# "13"

**Building & Sewage Permits Information** 



### NAPA COUNTY CONSERVATION—DEVELOPMENT JAMES H. HICKEY BUILDING DIVISION — DIRECTOR

### CONSTRUCTION

DEP#	ARTMENT USE ONLY	r
PERMIT NO.	30610	
PARCEL NO.	27-010-17	
DATE ISSUED		19

DONALD W. JONAS BUILDING CODES ADMINISTRATOR	LICATION AND PERMIT	DATE ISSUED	•	19
	ISSUE CLEARANCE	O E P M G	Tal	Others
Building Address 33 F. Langery Rose	Public Works Date	PROCEDURE	l sy	DATE
Owner CATH CHILENS Phone 063 2682	Public Rocks:	PROCEGORE	01	unic .
Mailing Addres P. O. Box 127 - St. Helene, CA 54574	Planning Date	Plans not Required		
CONTRACTORS LEC NO. PHONE	Fire Marshal Date	Plans Received	624	51022
General # # #	Part state and	Site Checked		
Addres	Environmental Health/Sanitation Date			
Electrical	Mariron, Realth:	Plans Checked	CE	7=1-92
Plumbing 5-20-2	VARIANCE DNO DYES No.	Application Approved	1	
Mechanical Architect	USE PERMIT CINO CIYES No.	1 AJ / / 77	/ /	
Architect Designer	DESCRIPTION OF WORK	Validated By	dru l	<u> ( Ge./</u>
Acktress Engineer		/// - /	1 / 1	
Addreis	NEW ADO THEPAIR CONVERT	/ / Oate/		dest.
	Size No of Sq. Ft. 5 gag Stories	FEES		
LICENSED CONTRACTORS DECLARATION  1 hereby affirm that I am licensed under the provisions of Chapter 9 (commencing with	Zoning Building			
Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.	AMD Height	Valuation \$	<u> 110,000</u>	)
License Class Lic Number	Proposed Use		A	MOUNT
DateContractor	Vinery	Building Permit		TT
woa .	KERS COMPENSATION DECLARATION	Burging Farms		<del>18  00  </del>
	m that I have a certificate of consent to self-insure, or Norker's Compensation Insurance, or a certified copy	Plan Check	7	ia la
Law for the following reason: thereof		Electrical Permit		in Inn
(V) I, as owner of the property, or my employees with wages as Policy No their sole compensation, will do the work, and the structure ( ) Certif	Company sed copy is hereby furnished			W - W
is not intended or offered for sale. ( ) Certif	ed copy is filed with the county building inspection	Plumbing Permit		15 dp
increased constructions to construct the name of	ment or countydepartment.	Mechanical Permit	7,1	ia no
1 1 I am exempt under Sec of the Business and Profes	Applicant	Grading Permit		
	ICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE		<b></b>	10 <del>  12 -</del>
	ed not be completed if the permit is for one hundred	Certification Permit	ļ	
	the performance of the work for which this permit is	Strong Motion Tax		11 20
	of employ any person in any manner so as to become gricer Compensation Laws of California	Plan Retention		n ha
I hereby affirm that there is a construction lending agency for the	Applicant // Lifes			** 12
performance of the work for which this permit is issued	PLICANT: If, after making this Certificate of Exemp- if become subject to the Workers' Compensation pro-	Investigation Fees	<b></b>	
visions of the La	bor Code, you must forthwith comply with such pro-	Late Fees		
Lender's Address visions or this pull feetily that I have read this application and state that the above information is correct.	ermit shall be deemed revoked.			
and state laws relating to building construction, and hereby authorize representatives of t	his county to enter upon the above-mentioned pro-			
perty for inspection purposes. I (We) agree to save, indemnify and keep harmless, the Collekpenses which may in any way accrue against said County in consequence of the granting in			<u> </u>	
Signature of Applicant	Date 7   1   5 -			
NOTE When properly validated, this form constitutes a building permit. This permit exp commenced within 180 days from validation date of should authorized construct	ires and becomes null and void should work not be			
Commenced within 180 days from vandation date of midfig althoused confidence	on our restriction of administrated on a healed of 160	TOTAL	1 2.5	0.8 DO



