

Stockton Fire Department



Occupancy: **O'Reilly's**

Occupancy ID:

Address: **6404 Pacific AVE
Stockton CA 95207**

Inspection Type: **OPERATIONAL - ANNUAL**

Inspection Date: **3/5/2020** By: **McConahey, Paul (15164)**

Time In: **11:00** Time Out: **11:00**

Authorized Date: **06/24/2020** By: **McConahey, Paul (15164)**

Next Inspection Date: **No Inspection Scheduled**

Invoice Paid Date: **6/24/2020 11:45:00 AM**

Form: SFD GENERAL
INSPECTION

Inspection Topics:

EXITING

Provide exits signs at all access doors.

CFC 1013.1

Status: **Approved**

Notes: **Exit sign needed at battery area**

Additional Time Spent on Inspection:

Category	Start Date / Time	End Date / Time
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Notes: No Additional time recorded

Total Additional Time: 0 minutes

Inspection Time: 0 minutes

Total Time: 0 minutes

Summary:

Overall Result: Approved

Inspector Notes: Violation corrected

Closing Notes:

By order of the Fire Chief and Fire Marshal.

All non-compliant issues shall be completed within the noted re-inspection date. Additional charges shall incur after the first re-inspection at an hourly rate, in increments of one hour.

Approval as the result of this inspection shall not be construed to be an approval of a violation of the provisions of this code or of other ordinances of the jurisdiction.

Inspector:

Name: McConahey, Paul
Rank: Program Specialist
Work Phone(s): 209-990-1414
McConahey, Paul:



Signed on: 06/24/2020 14:51

Signature

Date

Representative Signature:

Signature

Date

Stockton Fire Department



Occupancy: **NORCAL MUFFLER & TRUCK INC**
Occupancy ID: **61946**
Address: **6404 Pacific AVE Apt/Suite #A**
Stockton CA 95207

Inspection Type: **OPERATIONAL - ANNUAL**
Inspection Date: **12/16/2020** By: **McConahey, Paul (15164)**
Time In: **13:25** Time Out: **14:00**
Authorized Date: **Not Authorized** By:

Form: SFD GENERAL
INSPECTION

Inspection Topics:

GENERAL INFORMATION

Business Rep/Contact Number

Enter the name and phone number of the responsible party.

Status: **Approved**

Notes: **Anthony Lucchetti. Owner. 209-952-3022**

Current Operational Fire Permit posted?

Current Operational Fire Permit shall be posted with other licenses and permits as required.

Status: **Approved**

Notes: **Yes. Exp 10/6/2020**

Current Stockton Business License posted?

Current Stockton Business License shall be posted for current occupant.

Status: **Approved**

Notes: **Exp 9/30/2021. Ok**

Has contact information changed?

Has any of the customer information changed since last inspection? If so, new information shall be recorded and submitted to support staff for updates.

Status: **Approved**

Notes: **No**

Permit Type Required

CFC 105 - List all required Operational Fire Permits

Status: **Approved**

Notes: **Repair service garage**

BUILDING INFORMATION

Knox box in place?

Confirm the keys are current, update as needed.

Status: **Approved**

Notes:

EXTINGUISHERS

Provide annual service. Service shall be performed by a licensed contractor.

CFC 906

Status: **Approved**

Notes: **7/13/2020. Ok**

Additional Time Spent on Inspection:

Category	Start Date / Time	End Date / Time
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Notes: No Additional time recorded

Total Additional Time: 0 minutes

Inspection Time: 35 minutes

Total Time: 35 minutes

Summary:

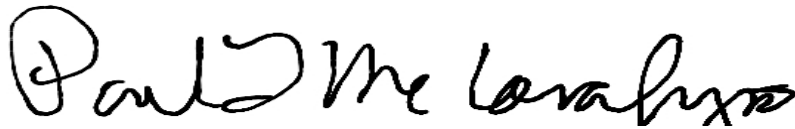
Overall Result: Approved
Inspector Notes: No fire code violations
209-952-3022

Closing Notes:

By order of the Fire Chief and Fire Marshal. All non-compliant issues shall be completed within the noted re-inspection date. Additional charges shall incur after the first re-inspection at the prevailing hourly rate, in increments of one hour. Approval as the result of this inspection shall not be construed to be an approval of a violation of the provisions of this code or of other ordinances of the jurisdiction. STOCKTON FIRE DEPARTMENT - FIRE PREVENTION DIVISION 345 N EL DORADO ST - STOCKTON, CA 95202 - (209)937-8271

Inspector:

Name: McConahey, Paul
Rank: Program Specialist
Work Phone(s): 209-990-1414
McConahey, Paul:



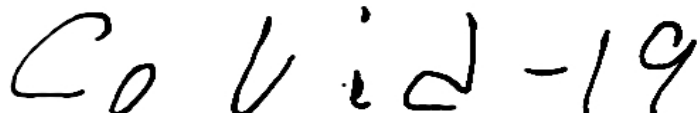
Signed on: 12/16/2020 13:52

Signature

Date

Representative Signature:

Signature of: Covid 19 on 12/16/2020 13:53



Signature

Date



CITY OF STOCKTON
COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING DIVISION, CITY HALL
STOCKTON, CALIFORNIA 95202

PHONE: (209) 937-8561
24 Hr. Inspection Request
937-8560

PERMIT

Application Number
05 00001509

LICENSED CONTRACTORS DECLARATION

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

CONTRACTOR _____
LICENSE NO. _____
LICENSE TYPE _____ DATE _____
STOCKTON BUS. LIC. NO. _____

OWNER-BUILDER DECLARATION

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

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

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

I am exempt under Sec. _____, B & P.C. for this reason _____
Date _____ Owner _____

NOTE: To protest the imposition of any development fee, dedication, reservation or other exaction imposed on your project, you must file written notice with the City Clerk's office within 90 days after approval of the project or imposition of the fees, dedications, reservations or other exactions stating that the required payment is tendered or will be tendered when due, or that any conditions which have been imposed are provided for or satisfied, under protest, along with a statement of the actual elements of the dispute and the legal theory forming the basis for the protest.

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec.3800, Lab. C.) Policy No. _____

Company _____

Certified copy is hereby furnished. Expires _____

Certified copy is filed with the city building inspection department.

