

File

CERTIFICATE CONCERNING WORKER'S COMPENSATION

I, Wayne Meyer, certify that I am the applicant for permit, 52 ASHLEC, that I understand that all construction employees are required to be covered by worker's compensation insurance.

Job address

I further 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 worker's compensation laws of California.

I FURTHER CERTIFY THAT THERE WILL BE NO PERSONS WHO ARE EMPLOYEES WITHIN THE MEANING OF THE WORKERS' COMPENSATION LAWS OF CALIFORNIA WORKING IN ANY CAPACITY REGARDLESS OF WHO EMPLOYS THEM OR THE JOB FOR WHICH THE PERMIT IS ISSUED.

I FURTHER CERTIFY THAT I HAVE AND WILL RETAIN THROUGHOUT THE COURSE OF THE WORK CONTROL OVER WHO IS PRESENT AND WHO WORKS AT THE JOB SITE.

I declare under penalty of perjury that the foregoing is true and correct.

DATED 10/22/79

LOS GATOS, CALIFORNIA

Wayne Meyer

7/1/79

TOWN OF LOS GATOS

PLANNING AND INSPECTION DEPARTMENT • PHONE 354-6871

APPLICATION FOR BUILDING PERMIT

P 7409

FOR APPLICANT TO FILL IN

BUILDING ADDRESS 52 ASHLER AVE L.G.

OWNER [REDACTED]

USE OF EXISTING BLDG RESIDENCE

CITY Los Gatos

CONTRACTOR [REDACTED]

ADDRESS 52 Ashler Ave

STATE CA

52 Ashler Ave

FIRE ZONE 3 CONST. TYPE V GROUP M PROCESSORY

USE ZONE R-1.8 SPECIAL CONDITIONS

MAXIMUM LENGTH PERMITTED 24'

BUILDING SETBACKS: FRONT 3'-0" REAR 3'-0" SIDE

PLANNING DEPT. [Signature] DATE 9/28/79

FIRE MARSHAL [Signature] DATE 10/1/79

PUBLIC WORKS [Signature] DATE 10/1/79

ISSUED BY: BUILDING INSPECTOR [Signature]

BUILDING PERMIT APPROVAL DATE

INSPECTION RECORD

DESCRIPTION OF WORK

NEW	ADD	ALTER	REPAIR	CEMENT	SH
50 FT					
SIZE					
USE OF STRUCTURE					
DESCRIPTION OF WORK					
<u>Porte Cochere Addition</u>					
B.L.C.O. <u>32.50</u>					
S.M.I. <u>50</u>					
TOTAL <u>33.00</u>					

VALIDATION

DATE	INSPECTOR	REMARKS

I HEREBY CERTIFY THAT I AM A FULLY LICENSED OR THAT I AM EXEMPT FROM BEING LICENSED BY THE STATE OF CALIFORNIA CONTRACTORS' EXCHANGE LAW

SIGNATURE Wayne E. Meyer

OCT 23 9 28 0801 * 0092001

FOR _____

DATE REC'D _____

PC NO _____ PC FEE _____

USE AND OCCUPANCY APPROVAL

PLANNING INSPECTOR _____ DATE _____

FIRE MARSHAL _____ DATE _____

PUBLIC WORKS _____ DATE _____

ISSUED BY _____ DATE _____

APPROVALS

FOUNDATION LOCATION, FORMS WATER ALLS	DATE	INSPECTOR'S S.G.
FRAME, FIRE STOPS, BRACING 90-15	<u>11/7/79</u>	<u>[Signature]</u>
FURNACE LOCATION, GAS VENT CURBS		
BATH INT		
BATH EXT		
LANDSCAPING, PARKING AND GRADING IMPROVEMENTS COMPLETED		
FINAL		

DISTRIBUTION: 1 - INSPECTION RECORD, 2 - PLANNING DEPT, 3 - RECORDS & COMM. DIV.

