NO.      | P.C. NO. 7968 JOB NO.    |                          |    |

|                  |                 |
|------------------|-----------------|
| TRUNK PERMIT NO. | ROAD PERMIT NO. |
|------------------|-----------------|

|           |        |          |                    |      |
|-----------|--------|----------|--------------------|------|
| AFFIDAVIT | WAIVER | EASEMENT | RECORD. INSTR. NO. | DATE |
|-----------|--------|----------|--------------------|------|

HWY. OR ST. WIDENING

STATE ENCROACHMENT PERMIT NO.

INDUSTRIAL WASTE APPROVAL

## CHARGES

CONNECTION CHARGE FEE

REIMBURSEMENT FEE

## APPROVALS

|   |                       |
|---|-----------------------|
| DATE  | INSPECTOR'S SIGNATURE |
| 4/9/71  | <i>J. Allen</i>       |
| NEW HOUSE SEWER   |                       |
| CONNECT ADDITIONAL BUILDING OR WORK   |                       |
| SEPTIC TANK, SEEP, PIT(S) AND/OR DRAINFIELD   |                       |
| CESSPOOL <input type="checkbox"/> DRYWELL <input type="checkbox"/>  |                       |
| ALTER, REPAIR, SEWER OR SEWAGE DISPOSAL SYSTEM  |                       |
| DISCONNECT PLUG AND ABANDON HOUSE SEWER   |                       |
| BACKFILL SEPTIC TANKS <input type="checkbox"/> SEEP, PIT(S) <input type="checkbox"/> CESSPOOLS <input type="checkbox"/> |                       |

## VALIDATION

M. O. CASH

JACK R. ALLEN  
SUPERVISING MECHANICAL ENGINEER

LAC 0000871 MAY 13 1971 10.00 3

*Zagon*

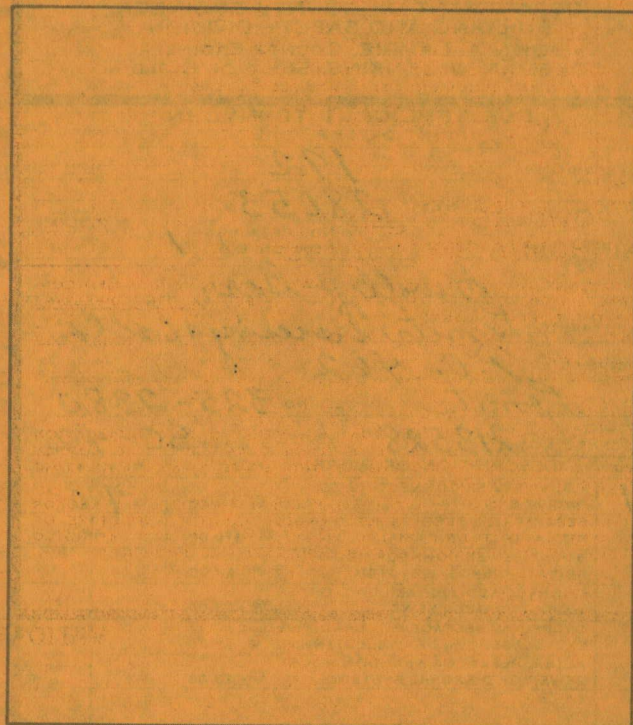
INSPECTOR COPY



FOR DEPARTMENT USE

REQUIRED INFORMATION

1. INDICATE ALL BUILDINGS ON PROPERTY.
2. INDICATE AND DIMENSION SEWAGE DISPOSAL SYSTEM WITH TIE DISTANCES TO BUILDINGS AND PROPERTY LINES.
3. INDICATE SIZE OF SEPTIC TANK—DEPTH OF SEEPAGE PIT(S)—SIZE OF CESSPOOL(S).
4. INDICATE NORTH DIRECTION ON PLOT.
5. INDICATE BOTH STREETS IF CORNER.



ST. ALLEY R/W

FIELD NOTES



# APPLICATION FOR PLUMBING PERMIT

COUNTY OF LOS ANGELES  
DEPARTMENT OF COUNTY ENGINEER  
BUILDING AND SAFETY DIVISION  
JOHN A. LAMBIE, COUNTY ENGINEER  
COLEMAN W. JENKINS, SUPT. OF BUILDING

Plan 105 Alt.