Date 3/15/05 Applicant DA

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws 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 provisions 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 and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

SIGNED DA ADDRESS _____

JOB ADDRESS _____

APPLICATION APPROVAL

THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

SIGNATURE DA Dominguez

Job Address
640A PACIFIC AV

Issue Date
3/15/05

Permit Type . . : ROOF PERMIT-----2L
Subdivision . . :
Parcel Nbr . . : 081 260 27
Geo Code . . . : 3307 03 03 09
Owner Name . . : KERSTON SIDNEY & J TRS
Address : 645 E MISSOURI AVE SUITE 400
PHOENIX AZ 85012
App'l Type . . . : REROOFING (3 OR MORE DWELLING & COMMERCIAL)
Desc of Work . . : NON RESIDENTIAL
REROOF, GENERAL
Valuation . . . : 27,500
Square ftg . . . : 110 Zoning . . . : CG
Occup Group . . : Const Type . . :

Special Notes and Conditions

D A DOMINGUEZ ROOFING CO
Document Number Expiration Date
782762 03106
STATE FUND 10106
63643 123105
C39 HIC
T/O W/BUILT-UP HOT ROOF 110SQS

----- FEES -----	
PERMIT FEE	318.15
A25-TECHNOLOGY FEE	27.50
A20-GPWI-----*KK	55.00
A35-LAND UPDATE-----*HN	3.00
A30-PERMIT TRACKING---*HN	12.50
PERMIT TOTAL	416.15

DA Dominguez
Print RE



CITY OF STOCKTON
COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING DIVISION, CITY HALL
STOCKTON, CALIFORNIA 95202

PHONE: (209) 937-8561
24 Hr. Inspection Request
937-8560

PERMIT

Application Number
11 00000801

LICENSED CONTRACTORS DECLARATION

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

CONTRACTOR G M NORTHROP CORPORATION
LICENSE NO. _____
LICENSE TYPE _____ DATE _____
STOCKTON BUS. LIC. NO. _____

Job Address
6404 PACIFIC AV

Issue Date
6/21/11

OWNER-BUILDER DECLARATION

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

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

I am exempt under Sec. _____, B & P.C. for this reason _____
Date _____ Owner _____

NOTE: To protest the imposition of any development fee, dedication, reservation or other exaction imposed on your project, you must file written notice with the City Clerk's office within 90 days after approval of the project or imposition of the fees, dedications, reservations or other exactions stating that the required payment is tendered or will be tendered when due, or that any conditions which have been imposed are provided for or satisfied, under protest, along with a statement of the actual elements of the dispute and the legal theory forming the basis for the protest.

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.) Policy No. _____

Company _____

Certified copy is hereby furnished. Expires _____

Certified copy is filed with the city building inspection department.

Date 6/21 Applicant [Signature]

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws 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 provisions 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 and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

SIGNED [Signature]

PRINT NAME REAR PEAR

APPLICATION APPROVAL

THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

SIGNATURE [Signature]

Permit Type . . : STORAGE RACK-----2L
Subdivision . . :
Parcel Nbr . . : 081 260 27
Geo Code . . : 3307 03 03 09
Owner Name . . : KERSTON JULIA M TR ET
Address . . . : 6257 WADSWORTH DR
SANTA ROSA CA 95409
Appl Type . . : STRUCTURES OTHER THAN BUILDINGS
Desc of Work : NON RESIDENTIAL
STORAGE RACKS
STORE
TENT IMPROVEMENTS(S)

Valuation . . : 20,000
Square ftg . . : 8,897 Zoning . . . : CG
Occup Group . . : H Const Type . . : 5B

Special Notes and Conditions

GM NORTHROP CORPORATION
492260 63012
CINCINNATI INS 123111
108151 83111

B
"O'REILLY AUTO PARTS" TI:REPLACE
EXISTING SHELVING FIXTURES AND FIXTURES
ELECTRICAL CHANGES FOR SHELVES
***CONTRACTOR TO CALL FOR INSPECTIONS
(552-2263090)***

----- FEES -----	
PERMIT FEE	367.25
PLAN CHECK FEE	2,522.00
A18-PERMIT ISSUANCE FEE	39.00
A26-CAP. FRES. FEE----*LL	20.00
A22 TECH FEE/GIS - BLDG	216.69
A23-CRS FEE-.02 PMT FEE	7.35
A12-DEV. CODE MAINT FEE	20.00
A13-DEV. OVERSITE COM	20.00
A14-CLIMATE ACT PLAN IMPL	20.00
A15-HOUSE ELEM PRFP/IMPL	10.00
A90 FIRE PC/FINAL-----*ZB	520.00
A20-GPMI-----*KK	60.00
A17-SHIP-COMMERCIAL---*N9	4.20
A35-LAND UPDATE-----*NH	3.25
A10-MICROFILM/IMAGING-*LO	17.00
A30-PERMIT TRACKING---*MH	14.00

PERMIT TOTAL 3,868.74

#103177



CITY OF STOCKTON
 COMMUNITY DEVELOPMENT DEPARTMENT
 BUILDING DIVISION, CITY HALL
 STOCKTON, CALIFORNIA 95202

PHONE: (209) 937-8561
24 Hr. Inspection Request
937-8560

PERMIT

Application Number
 15 00004795

LICENSED CONTRACTORS DECLARATION

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

CONTRACTOR BAKER ROOFING CO
 LICENSE NO. _____
 LICENSE TYPE _____ DATE _____
 STOCKTON BUS. LIC. NO. _____

Job Address
6404 PACIFIC AV

Issue Date
9/03/15

OWNER-BUILDER DECLARATION

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

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I am exempt under Sec. _____, B & P.C. for this reason _____
 Date _____ Owner _____

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WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.) Policy No. _____

Company _____
 Certified copy is hereby furnished. Expires _____
 Certified copy is filed with the city building inspection department.
 Date 9/3/15, Applicant [Signature]

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.

Date _____, Applicant _____

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

SIGNED [Signature]

PRINT NAME Michelle Ornelas

APPLICATION APPROVAL

THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

SIGNATURE [Signature]

Permit Type . . : ROOF PERMIT-----2L
 Subdivision . . :
 Parcel Nbr . . : 081 260 27
 Geo Code . . . : 3307 03 03 09
 Owner Name . . : KERSTON JULIA M TR ET
 Address : 100 DEER VALLEY #1A
 SAM RAFAEL CA 94903
 Appl Type . . . : REROOFING (3 OR MORE DWELLING & COMMERCIAL)
 Desc of Work . . : NON RESIDENTIAL
 REROOF, GENERAL
 INSULATION
 Valuation . . . : 46,585
 Square ftg . . . : 12,500 Zoning : CG
 Occup Group . . : Const Type . . :

Special Notes and Conditions

BAKER ROOFING
 234787 73116
 REDWOOD 100115
 76185 123115
 C39 B
 TEAR OFF ROOFING TO WOOD DECK, INSTALL
 NEW 60 MIL TPO COOL ROOF.
 **R-14 ABOVE DECK INSULATION REQ'D PER
 ENERGY CODE

----- FEES -----	
PERMIT FEE	93.00
A18-PERMIT ISSUANCE FEE	39.00
A26-CAP. PRBS. FEE----*LL	46.59
A22 TBCH FEE/GIS - BLDG	6.98
A23-CRS FEE-.02 PMT FEE	1.86
A12-DEV. CODE MAINT FEE	46.59
A13-DEV. OVERSITE COM	46.59
A14-CLIMATE ACT PLAN IMPL	46.59
A15-HOUSE ELEM PRBP/IMPL	23.29
A20-GPMI-----*KK	139.76
A35-LAND UPDATE-----*NN	3.25
A10-MICROFILM/IMAGING-*LO	4.00
A30-PERMIT TRACKING---*MM	14.00