## NAPA COUNTY CONSERVATION—DEVELOPMENT JAMES H. HICKEY AND PLANNING DEPARTMENT DIRECTOR BUILDING DIVISION AND PLANNING DEPARTMENT DIRECTOR CONSTRUCTION 27692

1 2 2	LWL 1 MEI	AI OPE	ONLY		
NO.	31	7 U O			
NO.	27-0	10-17			
	NO.	27.7	27,010,17	27,040,17	27,010,17

BUILDING	CODES ADMINISTRATOR	APPL	ICATIUN AI	AD REHMII	DATE ISSUED	March 11	, 19	63
Building Address 3600 L/	angtry Road (		ISSUE C	LEARANCE	8 M 8 M P		D Other	rs
Calle lerr	Phon		Public Works	Date	PROCEDURE		ву г	DATE
Ovner Mailing	***	*	Planning	Cate	Plans not Required		$\neg \dagger \neg$	
Address		100 (200 pg ) 200 (200 pg )			Plans Received		20 3-	4.9
CONTRACTOR:		PHONE	Fire Marshal	Date				17-83
Address				u/Sanitation Date	Site Checked	_		
			Environmental Healt Environ : Healt		Plans Checked	1.6	X 3-	31-03
Plumbing				O YES No	Application Approved			
Mechanical Architect		***************************************	USE PERMIT I NO		-	, <del>"</del>		
Designer • • • •					Validated By	1.57		
Address Engineer				ION OF WORK			4.37	10
Address			NEW [] ADD []	REPAIR CONVERT D	] Date			
LICENSE	D CONTRACTORS DECLARATION		Sur 1,296	No. of Stories		FEES		
I hereby affirm that I am license	d under the provisions of Chapter 9 (comms and Professions Code, and my license is in to		Zoning APE	Building Helght	Valuation	s 2	18,512	
License Class	Lic Number		Proposed Use Charges in thi	tro mein delg. Se Collar and Gra			AMOUN	ı
Date	Contractor		RKERS' COMPENSATION E		Building Permit		110	50
		i hereby affirm	that I have a certificate of co	onsent to self-insure, or a cer-	Plan Check			88
	HILDER DECLARATION empt from the Contractor's License Law for		's Compensation Insurance	or a certified copy thereof.	Plumbing Permit			+
(") I, as owner of the pro	operty, or my employees with wages as their will do the work, and the structure is not		Company ed copy is hereby furnished		Electrical Permit		29	50
intended or offered ( ) I, as owner of the p	for sale property, am exclusively contracting with	( ) Certifu	ed copy is filed with the coun	ty building inspection depart- department	Mechanical Permit	T		1
	i to construct the project. Sec of the Business and Profes-	Date:	Applicant IFICATE OF EXEMPTION F		Grading Permit		***************************************	1
sional Code for this Sec. 7048 Minor	reason  WorkSec_TOTO-Employee Working		COMPENSATION INSU		Certification Permit		***************************************	1
Updar \$100.	for Wage Crity.	(\$100) or less)		or which this permit is issued.	Strong Motion Tax		1	00
	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Workers Compar	sation Laws of California	o as to become subject to the	Plan Retention			
i hereby affirm that there is	FION LENDING AGENCY a construction lending agency for the per-	V Date/	M Applicant	nis Certificate of Exemption.	Investigation Fees			
formance of the work for which Lander's Name	i this parmit is issued.	you should becon	ne subject to the Workers' Co	impensation provisions of the	Late Fees			1
Lander's Address		Shall be deemed		such provisions or this permit		-  -		4
relating to building construction	plication and state that the above information, and hereby authorize representatives of the	its county to enter up	on the above-mentioned proj	perty for inspection purposes		<b> </b> -		-
I (We) agree to save, indemnify County in consequence of the	and keep harmless the County of Napa againgting of this permit.	200	ms, costs and expenses whic	n may many way accrue said				+
Signature of Applicant	- 416th y 6	Carry	Date	7-7-2		<u> </u>		4
date or should authorized constructs	form constitutes a building before. This period deps on be suspended or abandoned for a period of 190 d dor water the first 180 days of the Permit Issue da	ava after work is commen	Load Mound work not be commen scot. A request for an extension of	pedianther fölldaga brensvalldalenn Herne musi berregunsted in wilding.	1	TOTAL	723	88