Lot #192

1

## FOR APPLICANT TO FILL IN (PRINT OR TYPE)

| NUMBER | FIXTURE OR ITEM           | EACH | FEE  |
|--------|---------------------------|------|------|
| 3      | WATER CLOSET              | 1.50 | 4.50 |
| 1      | BATH TUB                  | 1.50 | 1.50 |
| 1      | SHOWER                    | 1.50 | 1.50 |
| 5      | LAVATORY                  | 1.50 | 7.50 |
| 1      | SINK                      | 1.50 | 1.50 |
| 1      | DISHWASHER                | 1.50 | 1.50 |
| 1      | CLOTHES WASHER            | 1.50 | 1.50 |
|        | SWIMMING POOL RECEPTOR    | 1.50 |      |
|        | LAWN SPRINKLER SYSTEM     | 2.00 |      |
| 1      | WATER HEATER              | 1.50 | 1.50 |
| 1      | GAS SYSTEM 5 OUTLETS      | 1.50 | 1.50 |
| 1      | OUTLETS OVER 5 PER SYSTEM | .30  | 30   |
| 1      | Bar Sink                  |      | 1.50 |

Plan check fee 25% of above. See reverse.

PLUMBING PERMIT ISSUING FEE \$ 3.00

TOTAL FEE 39.30

Plan check applicant

Name

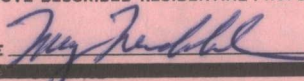
Address

City Tel. No.

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING.

I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF, AND INTEND TO RESIDE IN, THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.

SIGNATURE OF PERMITTEE



PLAN CHECK VALIDATION

CK. M.O. CASH

BUILDING ADDRESS 29129 Whites Point Drive

LOCALITY Palos Verdes Tract #28053

NEAREST CROSS ST. El Rodeo Road

OWNER Los Verdes Co.

MAIL ADDRESS 2444 Wilshire Blvd.

CITY Santa Monica TEL. NO. 828-4545

CONTRACTOR M.P.G. PLUMBING CO., INC.

ADDRESS P.O. Box 1203

CITY Canoga Park TEL. NO. 348-4734

STATE LICENSE NO. 217379

LIC CLASS C-36

DISTRICT NO.

12

GROUP

I

ZONE

RA

PROCESSED BY

Japon

INDUSTRIAL WASTE APPROVAL

## INSPECTION RECORD

RANGE 75  
W. H. -30 80  
W. H. -50 45  
DRY 20  
L. L. 25  
BBQ 50  
REF 3  
FAU.

APPROVALS

DATE

INSPECTOR'S SIGNATURE

UNDER SLAB WORK

3-29-71

J. Allen

ROUGH PLUMBING

6-16-71

J. Allen

GAS PIPING

6-16-71

J. Allen

GAS VENT

6-16-71

J. Allen

HOT WATER HEATER

8-3-72

J. Allen

PLUMBING FIXTURES

8-3-71

J. Allen

GAS TEST

8-3-71

J. Allen

UTILITY CO. NOTIFIED

3-6-72

J. Allen

FINAL

3-3-72

J. Allen

JACK R. ALLEN, SUPERVISING MECHANICAL ENG'R.

PERMIT VALIDATION

CK.

M.O.

CASH

LACo 811971 MAR 23 5 A 31.30

Japon

INSPECTION COPY



31



# APPLICATION FOR BUILDING PERMIT

1

COUNTY OF LOS ANGELES  
DEPARTMENT OF COUNTY ENGINEER  
BUILDING AND SAFETY DIVISION  
JOHN A. LAMBIE, COUNTY ENGINEER  
COLEMAN W. JENKINS, SUP'T OF BUILDING

BUILDING ADDRESS 29129 Whitespoint Dr  
LOCALITY P.V.P.  
NEAREST CROSS ST. VERDE RIDGE RD

## FOR APPLICANT TO FILL IN (PRINT OR TYPE ONLY)

BUILDING ADDRESS 29129 Whitespoint Drive  
LOT NO. 192 \* BLOCK  
TRACT 28053  
SIZE OF LOT Plot Plan NO. OF BLDGS. NOW ON LOT None  
USE OF EXISTING BLDG.  
OWNER ZVU TEL. NO. 377-5573  
ADDRESS P.O. Box 2010  
CITY Palos Verdes Peninsula  
ARCHITECT OR ENGINEER Harris & Rice TEL. NO. OL3-0554  
ADDRESS 8477 Beverly Blvd., L.A.  
CONTRACTOR Zuckerman Bldg. Co. TEL. NO. 870-7415  
ADDRESS P.O. Box 1308 LIC. NO.  
CITY Santa Monica LIC. CLASS