PERMIT TOTAL 511.50

ck #5138

INSPECTION DEPARTMENT - CITY OF STOCKTON
APPLICATION FOR BUILDING, ELECTRICAL, PLUMBING PERMITS
AND/OR CERTIFICATE OF OCCUPANCY

ORIGINAL

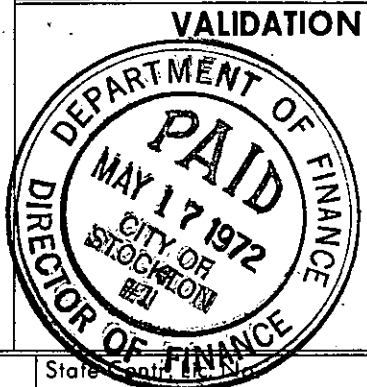
No. 83469

IMPORTANT - COMPLETE ALL ITEMS		LAND USE			
Date <u>May 17, 1972</u>		MARK BOXES WHERE APPLICABLE			
I. Official Address <u>6404 Pacific Ave.</u>		Gen. Tr. <u>33.02</u>	Tr. Zone <u>05</u>	Block <u>3</u>	Par <u>1</u>
Legal Desc. <u>Parcel A Por. SC 021</u>		Bik.			Zoning <u>C2</u>
Work Description <u>new grand auto store</u>					Code <u>22</u>
Owner <u>Grand Development Co.</u>	Address <u>700 Independent Rd.,</u>	Zip <u>Oakland</u>	Phone <u>569-4666</u>		
Contractor <u>owner</u>	Address			Phone	
Arch. or Engr.	Address			Phone	
Lender	Address			Phone	

II. SELECTED CHARACTERISTICS OF BUILDING			REMARKS
A. BUILDING CODE	B. OWNERSHIP	C. DIMENSIONS	
<u>F2 & FD</u> Occupancy	<input checked="" type="checkbox"/> Private	Parcel Front Ft. _____	
<u>III N</u> Type Const.	<input type="checkbox"/> City	Grd. Fl. Area <u>11,928</u>	
<u>3</u> Fire Zone	<input type="checkbox"/> County	Lot Area <u>48,565</u>	
<u>no</u> Sprinklers.	<input type="checkbox"/> State	Stories <u>1</u>	
	<input type="checkbox"/> Fed.	Basement _____	
	<input type="checkbox"/> Educational	D. PARKING SPACES	
	<input type="checkbox"/> Semi Public	Exist _____ New <u>71</u>	

III. PERMIT SPECIFICATION		VALUE \$ <u>170,000</u>	G. FEES
E.		F. APPROVALS	Bldg. Permit \$ <u>444.75</u>
1 <input checked="" type="checkbox"/> New building		Public Works <u>JW</u>	Plumb. Perm. _____
2 <input type="checkbox"/> Addition (enter number of new housing units added in H-13)		Use Permit <u>OK 4-27-72</u>	Elect. Perm. _____
3 <input type="checkbox"/> Alteration (See 2 above)		Board of Appeals _____	Cert. Occ. <u>10.00</u>
4 <input type="checkbox"/> Moving (relocation)		Approved to Issue Permit <u>C Clawson</u>	Wrecking _____
5 <input type="checkbox"/> Repair, replacement		Issued by <u>fn 1554</u>	SMIP <u>17.00</u>
6 <input type="checkbox"/> Wrecking (If multifamily residential) enter number of units in H-13			Total Fees <u>471.75</u>
7 <input type="checkbox"/> Plumbing	9 <input type="checkbox"/> Heating & Air Cond.		
8 <input type="checkbox"/> Electric	10 <input type="checkbox"/> Sign		

H. PROPOSED USE - For "Wrecking" most recent use Residential		18 <input type="checkbox"/> Amusement, recreational	
12 <input type="checkbox"/> One family		19 <input type="checkbox"/> Church, other religious	
13 <input type="checkbox"/> Two or more family - Enter number of units _____		20 <input type="checkbox"/> Industrial	
14 <input type="checkbox"/> Transient hotel, motel or dormitory - Enter number of units _____		21 <input type="checkbox"/> Parking garage	
15 <input type="checkbox"/> Carport		22 <input type="checkbox"/> Service station, repair garage	
16 <input type="checkbox"/> Garage		23 <input type="checkbox"/> Hospital, institutional	
17 <input type="checkbox"/> Other - Specify _____		24 <input type="checkbox"/> Office, bank, professional	
		25 <input type="checkbox"/> Public utility	
		26 <input type="checkbox"/> School, library, other educational	
		27 <input checked="" type="checkbox"/> Stores, mercantile	
		28 <input type="checkbox"/> Tanks, towers	
		29 <input type="checkbox"/> Other - Specify _____	



I have read the above application and know the contents thereof: the same is true and correct. I further state that I am familiar with the laws governing building, electrical work and/or plumbing within the City of Stockton and the State of California, and the amendments thereof, and that the above building and/or structure will be built in conformity therewith. I agree to call for all inspections.

Official Address 6404 Pacific Ave.

Signed Grand Development Co. PERMIT **No. 83469**

Floyd E. [Signature]

State Cont. No. 255684-81 Type _____

I am exempt from State Laws governing Licensed Contract

SIGNATURE _____



**INSPECTION DEPARTMENT — CITY OF STOCKTON
APPLICATION FOR BUILDING, ELECTRICAL, PLUMBING PERMITS
AND/OR CERTIFICATE OF OCCUPANCY**

ORIGINAL

No. 83743

**IMPORTANT - COMPLETE ALL ITEMS
MARK BOXES WHERE APPLICABLE**

LAND USE

Date: June 1, 1972

I. Official Address		Gen. Tr.	Tr. Zone	Block	Par
<u>6404 Pacific Avenue</u>					
Legal Desc.	Bk.				Zoning
Work Description					Code
<u>14 fixtures, 4 gas outs, 4 appliances, sewer & water</u>					<u>19</u>
Owner	Address	Zip	Phone		
<u>Grand Auto</u>					
Contractor	Address				Phone
<u>Vetter Plumbing</u>	<u>CR. #203</u>				
Arch. or Engr.	Address				Phone
Lender	Address				Phone

NEW SEWER CONNECTION

II. SELECTED CHARACTERISTICS OF BUILDING			REMARKS
A. BUILDING CODE	B. OWNERSHIP	C. DIMENSIONS	
Occupancy	<input type="checkbox"/> Private	Parcel Front Ft. _____	
Type Const.	<input type="checkbox"/> City	Grd. Fl. Area _____	
Fire Zone	<input type="checkbox"/> County	Lot Area _____	
Sprinklers	<input type="checkbox"/> State	Stories _____	
	<input type="checkbox"/> Fed.	Basement _____	
	<input type="checkbox"/> Educational	D. PARKING SPACES	
	<input type="checkbox"/> Semi Public	Exist _____ New _____	