NAPA COUNTY

CONSERVATION—CONSERVATION—CONSERVATION—CONSERVATION—CONSERVATION—CONSERVATION—COUNTY

JAMES H. HICKEY

DIRECTOR

DIRECTOR

DIRECTOR

### CONSTRUCTION

DEF	ARTMENT USE ONLY
PERMIT NO	31:20
PARCEL NO.	21-010-17

1850' BILL HALL ADD	LICATION AND DEDUCT	PARCEL NO.	
BUILDING CODES ADMINISTRATOR APP	LICATION AND PERMIT	DATE ISSUED 5 200	. 19
Building Address SYCA 70 M/M M/A	ISSUE CLEARANCE	BKE PMG	D Others
Owner Office Colors Phone 9622685	Public Works Date	PROCEDURE	BY DATE
Mailing Address Color Color State Color St	Planning Date	Plans not Required	
CONTRACTORS LIC NO. PHONE	Fire Marshal Date	Plans Received	4 5 5 33
General 2007 Control C	Francisco de Care	Site Checked	
Address // Electrical	Environmental Health/Sanitation Date	Plans Checked	7777 3 7033
Plumbing		Application Approved / //	
Mechanical Architect	VARIANCE ONO OYES No.		<u> L</u>
Oesigner Designer	USE PERMIT [] NO [] YES No.	L	
Address	_ DESCRIPTION OF WORK	Validated By	erion y from
Engineer Address	NEW □ ADD □ REPAIR □ CONVERT □	Date	7 4 3
LICENSED CONTRACTORS DECLARATION	Size No. of Sq. Ft. Stories	FEES	
I nereby affirm that I am licensed under the 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.	Zorung // Building Flagger	Valuation \$	(D) USD
License Cites Lic Number	Proposed Use Dead Constitute a ser-	Building Permit	AMOURT 75.3
OWNER-BUILDER DECLARATION Under the Law expend from the Contractor's Lineage Law for	CORKERS' COMPENSATION DECLARATION I'm that I have a certificate of consent to self-insure, or a cer- ter's Compensation insurance, or a certified copy thereof	Plan Check Plumbing Permit	212 25
sole compensation, will do the work, and the structure is not ( ) Cert opened dor ordered for sale. ( ) Cert ( ) — ( ) as owner of the property, am exclusively contracting with mon	Company ified copy is hereby furnished ified copy is filed with the county building inspection depart- t or county department	Electrical Permit Mechanical Permit	
incessed contractors to construct the project.  ( ) I am exempt under Sec of the business and Professional Code for this reason CEI	Applicant ATIERSATE OF EXEMPTION FROM WORKERS	Grading Permit	
70 (A)	COMPENSATION INSURANCE and not be completed if the permit is for one hundred dollars	Certification Permit	
Date Centry that in	the performance of the work for which this permit is issued. By any person in any manner so as to become subject to the	Strong Motion Tax	350
CONSTRUCTION LENDING AGENCY Workers Come	rensation Laws of California.  Applicant 1	Plan Retention	5 42
formance of the work for which this permit is issued NOTICE TO A	PPLICANT II, after making this Certificate of Exemption, one subject to the Workers Companisation provisions of the	Investigation Fees	
Lendor's Name Labor Code yo	is must furthwith comply with such provisions or this permit	Late Fees	
Lender's Address	to comply with all city and county ordinances and state laws upon the above-mentioned property for inspection purposes.		
County in consequence of the greating of this permit.	(** 7) = 1 **		
Signature of Applicant  NOTE When properly sendence, this form constitutes a building glemnt. This perent expires and becomes must date or should authorized construction be expended or abando sed for a period of 180 days after work is come.	Date	TOTAL	50 5 73
from the Building Codes Administrator within the Tirst 190 days of the Persist Issue date		L	UW 71