CONSTRUCTION LENDER NAME AND BRANCH  
ADDRESS  
SQ. FT. SIZE 2384 NO. OF STORIES 1 NO. OF FAMILIES  
USE OF STRUCTURE Dwelling NEW ☒  
\*Plan 105 Alt D ADD ☐  
SIGNATURE OF APPLICANT [Signature] ALTER ☐  
VALUATION \$ 32,000 DEMOL ☐  
P.C. FEE \$ 75.00 6780 PMT. FEE \$ 113.00

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING BUILDING CONSTRUCTION. I CERTIFY THAT IN DOING THE WORK AUTHORIZED HEREBY I WILL NOT EMPLOY ANY PERSON IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA IN RELATING TO WORKMEN'S COMPENSATION INSURANCE.  
SIGNATURE OF PERMITTEE [Signature]  
ADDRESS P.O. Box 1308, Santa Monica

DISTRICT NO. 12 GROUP I TYPE CONST. J PROCESSED BY Erwin  
STATISTICAL CLASSIFICATION  
CLASS NO. 00 DWELL. UNITS 1 BK PG  
USE ZONE RA MAP NO. 027H165  
7000 SPECIAL CONDITIONS

BLDG. SETBACK FROM FRONT PROP. LINE OF WHITESPOINT DR (STREET)  
TYPE OF HIGHWAY EXISTING WIDTH SETBACK FROM C.L. HIGHWAY + YARD = TOTAL  
Loc. 60 + 14 = 14  
BLDG. SETBACK FROM SIDE PROP. LINE OF (STREET)  
TYPE OF HIGHWAY EXISTING WIDTH SETBACK FROM C.L. HIGHWAY + YARD = TOTAL  
+ =  
CORNER CUTOFF YES ☐ NO ☒

SEE REVERSE SIDE FOR SPECIAL APPROVALS  
TO BE STANDARDIZED 12-1155

| APPROVALS                             | DATE           | INSPECTOR'S SIGNATURE |
|---------------------------------------|----------------|-----------------------|
| FOUNDATION: LOCATION FORMS, MATERIALS | <u>3-29-71</u> | <u>[Signature]</u>    |
| FRAME: FIRE STOPS, BRACING, BOLTS     | <u>6-22-71</u> | <u>[Signature]</u>    |
| FURNACE: LOCATION, GAS VENT, DUCTS    |                |                       |
| LATH, INT.                            | <u>7-2-71</u>  | <u>[Signature]</u>    |
| LATH, EXT.                            |                |                       |
| HOUSE NUMBER CORRECT AND POSTED       | <u>3-3-72</u>  | <u>[Signature]</u>    |
| FINAL                                 |                |                       |

PLAN CHECK VALIDATION 573570 DEC 22 2 3 A 67.80  
JOHN F. LEWIS, PRINCIPAL STRUCTURAL ENGINEER  
PERMIT VALIDATION 597171 JAN 5 1 A 113.00

INSPECTOR COPY

E. Erwin



|  | REQUIRED<br>(YES OR NO) | RECEIVED |
|--|-------------------------|----------|
| WATER CERTIFICATE                                |                         |          |
| ROAD DEPT. APPROVAL                              |                         |          |
| HEALTH DEPT. APPROVAL                            |                         |          |
| FIRE DEPT. APPROVAL                              |                         |          |
| GRADING APPROVAL                                 |                         |          |
| GEOLOGICAL APPROVAL                              |                         |          |
| PEDESTRIAN PROTECTION<br>(FENCE) (CANOPY)        |                         |          |
| SPECIAL INSPECTION ON<br>(CONC) (MASRY) (WELDG.) |                         |          |
|  |                         |          |
|  |                         |          |
|  |                         |          |
|  |                         |          |
|  |                         |          |