III. PERMIT SPECIFICATION	VALUE \$	G. FEES
<u>\$28.50</u> nm	<u>\$28.50</u>	Bldg. Permit \$ _____
E.	F. APPROVALS	Plumb. Perm. <u>\$28.50</u>
1 <input type="checkbox"/> New building	Public Works _____	Elect. Perm. _____
2 <input type="checkbox"/> Addition (enter number of new housing units added in H-13)	Use Permit _____	Cert. Occ. _____
3 <input type="checkbox"/> Alteration (See 2 above)	Board of Appeals _____	Wrecking _____
4 <input type="checkbox"/> Moving (relocation)	Approved to Issue Permit _____	SMIP _____
5 <input type="checkbox"/> Repair, replacement	Issued by _____	Total Fees <u>\$28.50</u>
6 <input type="checkbox"/> Wrecking (If multifamily residential) enter number of units in H-13		
7 <input checked="" type="checkbox"/> Plumbing		
8 <input type="checkbox"/> Electric		
9 <input type="checkbox"/> Heating & Air Cond.		
10 <input type="checkbox"/> Sign		

H. PROPOSED USE -- For "Wrecking" most recent use Residential	I. USE
12 <input type="checkbox"/> One family	18 <input type="checkbox"/> Amusement, recreational
13 <input type="checkbox"/> Two or more family - Enter number of units _____	19 <input type="checkbox"/> Church, other religious
14 <input type="checkbox"/> Transient hotel, motel or dormitory - Enter number of units _____	20 <input type="checkbox"/> Industrial
15 <input type="checkbox"/> Carport	21 <input type="checkbox"/> Parking garage
16 <input type="checkbox"/> Garage	22 <input type="checkbox"/> Service station, repair garage
17 <input type="checkbox"/> Other - Specify _____	23 <input type="checkbox"/> Hospital, institutional
	24 <input type="checkbox"/> Office, bank, professional
	25 <input type="checkbox"/> Public utility
	26 <input type="checkbox"/> School, library, other educational
	27 <input type="checkbox"/> Stores, mercantile
	28 <input type="checkbox"/> Tanks, towers
	29 <input type="checkbox"/> Other - Specify _____

VALIDATION

State Contr. Lic. No.	Type
I am exempt from State Laws governing Licensed Contract	
SIGNATURE	

I have read the above application and know the contents thereof: the same is true and correct. I further state that I am familiar with the laws governing building, electrical work and/or plumbing within the City of Stockton and the State of California, and the amendments thereof, and that the above building and/or structure will be built in conformity therewith. I agree to call for all inspections.

Official Address _____

Signed _____

PERMIT **No. 83743**



**INSPECTION DEPARTMENT - CITY OF STOCKTON
APPLICATION FOR BUILDING, ELECTRICAL, PLUMBING PERMITS
AND/OR CERTIFICATE OF OCCUPANCY**

ORIGINAL

No. 84755

**IMPORTANT - COMPLETE ALL ITEMS
MARK BOXES WHERE APPLICABLE**

LAND USE

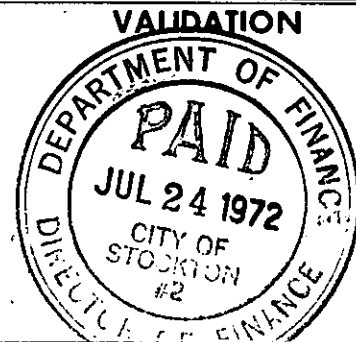
Date July 24, 1972

I. Official Address		Gen. Tr.	Tr. Zone	Block	Par
<u>6404 Pacific Ave.</u>					
Legal Desc.	Blk.				Zoning
Work Description					Code
<u>sprinklers</u>					<u>25</u>
Owner	Address	Zip	Phone		
<u>Grand Auto</u>					
Contractor	Address		Phone		
<u>Master Landscapes</u>	<u>8 2501 Hazelwood</u>	<u>478</u>	<u>3500</u>		
Arch. or Engr.	Address				Phone
Lender	Address				Phone

II. SELECTED CHARACTERISTICS OF BUILDING			REMARKS
A. BUILDING CODE	B. OWNERSHIP	C. DIMENSIONS	
Occupancy	<input checked="" type="checkbox"/> Private	Parcel Front Ft. _____	
Type Const.	<input type="checkbox"/> City	Grd. Fl. Area _____	
Fire Zone	<input type="checkbox"/> County	Lot Area _____	
<u>3</u>	<input type="checkbox"/> State	Stories _____	
Sprinklers	<input type="checkbox"/> Fed.	Basement _____	
	<input type="checkbox"/> Educational	D. PARKING SPACES	
	<input type="checkbox"/> Semi Public	Exist _____ New _____	

III. PERMIT SPECIFICATION		VALUE \$	G. FEES	
		<u>2,000</u>	Bldg. Permit	\$ _____
E.	F. APPROVALS		Plumb. Perm.	<u>5.00</u>
1 <input type="checkbox"/> New building	Public Works _____		Elect. Perm.	_____
2 <input type="checkbox"/> Addition (enter number of new housing units added in H-13)	Use Permit _____		Cert. Occ.	_____
3 <input type="checkbox"/> Alteration (See 2 above)	Board of Appeals _____		Wrecking	_____
4 <input type="checkbox"/> Moving (relocation)	Approved to Issue Permit _____		SMIP	<u>.20</u>
5 <input type="checkbox"/> Repair, replacement	Issued by <u>fn</u>		Total Fees	<u>5.20</u>
6 <input type="checkbox"/> Wrecking (if multifamily residential) enter number of units in H-13				
7 <input checked="" type="checkbox"/> Plumbing	9 <input type="checkbox"/> Heating & Air Cond.			
8 <input type="checkbox"/> Electric	10 <input type="checkbox"/> Sign			

H. PROPOSED USE - For "Wrecking" most recent use Residential		18 <input type="checkbox"/> Amusement, recreational
12 <input type="checkbox"/> One family		19 <input type="checkbox"/> Church, other religious
13 <input type="checkbox"/> Two or more family - Enter number of units _____		20 <input type="checkbox"/> Industrial
14 <input type="checkbox"/> Transient hotel, motel or dormitory - Enter number of units _____		21 <input type="checkbox"/> Parking garage
15 <input type="checkbox"/> Carport		22 <input type="checkbox"/> Service station, repair garage
16 <input type="checkbox"/> Garage		23 <input type="checkbox"/> Hospital, institutional
17 <input type="checkbox"/> Other - Specify _____		24 <input type="checkbox"/> Office, bank, professional
		25 <input type="checkbox"/> Public utility
		26 <input type="checkbox"/> School, library, other educational
		27 <input type="checkbox"/> Stores, mercantile
		28 <input type="checkbox"/> Tanks, towers
		29 <input type="checkbox"/> Other - Specify _____



I have read the above application and know the contents thereof: the same is true and correct. I further state that I am familiar with the laws governing building, electrical work and/or plumbing within the City of Stockton and the State of California, and the amendments thereof, and that the above building and/or structure will be built in conformity therewith. I agree to call for all inspections.

Official Address
6404 Pacific Ave.