NAPA COUNTY
CONSERVATION-DEVELOPMENT
AND PLANNING DEPARTMENT
BUILDING DIVISION

JAMES H. HICKEY
DIRECTOR

BILL L HALL

DEP	ARTMENT USE	EONLY
PERMIT NO.		
ARCEL NO.	27-010-17	
DATE ISSUED	June 20, m	. 19 55

BUILDING CODES ADMINISTRATOR	MIIL	ICATION AND PENNIT	DATE ISSUED	Name of a	m , n	9 ( )
Building Address 3900 Lanetry Road		ISSUE CLEARANCE	ByEyPy	M g G	D Oth	lers .
	me <u>963-2692</u>	Public Works Date	PROCEDUR	E	BY	DATE
	me _75127-63323.	Public Works:				
Address P. C. Dop 327 - St. Halfing, CA		Planning Date	Plans not Required			
CONTRACTORS / LIC NO.	PHONE	Fire Marshal Date	Plana Received		CE  6-	-8-83
General Address			Site Checked			
Electrical /	-	Environmental Health/Sanitation Date	Plans Checked		CE 6-	15.41
Piunting		Environ, Resith: 6-20-83	Application Approved			Marine Street Street
Mechanical Architect		USE PERMIT   NO   No U-520081		, ,		
Designer Address	-		Validated By			
Engineer		DESCRIPTION OF WORK	1		4.77	13
Address		NEW 3 AUD O REPAIR O CONVERT O	Date			
LICENSED CONTRACTORS DECLARATION		Size No. of Sq. Ft. 1, 950 Stories 2		FEES		
I hereby affirm that I am licensed under the provisions of Chapter 9 (common 7000) of Division 3 of the Business and Professions Code, and my license is in	nencing with Section I full force and effect	Zoning All Building Height	Valuation	\$	150,000	_
License Class Lic Number		Proposed Use Offices and Rospitality			AMOU	PAT
DateContractor		Arma Addto, to Winery	Building Permit		490	a a
	I hereby affirm	RKERS COMPENSATION DECLARATION That I have a certificate of consent to self-insure, or a cer-	Plan Check			
OWNER-BUILDER DECLARATION   I hereby affirm that I am exempt from the Contractor's License Law I		's Compensation Insurance, or a certified copy thereof.	Plumbing Permit		412	50
the following reason:  ( ) It as owner of the property, or my employees with wages as the	Policy No	Company				30
sole compensation, will do the work, and the structure is n intended or offered for sale.	ot () Centile	ed copy is hereby furnished.	Electrical Permit		54	00
(≥) I, as owner of the property, am exclusively contracting wi		ed copy is filed with the county building inspection depart- in county	Mechanical Permit		4.2	50
licensed contractors to construct the project  ( ) I am exempt under Sec of the Business and Profe	Date	Applicant	Grading Permit			
sional Code for this reason. — Sec. 7048 Minor Work —— Sec. 7053≇ mployee Worki		IFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE	Certification Permit	1		
Under \$100 for Wage Only	(\$100) or less).	d not be completed if the permit is for one hundred dollars	Strong Motion Tax			
Date Owner Dear Street		e performance of the work for which this permit is issued, rany person in any manner so as to become subject to the			10	30
CONSTRUCTION LENDING AGENCY		realized Laws of California.	Plan Retention		20	20
I hereby affirm that there is a construction lending agency for the pi formance of the work for which this permit is issued.	NOTICE TO AP	LICANT II after making this Certificate of Exemption	Investigation Fees			
Lender's Name	- Labor Code, you	ne subject to the Workers' Compensation provisions of the must forshwith comply with such provisions or this permit	Late Fees			
Lender's Address	shall be deemed					7
I certify that I have read this application and state that the above informal relating to building construction, and hereby authorize representatives of	this county to enter up	on the above-mentioned property for inspection purposes.		ı		
I (We) agree to save, indemnify and keep harmless the County of Napa ec County in consequence of the granting of this permit.	james naturnes, judgme	mis, coops and expenses which may in any way accrue said	1	1		-
Signature of Applicant	( Also and	Date / /				4
NOTE: When properly validated, this form constituted a building permit. This permit exidence as a sweath authorized construction be seapended or abandoned for a period of 18	) days after work is comme			TOTAL	1,18	7 2
from the Building Codes Administrator within the first 180 dails of the Permit Robe	aare		<u> </u>			1