TOWN OF LOS GATOS

BUILDING INSPECTION DEPARTMENT • PHONE 354-6876

APPLICATION FOR BUILDING PERMIT

B 2267

FOR APPLICANT TO FILL IN

BUILDING ADDRESS: **52 Ashler**

OTNO: [REDACTED] A.G.P.S. TRACT

SIZE OF LOT: **102 x 50** NO. OF BLDGS. ALLOWED: **1**

EXISTING BLDG: **Residential Single Family**

OWNER: [REDACTED]

CITY: **Los Gatos**

ARCHITECT/ENGINEER: **T.O. Boyle**

CONTRACTOR: [REDACTED]

STATE LIC. NO.: [REDACTED] CITY: [REDACTED]

52 Ashler

PLAN NO: **3** CONVE. TIME: **↓** GROUP: **E**

SPECIAL CONDITIONS: [REDACTED]

USE PERMIT: [REDACTED]

FRONT	REAR	R SIDE	L SIDE
EXISTING			
BUILDING PERMIT APPROVAL			
PLANNING DEPT.			DATE
FIRE MARSHAL			3/11/75
PUBLIC WORKS			3/12/75
ISSUED BY BUILDING INSPECTION			3/12/75

INSPECTION RECORD	
4/8/75 - Outside Flg. ck. - Under house will be checked for proper support later RS	
8/17/75 - Support 11-Floor RS	
8/17/75 - Sh. Rock Npt. installed correctly RS	

DESCRIPTION OF WORK:

NEW ADD ALTER REPAIR DEMOLISH

SO. FT. SIZE: **150** NO. OF STORIES: **2** NO. OF RAFTERS: **1**

USE OF STRUCTURE: **RESIDENTIAL**

DESCRIPTION OF WORK: **SINGLE FAMILY DWELLING**

EST. COST: **6,000**

BLDG. **36.00**

SMIP **50**

TOTAL **36.50**

Signature: **David R. Boyle**

Capacity: **Professional Engineer**

KN2493 0362 • 4 0036501

USE AND OCCUPANCY APPROVAL

BUILDING INSPECTOR: [REDACTED] DATE: [REDACTED]

FIRE MARSHAL: [REDACTED] DATE: [REDACTED]

PUBLIC WORKS: [REDACTED] DATE: [REDACTED]

ISSUED BY: [REDACTED] DATE: **3/11/75**

VALIDATION		APPROVALS	
FOUNDATION LOCATION	DATE	INSPECTOR'S SIG	
FORMS WATER ELS.	4/8/75	RS	
FRAME FIRE STOPS	8/17/75	RS	
BRACING BOLTS			
FLUENCE LOCATION			
GAS VENT DUCTS			
BATH INT.			
BATH EXT.			
LANDSCAPING			
PARKING AND GRADENJ			
IMPROVEMENTS COMPLETED			
FINAL			RS

CONTINUATION 1 INSPECTOR-REC'D 7 1/2" x 11" x 1/8" 3 PERMITS & 100% CASE

TOWN OF LOS GATO

BUILDING INSPECTION DEPARTMENT - PHONE 354-6876

APPLICATION FOR ELECTRICAL PERMIT

2394

FOR APPLICANT TO FILL IN

ITEM	EA.	FEE
FOR ISSUANCE OF PERMIT	1	3.00
SERVICE CHARGE	1	3.00
TEMPORARY POLE	1	5.00
OUTLETS 1 TO 10	4	2.00
LIGHT OUTLETS	4	0.50
RECEPTACLES	10	0.10
SWITCHES	15	0.15 EA
LIGHT FIXTURES - 1-10 M.N FEE	4	2.00
OVER 10 (EA)		0.15
RANGE OVEN COOK TOP OR RERIAL		1.50
WATER HEATER		1.50
PANEL / PANELBOARD SWITCH		1.50
BOARD REMOTE FROM SERVICE		1.50
ELECTRICAL SIGN		3.00
TRANSFORMER BALLAST SIGN		0.50
ELECTRIC HEATERS (EA KW)		0.25
MOTORS - TO 1/2 HP		0.50
MOTORS - 1/2 TO 2 HP	1	1.00
MOTORS - 2 TO 5 HP		2.00
MOTORS - 5 TO 15 HP		3.00
SERVICE EQUIPMENT 100 AMP	1	1.00
NOT OVER 200 AMP		2.00
NOT OVER 400 AMP		3.00
NOT OVER 600 AMP		4.00
NOT OVER 800 AMP		5.00
OVER 800 AMP		10.00

BUILDING ADDRESS: 52 Ashley
 OWNER: [Redacted]
 MAIL ADDRESS: 52 ASHLEY
 CITY: LOS GATOS TEL: [Redacted]
 ELECTRICIAN: DOYES ELECTRIAN
 ADDRESS: [Redacted]
 CITY: LOS GATOS TEL NO: [Redacted]
 STATE LICENSE: 7533475 TOWN LICENSE: 1001

GROUP	USE ZONE	PROCESSED BY
I		aw
INSPECTION RECORD		

VALIDATION
 MR2495 0363 * 0012.301

TOTAL FEES 12.30

I hereby certify that I have read this application and state that the above information is true and correct. I agree to comply with all town Ord.ances and bylaws as regarding Electrical Work. I hereby certify that in doing the work authorized by this permit, I will adhere to and comply with all provisions of the Electrical Code of the State of California relating to Workman's Compensation Insurance.