Signed [Signature]

PERMIT No. 84755

State Contr. Lic. No. 770277 Type C21

I am exempt from State Laws governing Licensed Contract

SIGNATURE



**INSPECTION DEPARTMENT — CITY OF STOCKTON
APPLICATION FOR BUILDING, ELECTRICAL, PLUMBING PERMITS
AND/OR CERTIFICATE OF OCCUPANCY**

ORIGINAL

No. 85013

**IMPORTANT - COMPLETE ALL ITEMS
MARK BOXES WHERE APPLICABLE**

LAND USE

Date Aug. 3, 1972

I. Official Address 6404 Pacific Ave.		Gen. Tr.	Tr. Zone	Block	Par
Legal Desc.	Blk.				Zoning C 2
Work Description 4 signs "Grand Auto Supply"					Code 22
Owner Grand Auto Supply	Address same	Zip	Phone		
Contractor Federal Signs	Address 536 N. Wilson Way	466 6829	Phone		
Arch. or Engr.	Address				Phone
Lender	Address				Phone

II. SELECTED CHARACTERISTICS OF BUILDING

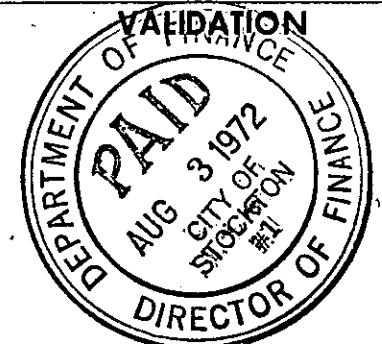
A. BUILDING CODE	B. OWNERSHIP	C. DIMENSIONS	REMARKS
Occupancy _____	<input type="checkbox"/> Private <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> State <input type="checkbox"/> Fed. <input type="checkbox"/> Educational <input type="checkbox"/> Semi Public	Parcel Front Ft. _____ Grd. Fl. Area _____ Lot Area _____ Stories _____ Basement _____	
Type Const. _____			
3 Fire Zone			
Sprinklers _____			
			4 at \$15 each

III. PERMIT SPECIFICATION

E.	F. APPROVALS	G. FEES
1 <input type="checkbox"/> New building 2 <input type="checkbox"/> Addition (enter number of new housing units added in H-13) 3 <input type="checkbox"/> Alteration (See 2 above) 4 <input type="checkbox"/> Moving (relocation) 5 <input type="checkbox"/> Repair, replacement 6 <input type="checkbox"/> Wrecking (If multifamily residential) enter number of units in H-13 7 <input type="checkbox"/> Plumbing 9 <input type="checkbox"/> Heating & Air Cond. 8 <input type="checkbox"/> Electric 10 <input type="checkbox"/> Sign	VALUE \$ 8,000 Public Works _____ Use Permit _____ Board of Appeals _____ Approved to Issue Permit Clawson Issued by fn no job #	Bldg. Permit \$ 60.00 Plumb. Perm. _____ Elect. Perm. _____ Cert. Occ. _____ Wrecking Micro .30 SMIP .80 Total Fees 61.10

H. PROPOSED USE - For "Wrecking" most recent use Residential

12 <input type="checkbox"/> One family 13 <input type="checkbox"/> Two or more family - Enter number of units _____ 14 <input type="checkbox"/> Transient hotel, motel or dormitory - Enter number of units _____ 15 <input type="checkbox"/> Carport 16 <input type="checkbox"/> Garage 17 <input type="checkbox"/> Other - Specify _____	18 <input type="checkbox"/> Amusement, recreational 19 <input type="checkbox"/> Church, other religious 20 <input type="checkbox"/> Industrial 21 <input type="checkbox"/> Parking garage 22 <input type="checkbox"/> Service station, repair garage 23 <input type="checkbox"/> Hospital, institutional 24 <input type="checkbox"/> Office, bank, professional 25 <input type="checkbox"/> Public utility 26 <input type="checkbox"/> School, library, other educational 27 <input type="checkbox"/> Stores, mercantile 28 <input type="checkbox"/> Tanks, towers 29 <input type="checkbox"/> Other - Specify _____
---	---



I have read the above application and know the contents thereof: the same is true and correct. I further state that I am familiar with the laws governing building, electrical work and/or plumbing within the City of Stockton and the State of California, and the amendments thereof, and that the above building and/or structure will be built in conformity therewith. I agree to call for all inspections.

Official Address
6404 Pacific Ave.

Signed *Roy D. Kealy #*

PERMIT **No. 85013**

State Contr. Lic. No. **217730** Type **025**

I am exempt from State Laws governing Licensed Contract

SIGNATURE

**INSPECTION DEPARTMENT — CITY OF STOCKTON
APPLICATION FOR BUILDING, ELECTRICAL, PLUMBING PERMITS
AND/OR CERTIFICATE OF OCCUPANCY**

ORIGINAL

No. 85014

IMPORTANT - COMPLETE ALL ITEMS MARK BOXES WHERE APPLICABLE		LAND USE			
Date <u>Aug. 3, 1972</u>		Can. Tr.	Tr. Zone	Block	Par
I. Official Address <u>6404 Pacific Ave.</u>					
Legal Desc. <u>Bik.</u>		Zoning			
Work Description <u>connect 4 signs "Grand Auto Supply"</u>		Code <u>22</u>			
Owner	Address	Zip	Phone		
<u>Grand Auto Supply Inc</u>					
Contractor	Address	Phone			
<u>Federal Signs</u>	<u>563 N. Wilson Way</u>	<u>466 6829</u>			
Arch. or Engr.	Address	Phone			
Lender	Address	Phone			

II. SELECTED CHARACTERISTICS OF BUILDING			REMARKS
A. BUILDING CODE	B. OWNERSHIP	C. DIMENSIONS	
Occupancy _____	<input type="checkbox"/> Private	Parcel Front Ft. _____	
Type Const. _____	<input type="checkbox"/> City	Grd. Fl. Area _____	
Fire Zone _____	<input type="checkbox"/> County	Lot Area _____	
Sprinklers _____	<input type="checkbox"/> State	Stories _____	
	<input type="checkbox"/> Fed.	Basement _____	
	<input type="checkbox"/> Educational	D. PARKING SPACES	
	<input type="checkbox"/> Semi Public	Exist _____ New _____	

III. PERMIT SPECIFICATION		VALUE \$	G. FEES
E. 1 <input type="checkbox"/> New building 2 <input type="checkbox"/> Addition (enter number of new housing units added in H-13) 3 <input type="checkbox"/> Alteration (See 2 above) 4 <input type="checkbox"/> Moving (relocation) 5 <input type="checkbox"/> Repair, replacement 6 <input type="checkbox"/> Wracking (If multifamily residential) enter number of units in H-13 7 <input type="checkbox"/> Plumbing 9 <input type="checkbox"/> Heating & Air Cond. 8 <input checked="" type="checkbox"/> Electric 10 <input type="checkbox"/> Sign		F. APPROVALS Public Works _____ Use Permit _____ Board of Appeals _____ Approved to Issue Permit _____ Issued by <u>fn</u>	Bldg. Permit \$ _____ Plumb. Perm. _____ Elect. Perm. _____ <u>5.</u> Cert. Occ. _____ Wrecking <u>Micro</u> _____ SMIP _____ Total Fees _____ <u>5.</u>