NAPA COUNTY
CONSERVATION-DEVELOPMENT - JAMES H. HICKEY
BUILDING DIVISION DIRECTOR

### CONSTRUCTION

DEPAR	RTMENT USE ONLY
PERMIT NO.	33606
PARCEL NO.	97_010_26

Building Address 3:00 Innertry 2:00d   SSUE CLEARANCE   B   E   P   M   G   D   Others      Policy Works   Date   PROCEDURE   BY   DATE     Policy Works   Date   Process   Date   Date   Process   Date     Policy Works   Date   Process   Date   Date   Process   Date   Date     Policy Works   Date   Process   Date   Date	BUILDING CODES ADMINISTA	APP	LICATION AND PERMIT $+$	DATE ISSUED May 15	- <u></u>	10
Owner CAIII: LICENSED CONTRACTORS DECLARATION Received   LICENSED CONTRACTORS DECLARATION   Received   LICENSED CO		<u> </u>	ISSUE CLEARANCE	<del></del>	о о	, 19 <u>G/.</u> thers
Mailing P. D. Lox 327 – 57. Hollona Cf.  CONTRACTORS  U.C. NO. PHONE  Fire Mershal  Electricid  Environmental Health/Sanitation Date  USE PERMIT DNO QYES No.  USE PERMIT DNO QYES No.  USE PERMIT DNO QYES No.  DESCRIPTION OF WORK  NEW DESCRIPTION OF WORK  NEW DESCRIPTION OF WORK  Site Sa. Fi. 6, 700. Stories  Sa. Fi. 6, 700. S	Owner CAIN: Jorry			PROCEDURE	ву	DATE
Solid   Site Checked   Site Checke	Mailing	1		Plans not Required		
Address   Environmental Health/Sanitation Date   Date   Environmental Health/Sanitation Date	· .•	LIC. NO. PHONE	Fire Marshal Date	Plans Received	JL	4-24-84
Environmental Health/Sanitation   Date   S_15_G_1	3017			Site Checked		
Plumbing   Call   S-15-CA   Applicant   Call   S-15-CA   Applicant   Call   Cal			Environmental Health/Sanitation Date	Plans Checked		
Mechanical   Use PERMIT   NO   YES No.   La_SQR001   Medicated Wy Well dated By   Well dated B			E.H. 5-15-04		CE	5-14-34
USE PERMIT   NO QYES No. 11-528061   Validated 8y			VARIANCE NO YES No.	Application Approved	)	
DESCRIPTION OF WORK  Engineer  LICENSED CONTRACTORS DECLARATION  I haveby silirm that I am itensed under the provisitions of Chapter 9 (commencing with roces and effect of the Sulmess and Professions Code, end my itense is in full property of the Sulmess and Professions Code, end my itense is in full property of the sulmess and ending the Sulmess and Professions Code, end my itense is in full property of the Sulmess and Professions Code, end my itense is in full property of the Sulmess and Professions Code, end my itense is in full property of the Sulmess and Professions Code, end my itense is in full property of the Sulmess and Professions Code, end my itense is in full property of the Sulmess and the Sulmess and Professions Code in the Proposet Use Proposet Us			USE PERMIT ON OTHER NO. 14 ERROCE	1	3//	
Sendines   Address   License Contractors Declaration   Section 7000 of Division 3 of the Business and Professions Code, and my license is in full force and effect.   License Class   Lic. Number   Contractor   License Class   Lic. Number   License Class   License C				Validated By		
LICENSED CONTRACTORS DECLARATION I hereby elitim that I am licensed under the provisions of Chapter 9 Icommencing with Section 7000 of Division 3 of the Business and Professions Code, and my Icome is in full force and elfect.  License Class  License Class  License Class  License Class  License Class  Contractor  OWNER-BUILDER DECLARATION  I hereby elitim that I am exempt form the Contractor's License Law for the following reason:  I hereby elitim that I am exempt form the Contractor's License shell solic compensation, will do the work, and the structure of the property or my employee with wages as the first one compensation, will do the work, and the structure of the property o	Engineer				F10	- 01
LICENSED CONTRACTORS DECLARATION I hereby affirm that I am licensed under the provision of Chapter 9 feormencing with force and effect.  License Class	Address			Date	4. 15	), 34
Section AUM of Unition 3 of the guiness and Professions Code, and my license is in full force and effect.  License Class	LICENSED CONTRACTORS DE	CLARATION	Sq. Ft. 6 700 Stories	FEES		
License Class Lic. Number	Section 7000) of Division 3 of the Business and Professi	ns of Chapter 9 (commencing with lons Code, and my license is in full	Λο Height	Valuation S	180,000	)