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

SIGNATURE OF PERMITTEE: [Signature]
 CONTRACTOR'S SIGNATURE MUST BE THAT OF LICENSEE!

APPROVALS	DATE	INSPECTOR'S SIGN
CONDUIT		
ROUGH WIRING		
SERVICE EQUIP.		
FIXTURES		
POWER		
UTILITY CO NOTIFIED		
FINAL		

TOWN OF LOS GATOS

BUILDING INSPECTION DEPARTMENT - PHONE 354-4474

P 2330

Q	ITEM @ \$150 EA	NO	ITEM @ \$150 EA
2	WATER CLOSET		LAUNDRY TUB
2	BATH TUB		CLOTHES WASHER
1	SHOWER		DISPOSER
2	LAVATORY		FLOOR DRAIN
	SINK		FLOOR SINK
	DISHWASHER		DRINKING FOUNTAIN

BUILDING ADDRESS
52 ASHLER AVE

OWNER [REDACTED]

MAIL ADDRESS 52 ASHLER

CITY LOS GATOS **TEL NO**

CONTRACTOR

ADDRESS OWNER

CITY **STATE** **TEL NO**

LICENSE **TOWN LICENSE**

		FEE
ABOVE TOTAL X \$150 =		9 1/2
MISCELLANEOUS ITEMS		
1	HOUSE SEWER @ 500	500
1	WATER HEATER 150	150
1	WATER SYSTEM 150	150
	WATER SOFTENER 150	
	LAWN SPRINKLER 200	
	PRIVATE SEWAGE DISPOSAL 1000	
	RAINWATER SYSTEM/DRAIN 200	
	GAS SYSTEM 300	
	ADDITIONAL OULETS (OVER 5) 50/EA	

GROUP 1 **USE ZONE** **PROCESSED BY** [Signature]

INSPECTION RECORD

1. INSPECTION RECORD 2. INTERIM RECORD 3. PERMIT 4. TOWN CLERK

VALIDATION

NR2498 0364 * 0012501

1	PERMIT	2.00
1	TOTAL FEE	12.50

APPROVALS		
	DATE	INSPECTOR'S SIG
UNDER FLOOR WORK		
ROUGH PLUMBING	11/17/75	[Signature]
GAS PIPING		
GAS VENTS		
HOT WATER HEATER		
HOUSE SEWER		
PLUMBING FIXTURES		
GAS TEST	11/17/75	[Signature]
UTILITY CO. NOTIFIED		
FINAL	11/17/75	[Signature]

I hereby declare that I have read this application and state that the above described work will be done in accordance with all Town Ordinances and State Laws regarding plumbing. I certify that in doing the work authorized by this permit I will not employ any person in violation of the Labor Code of the State of California relating to Workmen's Compensation Insurance.

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

SIGNATURE OF PERMITTEE [Signature]

SIGNATURE OF CONTRACTOR MUST BE THAT OF LICENSEE!

TOWN OF LOS GATOS

PLUMBING INSPECTION DEPARTMENT • PHONE 354-6676

APPLICATION FOR MECHANICAL PERMIT

M 2087

FOR APPLICANT TO FILL IN

ITEM	NO.	AMT.	\$ FEE
FOR ISSUANCE OF PERMIT	X	X	3 00
EA FURNACE TO 100 000 BTU	X	4 00	
EA FURNACE OVER 100 000 BTU	X	5 00	5 00
REPAIR OR ALTERATION EA HEATING UNIT		4 00	
VENT OR FLEET NOT LISTED ABOVE	X	2 00	
BOILER OR COMPRESSION UNIT 10 TO 30 HP DESCRIPTION UNIT 10 TO 30 000 BTU		4 00	
BOILER OR COMPRESSION UNIT 31 TO 50 HP DESCRIPTION UNIT 31 TO 50 000 BTU		7 50	
BOILER OR COMPRESSION UNIT 51 TO 75 HP DESCRIPTION UNIT 51 TO 75 000 BTU		10 00	
BOILER OR COMPRESSION UNIT 76 TO 125 HP DESCRIPTION UNIT 76 TO 125 000 BTU		15 00	
BOILER OR COMPRESSION UNIT 126 TO 250 HP DESCRIPTION UNIT 126 TO 250 000 BTU		25 00	
AIR HANDLING SYSTEM TO 100 CFM		3 00	
AIR HANDLING SYSTEM OVER 100 CFM	X	5 00	5 00
EVAPORATIVE COOLER		3 00	
VENT FAN SINGLE DUCT	X	2 00	2 00
HOOD MECHANICAL EXHAUST		3 00	
VENTILATION SYSTEM NOT PART OF A REFRIGERATION SYSTEM		3 00	
AFFLIANCE NOT LISTED		3 00	
DOMESTIC TYPE INCINERATOR		5 00	
COMMERCIAL OR INDUSTRIAL APPLICATION		20 00	