H. PROPOSED USE - For "Wracking" most recent use Residential 12 <input type="checkbox"/> One family 13 <input type="checkbox"/> Two or more family - Enter number of units _____ 14 <input type="checkbox"/> Transient hotel, motel or dormitory - Enter number of units _____ 15 <input type="checkbox"/> Carport 16 <input type="checkbox"/> Garage 17 <input type="checkbox"/> Other - Specify _____		18 <input type="checkbox"/> Amusement, recreational 19 <input type="checkbox"/> Church, other religious 20 <input type="checkbox"/> Industrial 21 <input type="checkbox"/> Parking garage 22 <input type="checkbox"/> Service station, repair garage 23 <input type="checkbox"/> Hospital, institutional 24 <input type="checkbox"/> Office, bank, professional 25 <input type="checkbox"/> Public utility 26 <input type="checkbox"/> School, library, other educational 27 <input type="checkbox"/> Stores, mercantile 28 <input type="checkbox"/> Tanks, towers 29 <input type="checkbox"/> Other - Specify _____
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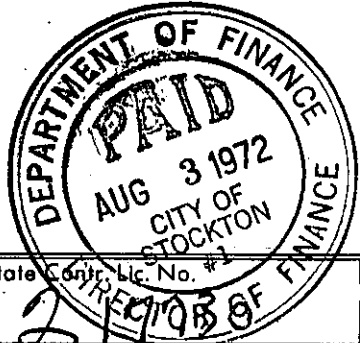
I have read the above application and know the contents thereof: the same is true and correct. I further state that I am familiar with the laws governing building, electrical work and/or plumbing within the City of Stockton and the State of California, and the amendments thereof, and that the above building and/or structure will be built in conformity therewith. I agree to call for all inspections.

Official Address 6404 Pacific Ave.

Signed Ray Kelly

PERMIT No. 85014

State Contr. Lic. No. #1 <u>2571038</u>	Type <u>C.45</u>
I am exempt from State Laws governing Licensed Contract	
SIGNATURE	



**INSPECTION DEPARTMENT — CITY OF STOCKTON
APPLICATION FOR BUILDING, ELECTRICAL, PLUMBING PERMITS
AND/OR CERTIFICATE OF OCCUPANCY**

ORIGINAL

No. 85180

**IMPORTANT - COMPLETE ALL ITEMS
MARK BOXES WHERE APPLICABLE**

LAND USE

Date August 14, 1972

I. Official Address <u>6404 Pacific Avenue</u>		Gen. Tr.	Tr. Zone	Block	Par
Legal Desc.	Blk.				Zoning <u>C-2</u>
Work Description <u>pole sign "Grand Auto"</u>					Code <u>22</u>
Owner <u>Grand Auto</u>	Address	Zip	Phone		
Contractor <u>Federal Sign & Signal Corp</u>	<u>536 No. Wilson Way</u>	<u>466-6829</u>			
Arch. or Engr.	Address				Phone
Lender	Address				Phone

II. SELECTED CHARACTERISTICS OF BUILDING

A. BUILDING CODE	B. OWNERSHIP	C. DIMENSIONS
Occupancy _____	<input checked="" type="checkbox"/> Private	Parcel Front Ft. _____
Type Const. _____	<input type="checkbox"/> City	Grd. Fl. Area _____
<u>3</u> Fire Zone	<input type="checkbox"/> County	Lot Area _____
Sprinklers _____	<input type="checkbox"/> State	Stories _____
	<input type="checkbox"/> Fed.	Basement _____
	<input type="checkbox"/> Educational	D. PARKING SPACES
	<input type="checkbox"/> Semi Public	Exist _____ New _____

REMARKS

III. PERMIT SPECIFICATION

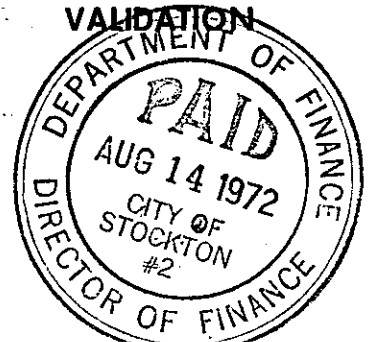
E.	VALUE \$ <u>1750.</u>	F. APPROVALS
1 <input type="checkbox"/> New building		Public Works _____
2 <input type="checkbox"/> Addition (enter number of new housing units added in H-13)		Use Permit _____
3 <input type="checkbox"/> Alteration (See 2 above)		Board of Appeals _____
4 <input type="checkbox"/> Moving (relocation)		Approved to Issue Permit <u>V.D. Clawson</u>
5 <input type="checkbox"/> Repair, replacement		Issued by <u>gd</u> <u>1837</u>
6 <input type="checkbox"/> Wrecking (If multifamily residential) enter number of units in H-13		
7 <input type="checkbox"/> Plumbing	9 <input type="checkbox"/> Heating & Air Cond.	
8 <input type="checkbox"/> Electric	10 <input checked="" type="checkbox"/> Sign	

G. FEES

Bldg. Permit.	\$ <u>15.00</u>
Plumb. Perm.	_____
Elect. Perm.	_____
Cert. Occ.	_____
Wrecking <u>Micro</u>	<u>.90</u>
SMIP	<u>.18</u>
Total Fees	\$16.08

H. PROPOSED USE - For "Wrecking" most recent use Residential

12 <input type="checkbox"/> One family	18 <input type="checkbox"/> Amusement, recreational
13 <input type="checkbox"/> Two or more family - Enter number of units _____	19 <input type="checkbox"/> Church, other religious
14 <input type="checkbox"/> Transient hotel, motel or dormitory - Enter number of units _____	20 <input type="checkbox"/> Industrial
15 <input type="checkbox"/> Corport	21 <input type="checkbox"/> Parking garage
16 <input type="checkbox"/> Garage	22 <input type="checkbox"/> Service station, repair garage
17 <input type="checkbox"/> Other - Specify _____	23 <input type="checkbox"/> Hospital, institutional
	24 <input type="checkbox"/> Office, bank, professional
	25 <input type="checkbox"/> Public utility
	26 <input type="checkbox"/> School, library, other educational
	27 <input type="checkbox"/> Stores, mercantile
	28 <input type="checkbox"/> Tanks, towers
	29 <input type="checkbox"/> Other - Specify _____



I have read the above application and know the contents thereof: the same is true and correct. I further state that I am familiar with the laws governing building, electrical work and/or plumbing within the City of Stockton and the State of California, and the amendments thereof, and that the above building and/or structure will be built in conformity therewith. I agree to call for all inspections.

Official Address
6404 Pacific Avenue

Signed Ray Kelly For S.S.