OWNER-BUILDER DECLARATION  I hereby affirm that I am exempt form the Contractor's License Law for the following reason:  (L) I, as owner of the property, and the structure is not intended or offered for sale.  (J) I, as owner of the property, and the structure is not intended or offered for sale.  (J) I, as owner of the property, and state that the above information is correct. I american subject to the Worker's Compensation Insurance, or a certificate optimistic of company is filed with the country building inspection department.  (J) I am exempt under Sec. of the Business and Professional Code for this reason:  Sec. 7048Minor Work Sc. 7053-Embloyee Working Under Stop Owner Company Owner Company Owner Company Owner Company Owner Company Owner Company I state of the work for which this permit is insued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of Legislation Permit Owner Subject to the Workers' Compensation Laws of Legislation Permit Owner Company Owner Company Owner Company I shall not employ any person in any manner so as to become subject to the Workers' Compensation I such as of Legislation Permit Owner Company Owner Compan	License Class Lic. Number		Proposed Use		AMO	TNUC
I hereby affirm that I are exempt form the Contractor's License Law for the following reason:  (I) 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.  (I) I, as owner of the property, am exclusively contracting with licensed contractors to construct the project.  (I) I am exempt under Sec	DateContractor		Ulnory Addition (Carrol Room)			
Lender's Address	OWNER-BUILDER DECLARATION  I hereby affirm that I am exempt form the Contra Law for the following reason:  () I, as owner of the property, or my employees their sole compensation, will do the work, and is not intended or offered for sale.  () I, as owner of the property, am exclusively con licensed contractors to construct the project.  () I am exempt under Sccof the Busine sional Code for this reason: Sec. 7048Minor WorkSec. 7053-Embl Undy' S100for Wage Only.  DateOwner CONSTRUCTION LENDING AGENCY I hereby affirm that there is a construction lending a performance of the work for which this permit is issued.	intracting with cases and Professory Experience of CERTIFIC Oyee Working (This section need dollars (\$100) or Lecrtify that in instead, I shall not subject to the Wook opency for the Control of CERTIFIC Oyee Working (This section need dollars (\$100) or Lecrtify that in instead, I shall not subject to the Wook opency for the CERTIFIC ORDER OF CONTROL	m that I have a certificate of consent to self-insure, or Jorker's Compensation Insurence, or a certified copy of copy is hereby furnished.  I'd copy is hereby furnished.  I'd copy is filed with the county building inspection ment or county	Plan Check Plumbing Permit Electrical Permit Mechanical Permit Grading Permit Certification Permit Strong Motion Tax Plan Retention	6	7/ 75 47 50 60 00 67 25
I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state lews relating to building construction, and hereby authorize representatives of this county to enter upon the above-mentioned property for inspection purposes. I (We) agree to save, infermilify and keep harmless the County of Napa against liabilities, judgments, costs and expenses which may in any way accrue against said County in consequence of the granting of this permit.    Signature of Applicant	Lender's Address	visions of the Lab	or Code, you must forthwith comply with such pro- mit shall be deemed revoked.	Late Fees		
from validation date or should authorized construction be suspended or abandoned for a period of 180 days after work is commenced. A request for an extension of time  TOTAL 1,939 10	perty for inspection purposes. I (We) agree to save, indee expenses which may in any way accrue against said Coun bignature of Applicant NOTE: When properly validated, this form constituting a building from validation date or should authorize construction be support.	ne above information is correct. I agree by authorize representatives of this manify and keep harmless the County in consequence of the granting of the permit. This permit expires and becomes rede or abandoned for a period of 1800 days	ree to comply with all city and county ordinances s county to enter upon the above-mentioned proty of Napa against liabilities, judgments, costs and this permit.  Date 5/5/	TOTAL	1,939	9 10