BUILDING ADDRESS
52 Ashler

OWNER [REDACTED]

MAIL ADDRESS
52 ASHLER

CITY LOS GATOS TEL NO. [REDACTED]

CONTRACTOR Samuel Daniels

ADDRESS SAMES

CITY SAMES TEL NO. SAMES

STATE LICENSE N/C TOWN LICENSE N/C

USE ZONE B CHECKED BY COON

INSPECTION RECORD

VALIDATION

MIN 2473 0365 * 0015.001

TOTAL FEES 15 00

I, the undersigned, hereby acknowledge that I have read this application and state that the above described work complies with all Town Ordinances and State laws relating to plumbing and mechanical work. I will not employ any person or persons in doing the work unless they will not employ any person or persons in violation of the labor Code of the State of California relating to minimum wages and overtime pay.

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

SIGNATURE OF PERMITTEE [Signature]

SIGNATURE OF CONTRACTOR MUST BE THAT OF LICENSEE!

APPROVALS

	DATE	REMARKS
UNDER FLOOR WORK		
DUCT WORK	8/12/71	[Signature]
GAS VENTS		
COMBUSTION AIR		
COMPARTMENT AREA		
CIRCULATION AIR		
FIRE DAMPERS		
ACCESS		
FINAL		[Signature]

DISTRIBUTION 1. INSPECTION RECORD 2. INTERIM RECORD 3. PERMITTEE 4. OWNER

TOWN OF LOS GATOS

No. 1434 B

Building Inspection Department
Phone Elgato 44520

BUILDING PERMIT

Location

52 Ashlar

Lot

Block

Tract

Street

Setbacks ft.

Zone R-3 Front Side () () Rear

Date

5 20 1956

Is hereby granted in accordance with application to

Build ~~Remodel~~ Add to Move
 or No. 2 Story 1 Family Residence and Bath & Bedroom
 Other Type Structure

Occupancy

Owner

Contractor

Valuation

\$ 700 Six 8 500.00 Dollars

RECEIPT for

an inspection fee is hereby acknowledged.

Town of Los Gatos Building Inspection Department

By W. O. Ocker

ELECTRICAL, PLUMBING AND GAS PERMITS ARE REQUIRED IN ADDITION TO THIS PERMIT

INSPECTION RECORD

	DATE	INSPECTOR
FOOTINGS		
FOUNDATION FORMS		
POUR NO CONCRETE UNTIL ABOVE HAS BEEN SIGNED		
BOND BEAM (CONC. BLK.)		
ROUGH PLBG.	PARTIAL	
	COMPLETE	
GAS PRESSURE		
ROUGH FRAME (INCLUDES FLUES, ROOF & SIDING)		
DO NOT WIRE UNTIL ABOVE HAS BEEN SIGNED		
ROUGH WIRING		
COVER NO WALLS UNTIL ABOVE HAS BEEN SIGNED		
STUCCO WIRE & LATH		
PLUMBING FIXTURES		
GAS APPLIANCES		
ELECTRICAL FIXTURES		
BUILDING COMPLETE		

No Utilities Will Be Cleared Until (Building Complete) Has Been Approved

TOWN OF LOS GATOS

No 1011 B

Building Inspection Department
Phone Elgato 4-4520

BUILDING PERMIT

Location

Street: 52^{Lot} Ashler^{Block} Ave. Tract: h. B.

Setbacks ft.

Zone Front Side () () Rear

Date 12-7-1953

Is hereby granted in accordance with application to

Remodel 1 Story 1 Family Residence and
Add to No. Bath Rooms & Porch
Move or Other Type Structure

Occupancy

Owner

Contractor

Valuation \$200.00 - \$2.00 fee

RECEIPT for Two Dollars as inspection fee is hereby acknowledged.