PERMIT **No. 85180**

State Contr. Lic. No. 217730 Type C.45

I am exempt from State Laws governing Licensed Contract

SIGNATURE

APPLICATION FOR

No.A 7218

BUILDING PERMIT
 ELECTRICAL PERMIT

PLUMBING PERMIT
 MECHANICAL PERMIT

WRECKING PERMIT

DATE ISSUED January 15, 1975	LENDER	CENS. TR. 01.00	TR. ZONE 05	BLOCK 01	PARCEL 11
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JOB ADDRESS Main 417 East MAIN Street	PROPERTY PARCEL NO. 149-170-07
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LEGAL DESCRIPTION	LOT	BLOCK	SUBDIVISION
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WORK DESCRIPTION:
1 appliance; gas line

OWNER El Mercado	ADDRESS	ZIP	PHONE
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CONTRACTOR VETTER CR.#203	ADDRESS	PHONE
-------------------------------------	---------	-------

ARCHITECT/ENGINEER	ADDRESS	PHONE
--------------------	---------	-------

ZONING	CONSTR. CODE 25	PERMIT ISSUED BY eb	VALUATION 450.	PERMIT FEE \$5.00
FIRE ZONE	NO. OF UNITS	REMARKS		MICRO FEE 10-0619-003
OCCUP. GROUP	CONT. CR. NO. #203			SMIP FEE 84-0251-013 .50
TYPE CONSTR.	SPRINKLERS			CERT. OF OCC. 10-0420-003
OCCUP. LOAD	BASEMENT			
NO. OF STORIES	USE PERMIT NO.			TOTAL FEES \$5.50

PLAN RECORD DATA		DIMENSIONS	OWNERSHIP	APPROVALS	NUMBER OF PARKING SPACES
NO.	DATE REC'D.	PARCEL FRONTAGE	<input checked="" type="checkbox"/> PRIVATE <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> STATE <input type="checkbox"/> FED. <input type="checkbox"/> EDUCATIONAL <input type="checkbox"/> SEMI PUBLIC	PUBLIC WORKS	EXIST. _____ NEW _____
ARCHIT. PLANS		LOT AREA		BD. OF APPEALS	VALIDATION
STRUCT. PLANS		1st FLOOR AREA		ENV. IMP. REPORT	
ELECT. PLANS		TOTAL FLOOR AREA		PERMIT ISS. APPV'D.	
MECH. PLANS					
SPECIFICATIONS					
CALCULATIONS					
SOILS REPORT					
ESTIMATED VALUE					

I HAVE READ THE ABOVE APPLICATION AND KNOW THE CONTENTS THEREOF; THE SAME IS TRUE AND CORRECT. I FURTHER STATE THAT I AM FAMILIAR WITH THE APPLICABLE LAWS GOVERNING BUILDING, PLUMBING, MECHANICAL AND ELECTRICAL WORK WITHIN THE CITY OF STOCKTON AND STATE OF CALIFORNIA, AND AMENDMENTS THERETO, AND I CERTIFY THAT THE WORK DONE UNDER THIS PERMIT WILL BE IN CONFORMITY THERWITH. I FURTHER STATE THAT I UNDERSTAND THAT THIS PERMIT MAY BE REVOKED FOR ANY NON-COMPLIANCE WITH APPLICABLE LAWS AND PROVISIONS.

I CERTIFY THAT IN THE PERFORMANCE OF THE WORK FOR WHICH THIS PERMIT IS ISSUED, I WILL COMPLY WITH THE STATE OF CALIFORNIA WORKMAN'S COMPENSATION LAWS.

I CERTIFY THAT:
 I AM LICENSED AS A CONTRACTOR UNDER THE STATE CONTRACTOR'S LICENSE LAW AND THE CITY OF STOCKTON BUSINESS LICENSE ORDINANCE, AND THAT THESE LICENSES ARE IN FULL FORCE AND EFFECT; OR
 I AM EXEMPT FROM SUCH LICENSING PROVISIONS IN CONFORMANCE WITH APPLICABLE GOVERNING STATE AND LOCAL LAWS.

SIGNED _____

JOB ADDRESS **417 East Main Street**

PERMIT No.A 7218

STOCKTON BUSINESS LIC. NO.

STATE CONTR. LIC. NO. TYPE



CITY OF STOCKTON
 COMMUNITY DEVELOPMENT DEPARTMENT
 BUILDING DIVISION, CITY HALL
 STOCKTON, CALIFORNIA 95202

PHONE: (209) 944-8561
 24 Hr. Inspection Request
 944-8560

PERMIT

LICENSED CONTRACTORS DECLARATION

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

CONTRACTOR _____
 LICENSE NO. _____
 LICENSE TYPE TAPIS'S ROOFING
 STOCKTON BUS. LIC. NO. _____

Application Number
 94 00001026

Job Address
 6404 PACIFIC AV

Issue Date
 3/31/94

OWNER-BUILDER DECLARATION

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

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

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

I am exempt under Sec. _____, B. & P.C. for this reason _____
 Date _____ Owner _____

CONSTRUCTION LENDING AGENCY

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

Lender's Name _____
 Lender's Address _____

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.) Policy No. _____

Company _____
 Certified copy is hereby furnished. Expires _____
 Certified copy is filed with the city building inspection department.

Date _____ Applicant Maria Tapia

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws 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 provisions 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 and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

SIGNED Maria Tapia
 ADDRESS _____

JOB ADDRESS _____

APPLICATION APPROVAL

THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

SIGNATURE: [Signature]

Permit Type . . : REROOFING PERMIT-----2L
 Parcel Nbr . . : 081 260 27
 Geo Code . . . :
 Owner Name . . : KERSTON SIDNEY & J TRS
 Address : P O BOX 458 HWY 89
 BLAIRSDEN CA 96103
 Appl Type . . . : REROOFING (SINGLE FAMILY DWELLINGS & DUPLEXS)
 Desc of Work : NON RESIDENTIAL
 REROOF, GENERAL
 Valuation . . . : 12000
 Square ftg . . : 0 Zoning : NA
 Occup Group . . : Const Type . . :

Special Notes and Conditions

TAPIS'S ROOFING ST LIC# 589135 EX 2/96
 W/C EXP 4/1/94
 CITY BUS LIC# 31651
 REROOF: TEAR OFF & INSULATION BOARD
 WHERE REQUIRED ROOF 80 SQS OF BUR

FEES

PERMIT FEE	92.00
A20-GPMI (.001*VAL)----KK	2.52
A15-SHIP-STRONG MOTION-N9	1.20
A35-LAND UPDATE-----NN	2.50
A30-PERMIT TRACKING----MM	6.00
A25-SPAS (.0005*VAL)---LL	12.00

PERMIT TOTAL 116.22

CR# 2304



**CITY OF STOCKTON
COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING DIVISION, CITY HALL
STOCKTON, CALIFORNIA 95202**

PHONE: (209) 944-8561
**24 Hr. Inspection Request
944-8560**

PERMIT

LICENSED CONTRACTORS DECLARATION

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

CONTRACTOR _____
LICENSE NO. _____
LICENSE TYPE _____ DATE _____
STOCKTON BUS. LIC. NO. _____

Application Number
94 00002585

OWNER-BUILDER DECLARATION

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

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

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

I am exempt under Sec. _____, B. & P.C. for this reason _____
Date _____ Owner _____