NAME SELECT NO. 10006 APPLICATION & PERMIT TO CONSTRUCT A SEMACE SYSTEM  BY  INVISION OF BUTTERNIET TO CONSTRUCT A SEMACE SYSTEM  BY  INVISION OF BUTTERNIET TO CONSTRUCT A SEMACE SYSTEM  ANDRESS SECT A SEMACE SYSTEM  NAME SELECT (SAMPE)  (CONTRACTOR)  NAME SELECT (SAMPE)  (CONTRACTOR)  NAME SELECT (SAMPE)  (CONTRACTOR)  NORW (SECLEL DESIGN  (CONTRACTOR)  NORW (SECLEL DESIGN  (PREVIATE SEMACE DISPOSAL SYSTEM  FROM SUPPLY: () Public (M Individual () Septiation () ALTER  NORW () PROVINCE SEMACE DISPOSAL SYSTEM  WATER SUPPLY: () Public (M Individual () Septiation () PREVIATE SEMACE DISPOSAL SYSTEM  WATER SUPPLY: () Public (M Individual () Septiation () County road setback (M Seet from center line.  WATER SUPPLY: () Public (M Individual () Septiation () County road setback (M Seet from center line.  WORKEN'S COMPENSATION CONTRAGS: (Compensation Indurance on file with this office.  () A cortificate of current Worker's Compensation Indurance is being filed with this office.  () A cortificate of current Worker's Compensation Indurance is being filed with this application.  () I certify that in the performance of the work for which this permit is issued I shand employ any person in any manner so as to become subject to the Worker's Compensation laws in California.  TERMS OF PERMIT  Applicant agrees that:  1. Sanitarian will be notified a minimum of 24 hours prior to requiring inspection(s).  2. Sanitarian and engineer's inspection, when indicated, will be debtained prior to covering the system.  3. The permit and copy of the approved sewage disposal system design shall be available at the Job site at all times.  4. Any deviation from approved plan without prior approval of this office will be cause for stopping work until the changes are fully justified and approved.  5. Prior to authorizing occupancy of any building with an engineering design and system derivation for the approved plan must be submitted to the Public Health Officer.  6. This permit is subject to revocation if found to be in nonconformater with has coun	مر					<i>(</i> 1)	<i>-1</i>
NAME JCLP   CAIN  NORK () SPECIAL DESIGN  NORK () SPECIAL DESIGN  NORK () PRESIDENTIAL UNITS  BDRM () CHEER (EXPLAIN)  NATER SUPPLY () Public (v) Individual () Duilding Department Form Rec.  Distance from well to any part of nearest swage disposal system (Pect. CAIN  Additional nearby well pl. ((Asten of Site to accompania) application.  County road setback (v) feet from center line.  WORKER'S COMPRISATION OVERMOS: (Check one of the following)  (v) A certificate of current Worker's Compensation Indurance in felle with this office.  A rostificate of current Worker's Compensation Indurance is being filled with this application.  (i) I certify that in the petformance of the work for which this permit is issued I shan not employ any person in any manner so as to become subject to the Worker's Compensation laws in California.  **TERMS OF PERMIT**  Applicant agrees that:  1. Sanitarian and engineer's inspection, when indicated, will be obtained prior to over ing the system.  3. The permit and a copy of the approved sewage disposal system design shall be available at the job site at all times.  4. Any deviation from approved plan must be submitted to the Full feath of the cause for stopping work until the changes are fully justified and approved.  5. Prior to authorizing occupancy of any building with an engineered designed was installed in compliance with the approved plan must be submitted to the Public Health Officer.  6. This permit is subject to revocation if found to be in nonconformance with Naja County Code of Standards.  7. Before this office allows occupancy of a dveiling, an approved	FEESO DATE 6-22	-87	·			A.P. NO.	1-010
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