Town of Los Gatos Building Inspection Department

By W. A. Oaks

ELECTRICAL, PLUMBING AND GAS PERMITS ARE REQUIRED IN ADDITION TO THIS PERMIT

INSPECTION RECORD

	DATE	INSPECTOR
FOOTINGS		
FOUNDATION FORM:		
POUR NO CONCRETE UNTIL ABOVE HAS BEEN SIGNED		
BOND BEAM (CONC. BLK.)		
ROUGH PLBO.	PARTIAL	
	COMPLETE	
GAS PRESSURE		
ROUGH FRAME (INCLUDES FLUE, ROOF & SIDING)		
DO NOT WIRE UNTIL ABOVE HAS BEEN SIGNED		
ROUGH WIRING		
COVER NO WALLS UNTIL ABOVE HAS BEEN SIGNED		
STUCCO WIRE & LATH		
PLUMBING FIXTURES		
GAS APPLIANCES		
ELECTRICAL FIXTURES		
BUILDING COMPLETE		

Completed

No Utilities Will Be Cleared Until (Building Complete) Has Been Approved

TOWN OF LOS GATOS

110 E. MAIN ST., LOS GATOS, CA 95030
 BUILDING INSPECTION DEPARTMENT • PHONE 384-8878

APPLICATION FOR BUILDING PERMIT
 INSPECTION REQUESTS PHONE 384-8877

B 23872

1

FOR APPLICANT TO FILE IN

BUILDING ADDRESS: 52 ASHLER
 STREET, AVE, BLVD, ETC: [Blank]
 SUITE OR APT. NO: [Blank]
 USE OF EXISTING BUILDING: Residence
 DATE: 5/12/97
 OWNER: [Redacted]
 ADDRESS: 52 Ashler
 CITY: Los Gatos
 ARCHITECT (I) ENGINEER (I) DESIGNER (I) PH: [Blank]
 ADDRESS: N/A
 CONTRACTOR: N/A
 ADDRESS: Owner Builder
 STATE LICENSE: [Blank] TOWN LICENSE: [Blank]

PERMIT APPROVALS

REQ FINAL	PTM	DEPT.	DATE
INS.	PLAN		/ /
INS.	DEPT		/ /
INS.	ENGINEERING		/ /
INS.	DEPT		/ /
INS.	FIRE		/ /
INS.	DEPT		/ /
INS.	BUILDING		/ /
INS.	DEPT		/ /

City Required / / 97

FEES AND TAXES

FRONT SB	DEPT	ISSUANCE	AMOUNT
REAR SB	PERMIT	10-4230	\$ 20,00
LEFT SB	BUILDING PERMIT	10-4230	40,00
FRONT SB	TITLE - 24	10-4231	
USE ZONE	SEISMIC TAX	56-4810	60
SEWER NO	PLAN CHECK		
TYPE GROUP	MACRO BUILDING	10-4592	
TYPE CONST.	CONSTRUCTION TAX	33-4110	
FIRE SPRINKLER	UTILITY TAX	34-4110	
	PARK TAX	35-4110	
	UNCRD PLANNING	10-4591	
	UNCRD ENG	10-4593	
	STORM DRAIN ENG		
TOTAL \$			60.50

SQUARE FOOTAGE

EXISTING	ADDITION	TOTAL
1st FL		
2nd FL		
(BASE 3rd FL)		
SUB TOTAL		
GARAGE		
OTHERS		

NO OF STORES: [Blank] SIZE OF LOT: [Blank] NO OF LIVING UNITS: [Blank]
 APN: [Blank] ESTIMATE VALUATION: [Blank]

DESCRIPTION OF WORK: Kitchen Remodel
 BR Cabinets
 Popcorn, Sheetrock
 CALCULATED VALUE: 12,000
 ADDRESS: [Blank]

HAZARDOUS MATERIALS DECLARATION: If this application is for commercial use, indicate if the intended occupancy will use hazardous materials. () Yes () No

CONTRACTORS DECLARATION
 I CERTIFY THAT I AM PROPERLY LICENSED BY THE STATE OF CALIFORNIA CONTRACTORS LICENSE LAW
 SIGNATURE X _____

COMPLETE A OR B
 WORKER'S COMPENSATION DECLARATION
A I HEREBY AFFIRM THAT I HAVE A POLICY OF WORKER'S COMPENSATION INSURANCE A CERTIFIED COPY OF A CERTIFICATE OF THAT INSURANCE IS HEREWITH FURNISHED, AND ON FILE WITH THE TOWN. I FURTHER AFFIRM THAT I SHALL KEEP THE INSURANCE IN EFFECT THROUGHOUT THE JOB.
 SIGNATURE X _____

CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE
B 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 WORKER'S COMPENSATION LAWS OF CALIFORNIA.
 SIGNATURE X _____
 I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE INFORMATION IS CORRECT. I AGREE TO COMPLY WITH ALL TOWN 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.
 SIGNATURE X _____