CONSTRUCTION LENDING AGENCY

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

Lender's Name _____
Lender's Address _____

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.) Policy No. _____

Company _____
 Certified copy is hereby furnished. Expires _____
 Certified copy is filed with the city building inspection department.
Date _____ Applicant Anthony Patti

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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

I certify that in the performance of the work for which this permit is issued; I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws 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 provisions 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 and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

SIGNED Anthony Patti ADDRESS _____

JOB ADDRESS _____

APPLICATION APPROVAL
THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

SIGNATURE: [Signature]

Job Address
5404 PACIFIC AV

Issue Date
7/22/94

Permit Type . . : SIGN PERMIT-----2L
Parcel Nbr . . : 081 260 27
Geo Code . . . :
Owner Name . . : KERSTON SIDNEY & J TRS
Address . . . : P O BOX 458 HWY 89
BLAIRSDEN CA 96103
Appl Type . . : SIGNS - MONUMENT OR FREE STANDING
Desc of Work : NON RESIDENTIAL
SIGN
ILLUMINATED
POLE
Valuation . . . : 3200
Square ftg . . : 99 Zoning . . . : CE
Occup Group . . : Const Type . . :

Special Notes and Conditions

RELOCATE 25 FT POLE SIGN - KRAGEN AUTO
DELTA SIGNS & CRANE SERVICE
CSL#290471 EXP 11/30/95
MC STATE FUND EXP 4/1/95
CITY BUS LIC 6403 EXP 12/31/94

----- FEES -----

PERMIT FEE	55.00
A20-GPMI (.001*VAL)----KK	3.20
A15-SMIP-STRONG MOTION-N9	.67
A35-LAND UPDATE-----NN	2.50
A10-MICROFILM FEE-----LO	3.00
A30-PERMIT TRACKING----NM	10.00
A25-SPAS (.0005*VAL)---LL	1.60

PERMIT TOTAL 75.97

OK # 1015



**CITY OF STOCKTON
COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING DIVISION, CITY HALL
STOCKTON, CALIFORNIA 95202**

PHONE: (209) 937-8561
24 Hr. Inspection Request
937-8560

PERMIT

Application Number
95 00004702

LICENSED CONTRACTORS DECLARATION

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

CONTRACTOR _____
LICENSE NO _____
LICENSE TYPE _____ DATE _____
STOCKTON BUS. LIC. NO _____

Job Address
6404 PACIFIC AV B

Issue Date
10/26/95

Permit Type . . : GENERAL ELECTRICAL PERMIT---2L
Parcel Nbr . . : 081 260 27
Geo Code . . . : 3307 03 03 09
Owner Name . . : KERSTON SIDNEY & J TRS
Address : 925 W DESERT HILL
GREEN VALLEY AZ 85614
Appl Type . . . : ELECTRICAL, PLUMBING, MECHANICAL-NON RES
Desc of Work . . : NON RESIDENTIAL
NEW ELECTRICAL SERVICE

Valuation . . . : 6800
Square ftg . . : 0 Zoning : C2
Occup Group . . : Const Type . . :

Special Notes and Conditions

ADD NEW METER MAIN AND LOAD CENTER &
TWO 208V CIRCUITS
SYNERGY ELEC. CSL#508694 EXP2/28/97
WC ZENITH CORP EXP 2/01/96
CITY LIC# 95-50095 EXP 12/31/95

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

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

Date _____ Owner _____

CONSTRUCTION LENDING AGENCY

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

Lender's Name _____

Lender's Address _____

WORKERS' COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.) Policy No _____

Company _____

Certified copy is hereby furnished. Expires _____

Certified copy is filed with the City Building Inspection Department

Date 10/26/95, Applicant [Signature]

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California

Date _____ Applicant _____

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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 laws relating to building construction and hereby authorize representatives of the city to enter upon the above mentioned property for inspection purposes.

SIGNATURE [Signature] ADDRESS _____

JOB ADDRESS _____

APPLICATION APPROVAL

THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

SIGNATURE [Signature]

----- FEES -----

PERMIT FEE	34.40
A20-SPHI (.001*VAL)----KK	6.80
A15-SHIP-STRONG MOTION-N9	1.43
A35-LAND UPDATE-----NN	2.50
A30-PERMIT TRACKING----NN	10.00
A25-SPAS (.0005*VAL)---LL	3.40

PERMIT TOTAL 58.53

Check # 1438



CITY OF STOCKTON
 COMMUNITY DEVELOPMENT DEPARTMENT
 BUILDING DIVISION, CITY HALL
 STOCKTON, CALIFORNIA 95202

PHONE: (209) 937-8561
 24 Hr. Inspection Request

937-8560
 Application Number
 96 00000189

PERMIT

LICENSED CONTRACTORS DECLARATION

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

CONTRACTOR _____
 LICENSE NO. _____
 LICENSE TYPE _____ DATE _____
 STOCKTON BUS. LIC. NO. _____

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I am exempt under Sec. _____, B. & P.C. for this reason _____
 Date _____ Owner _____

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Lender's Name _____
 Lender's Address _____

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Company _____
 Certified copy is hereby furnished. Expires _____
 Certified copy is filed with the city building inspection department.

Date _____ Applicant *[Signature]*

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

SIGNED *[Signature]* ADDRESS _____

JOB ADDRESS _____

APPLICATION APPROVAL

THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

SIGNATURE *[Signature]*

Job Address _____
 6404 PACIFIC AV

Issue Date
 1/17/96

Permit Type . . : GENERAL BUILDING PERMIT-----2L
 Parcel Nbr . . : 081 260 27
 Geo Code . . : 3307 03 03 09
 Owner Name . . : KERSTON SIDNEY & J TRS
 Address . . . : 925 W DESERT HILL
 GREEN VALLEY AZ 85814
 Appl Type . . : ADD, ALT & REPAIRS-NON RESIDENTIAL
 Desc of Work : NON RESIDENTIAL
 DOOR (S)
 Valuation . . : 850
 Square ftg . . : 0 Zoning . . . : C2
 Occup Group . : B2 Const Type . : 5H

Special Notes and Conditions

INSTALL HAN DOOR AT KRAGEN
 R.S. STEED STLIC#567418 EX 5/31/97
 CITY 50534 EX 12/31/96
 STATE FUND EX 1/1/97
 HANDICAP HANDSHIP TO BE APPROVED BY ED OREILLY PRIOR TO ISSUANCE. *final*

----- FEES -----	
PERMIT FEE	23.00
A20-GPHI (.001*VAL)----KK	.85
A15-SHIP-STRONG HOTION-H9	.50
A35-LAND UPDATE-----HN	2.50
A10-MICROFILH FEE-----LO	1.50
A30-PERMIT TRACKING----HH	10.00
A25-SPAS (.0005*VAL)---LL	.43

PERMIT TOTAL	30.78

CK# 10313