

**County of Los Angeles
Department of Public Works
Building and Safety / Land Development**

BUILDING PERMIT
BL 0500 9510300021

SAN GABRIEL VALLEY # 0500
125 BALDWIN
ARCADIA CA
Phone: (818) 574-0941 Ext:

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. 3900, Lab. C.).
Policy No. _____ Company _____
 Certified copy is hereby furnished.
 Certified copy is filed with the county building inspection department.
Date _____ Applicant _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE
(This section need not be completed if the permit is for one hundred dollars (\$100) or less.)
I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner whatsoever to become subject to the Workers' Compensation Laws.
Date 10-30-95 Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

LICENSED CONTRACTORS DECLARATION
I hereby affirm that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full force and effect.
License Number _____ Lic. Class _____
Contractor _____ Date _____
 I am exempt under Sec. _____
B & P.C. for this reason _____
Date _____
Signature _____
 I, as owner of the property, or my employees with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (Section 7044, Business Professions Code).
 I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).
CONSTRUCTION LENDING AGENCY
I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).
Lender's Name _____
Lender's Address _____
I certify that I have read this application and state that the above information is correct. I agree to comply with all county ordinances and State laws relating to building construction, and hereby authorize representatives of this County to enter upon the above-mentioned property for inspection purposes.
Signature of Applicant or Agent _____ Date _____

BUILDING ADDRESS:
380 ROSEHEAD BL S
PASO CA 91107
LOCALITY:
PASADENA
NEAREST CROSS STREET:
OAKDALE
ALIAS:

LEGAL ID:
ON FILE

ASSR INFO NBR:
5378-018-019

OWNER:
UNITED PENTECOSTAL CHURCH INC
380 S
ROSEHEAD BLVD
PASADENA CALIF 91107

CONTRACTOR:
UNITED PENTECOSTAL CHURCH INC
380 S. ROSEHEAD BLVD.
PASADENA, CA 91107

APPLICANT:
UNITED PENTECOSTAL CHURCH INC
380 S. ROSEHEAD BLVD.
PASADENA, CA 91107

ARCHITECT OR ENGINEER:
TEL. NO:
LIC. NO:

TEL. NO:
(818) 792-5846
LIC. NO:
NONE

TEL. NO:
(818) 792-5846
LIC. NO:
NONE

ACTION:
REPAIR
RE-ROOF OVER EXISTING W/COMPOSITION SHINGLE
CHURCH

DESCRIPTION OF WORK:
RE-ROOF OVER EXISTING W/COMPOSITION SHINGLE
CHURCH

USE OF EXISTING BLDG:
CHURCH

ISSUED ON: 10/30/95
PROCESSED BY: LC
EXPIRES ON: 10/29/96
FINAL DATE: 12.5.95
FINAL BY: [Signature]

SQ. FT. SIZE: 0
NO. OF STORIES: 0
NO. OF FAMILIES: 0

SIZE OF LOT: WITHIN 1000 FT.
BLDGS. NOW ON LOT: 0
OF SCHOOL?: NO

USE ZONE: 3
MAP NO: 3
FIRE ZONE: 3

SPECIAL CONDITIONS:

OCCUP GROUP: NEW: B2

EXIST: 23
STAT. CLASS: 0
DWELL UNITS: 0
APT/CON: NO

REQUIRED: TOTAL SETBACK FROM EXIST
SET BACK: YARD: HWY: PROP LINE: WIDTH:
FRONT PL
SIDE PL

SEWER MAP

BOOK: PAGE: VALUATION: CMP: 01
4,840

FEE DESCRIPTION: QUANTITY: UOM: AMOUNT:
AA BLDG PERMIT ISSUANCE 18.20
AC STRONG MOTION RESID 4840.00 VALUATN 0.50
AX BUILDING REVIEW FEE 53.80
D2 PERMIT W/O EN-HC 87.20
TOTAL FEES 159.70