INSPECTION RECORD

APPROVALS

	DATE	INSPECTOR'S SIG
FOUNDATION/LOCATION		
FORMS MATERIALS		
UNDER FLOOR CONCRETE JOISTS		
U.F. INTERIOR SHEAR		
EXTERIOR		
SHEAR WALLS / ROOF NAIL		
ROUGH FRAME	6-2-92	<i>JM</i>
EXTRAORD LATH		
INSULATION	6-8-92	<i>JM</i>
SHEETROCK	6-8-92	<i>JM</i>
BUILDING CODE FINAL		
BUILDING PERMIT FINAL	7-16-92	<i>JM</i>

TOWN OF LOS GATOS

OWNER-BUILDER VERIFICATION

B23872

ATTENTION OWNER-BUILDERS!

IF YOU PLAN TO IMPROVE YOUR PROPERTY AND EMPLOY PERSONS OTHER THAN YOUR IMMEDIATE FAMILY, THE FOLLOWING INFORMATION WILL BE OF BENEFIT TO YOU. STATE AND FEDERAL LAWS REQUIRE THAT YOU:

- 1. REGISTER WITH THE STATE AND FEDERAL GOVERNMENTS AS AN EMPLOYER.
- 2. WITHHOLD AND REMIT INCOME TAX FOR EACH EMPLOYEE.
- 3. PAY SOCIAL SECURITY COSTS ON EACH EMPLOYEE.
- 4. WITHHOLD AND REMIT SOCIAL SECURITY COSTS ON EACH EMPLOYEE.
- 5. PAY WORKER'S COMPENSATION INSURANCE COSTS ON EACH EMPLOYEE.
- 6. WITHHOLD AND REMIT DISABILITY INSURANCE COSTS FOR EACH EMPLOYEE.
- 7. PAY UNEMPLOYMENT INSURANCE COSTS ON EACH EMPLOYEE.

YOU MAY CONSTRUCT IMPROVEMENTS FOR SALE ONLY UNDER SPECIFIC, LIMITED CONDITIONS.

YOU MAY CONSTRUCT IMPROVEMENTS FOR RENTAL-OCCUPANCY ONLY UNDER SPECIFIC, LIMITED CONDITIONS.

YOU MAY SUBCONTRACT PORTIONS OF THE CONSTRUCTION TO ANY PERSON OR FIRM, BUT THEY MUST BE LICENSED BY THE STATE OF CALIFORNIA.

INFORMATION ABOUT INSURANCE, LIEN LAWS, AND OTHER CONSTRUCTION MATTERS MAY BE OBTAINED FROM THE CONTRACTORS STATE LICENSE BOARD AND VARIOUS BUSINESS AND TRADE ASSOCIATIONS.

Please complete and return this information at your earliest opportunity to avoid unnecessary delay in processing and issuing your Building Permit.

- 1. I personally plan to provide the major labor and materials for construction of the proposed property improvement: ✓ or _____
(yes) (no)
- 2. I have signed an application for a Building permit for the proposed work: ✓ or _____
(yes) (no)

I AGREE TO CHECK THAT EACH SUBCONTRACTOR HAS A VALID TOWN OF LOS GATOS BUSINESS LICENSE BEFORE THEY BEGIN WORK. (YOU MAY VERIFY BUSINESS LICENSE STATUS WITH THE FINANCE DEPARTMENT AT 354-6835).

[Signature] (SIGNATURE) 5-13-91 (DATE)

Property Owner: [Redacted]

Address: 52 Baker Ave Los Gatos, CA
(Of job site)

TOWN OF LOS GATOS

BUILDING INSPECTION DEPARTMENT • PHONE 284-8376
INSPECTION REQUESTS PHONE 284-4677

E 19809

1

UNIT FEE	NO. OF ITEMS	AMOUNT	\$	FEES	BUILDING ADDRESS	
OUTDOOR LIGHTS		90 EA.			52 ASHLER	
INDOOR LIGHTS		70 EA.			USE OF BUILDING Residential	
SWITCHES		90 EA.			OWN [REDACTED]	
RECEPTACLES, OUTLETS	3	90 EA.	27	70	MAIL ADDRESS [REDACTED]	
RESIDENTIAL: OVEN, COOK TOP, RANGE, WALL AIR COND., SPACE HEATER, DISPOSER, DISHWASHER, WATER HEATER, WASHING MACH., CLOTHES DRYERS, OTHER SMALL APPLIANCES, 1 KW OR LESS	4	300 EA.	1200	100	CITY _____ ZIP _____	
COMMERCIAL: MEDICAL & DENTAL DEVICES, FOOD & BEVERAGE CABINETS, ILLUMINATED SHOW CASES, DRINK FOUNTAINS, VENDING MACH., LAUNDRY MACH., OTHER SMALL APPLIANCES 1 KW OR LESS		600 EA.			CONTRACTOR <u>None</u> PHONE _____	
LARGE APPLIANCES, POWER APPARATUS, HEATING & AIR COND. EQUIP., COOKING & BAKING EQUIP., OTHER LARGE APPLIANCES & APPARATUS OVER 1 KW		800 EA.			MAIL ADDRESS _____	
OVER 10 KW		1500 EA.			CITY _____ ZIP _____	
OVER 50 KW		3000 EA.			STATE LICENSE _____ TOWN LICENSE _____	
OVER 100 KW		4500 EA.			NOTICE: 1. SIGNS ARE REGULATED, SEE PLANNING DEPT. 2. OUTDOOR LIGHTS ARE REGULATED AGAINST SHINING ON OTHER PROPERTIES. SHOESTRING LIGHTING NOT PERMITTED.	
BUSWAY (PER 100 FEET)		500 EA.				
SIGNS		2000 EA.			GROUP _____ USE ZONE _____ PROCESSED BY <u>Plaza</u> DATE <u>5/13/92</u>	
SERVICE EQUIP. NOT OVER 200 AMPS		2000 EA.			INSPECTION RECORD <u>6-2-92 IN WALL ELEC.</u> <u>(JW)</u>	
SERVICE EQUIP. OVER 200 AMPS		4000 EA.				
SERVICE EQUIP. OVER 600 VOLTS		7500 EA.				
SUBPANEL		1100 EA.				
MISC APPARATUS, CONDUITS & CONDUCTORS		1200 EA.				
TEMPORARY POWER POLE		2000 EA.				
TEMPORARY LIGHTING SYSTEM		1000 EA.				
SWIMMING POOL SYSTEM		3000 EA.				
NEW RESIDENTIAL CONST. _____ SQ FT X \$0.06 =						
SUBTOTAL						
ELECTRICAL PLAN CHECK FEE 25%						
ISSUANCE OF PERMIT				20		00
TOTAL FEES \$						3970
CONTRACTORS DECLARATION						
I CERTIFY THAT I AM PROPERLY LICENSED BY THE STATE OF CALIFORNIA CONTRACTOR'S LICENSE LAW						
SIGNATURE <u>X</u> _____						
COMPLETE A OR B						
WORKER'S COMPENSATION DECLARATION						
A I HEREBY AFFIRM THAT I HAVE A POLICY OF WORKER'S COMPENSATION INSURANCE. A CERTIFIED COPY OF A CERTIFICATE OF THAT INSURANCE IS HEREWITH FURNISHED AND ON FILE WITH THE TOWN. I FURTHER AFFIRM THAT I SHALL KEEP THE INSURANCE IN EFFECT THROUGHOUT THE JOB.						
SIGNATURE <u>X</u> _____						
CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE						
B 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 WORKER'S COMPENSATION LAWS OF CALIFORNIA.						
SIGNATURE <u>X</u> <u>Thomas Minter</u>						
I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE INFORMATION IS CORRECT. I AGREE TO COMPLY WITH ALL TOWN ORDINANCES AND STATE LAWS RELATING TO MECHANICAL CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES.						
SIGNATURE <u>X</u> <u>Thomas Minter</u>						
APPROVALS						
	DATE	INSPECTOR'S SIG.				
CONDUIT						
ROUGH WIRING						
SERVICE EQUIP.						
FIXTURES						
GROUNDING						
UTILITY CO NOTIFIED						
FINAL			<u>7-16-92</u>			

TOWN OF LOS GATOS

BUILDING INSPECTION DEPARTMENT • PHONE 364-6478
INSPECTION REQUESTS PHONE 364-6477

P 17618

1

UNIT FEE	NO. OF ITEMS	AMOUNT	ISS.	FEE
WATER CLOSET		7.00 EA		
BATH TUB		7.00 EA		
SHOWER		7.00 EA		
LAVATORY		7.00 EA		
SINK		7.00 EA	7	05
DISHWASHER		7.00 EA	7	05
DISPOSER		7.00 EA	7	05
CLOTHES WASHER		7.00 EA		
FLOOR DRAIN		7.00 EA		
DRINKING FTN		7.00 EA		
RAINWATER SYSTEM		8.00 PER DRAIN		
HOUSE SEWER		15.00 EA		
WATER HEATER		10.00 EA		
GREASE TRAP		12.00 EA		
GAS SYSTEM		10.00 SYSTEM		
LAWN SPRINKLER		9.00 SYSTEM		
WATER SYSTEM		10.00 SYSTEM		
VACUUM BREAKER		2.00 EA		
BACKFLOW DEVICE		8.00 EA		
PRIVATE SWIMMING POOL		30.00		
NEW RES CONST	50 FT X 40 FT			
		SUBTOTAL		
PLUMBING PLAN CHECK FEE 25%				
ISSUANCE OF PERMIT				20.00

TOTAL FEES \$

41.00

CONTRACTORS DECLARATION

I CERTIFY THAT I AM PROPERLY LICENSED BY THE STATE OF CALIFORNIA CONTRACTOR'S LICENSE LAW

SIGNATURE *[Signature]*

COMPLETE A OR B

WORKER'S COMPENSATION DECLARATION

A I HEREBY AFFIRM THAT I HAVE A POLICY OF WORKER'S COMPENSATION INSURANCE. A CERTIFIED COPY OF A CERTIFICATE OF THAT INSURANCE IS HEREWITH FURNISHED, AND ON FILE WITH THE TOWN. I FURTHER AFFIRM THAT I SHALL KEEP THE INSURANCE IN EFFECT THROUGHOUT THE JOB

SIGNATURE *[Signature]*

CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE

B 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 WORKER'S COMPENSATION LAWS OF CALIFORNIA

SIGNATURE *[Signature]*

I CERTIFY THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE INFORMATION IS CORRECT. I AGREE TO COMPLY WITH ALL TOWN ORDINANCES AND STATE LAWS RELATING TO PLUMBING CONSTRUCTION, AND HEREBY AUTHORIZE REPRESENTATIVES OF THIS CITY TO ENTER UPON THE ABOVE MENTIONED PROPERTY FOR INSPECTION PURPOSES

SIGNATURE *[Signature]*

BUILDING ADDRESS
52 ASHLER

USE OF BUILDING
Residential

MAX ADDRESS
52 Ashler

CITY
Los Gatos

CONTRACTOR
Clayton Belden

CITY
Los Gatos

STATE LICENSE
CA

GROUP	USE ZONE	PROCESSED BY	DATE
		<i>[Signature]</i>	5/13/92

INSPECTION RECORD

VALIDATION 6012111 05/13/92

APPROVALS

	DATE	INSPECTOR'S SIG
UNDERFLOOR WORK	5-2-92	<i>[Signature]</i>
ROUGH PLUMBING	5-2-92	<i>[Signature]</i>
GAS PIPING		
GAS VENTS		
HOT WATER HEATER		
HOUSE SEWER		
PLUMBING FIXTURES		
GAS TEST		
UTILITY CO NOTIFIED		
FINAL	7-10-92	<i>[Signature]</i>

52 Ashler Ave.

**TOWN OF LOS GATOS
BUILDING INSPECTION DEPARTMENT**

Permit Number: B95-000254

Work Description: T/O (E) COMP., INSTALL (N) COMP.

Status...: ISSUED
 Applied...: 04/24/1995
 Approved...: 04/24/1995
 Issued...: 04/24/1995
 Expires...: 10/21/1995

Building Address: 52 ASHLER AV
 Owner.....: [REDACTED]
 Address.....: 52 ASHLER AV
 City.....: LOS GATOS CA
 Contractor.....: WAGNER ROOFING CO.
 License.....: 672928
 Address.....: [REDACTED]
 City.....: LOS GATOS
 Business Lic...: 95010695
 Arch\Eng\Design...:
 License.....:
 Address.....:
 City.....:

Valuation.....	2,295.00	Livable Sq.Ft.:		Unit Count: 000
Total Sq.Ft.....	2,700	Bldg Count: 001		
Class Code.....	434	***** PERMIT FEES *****		
*****		Park Tax.....		.00
Permit Issuance.....	22.00	Planning Plan Ck.....		.00
Building Permit.....	75.50	Micro Planning.....		.00
Title-24.....	.00	Storm Drain Eng.....		.00
Seismic Tax.....	.50	Hauling Fee.....		40.50
Plan Check.....	.00	Computer Services.....		3.02
Micro Building.....	3.30	Electrical Fee.....		
Construction Tax.....	.00	Plumbing Fee.....		
Utility Tax.....	.00	Mechanical Fee.....		
Gen Pln Updt.....	.00	*****		
*****		Total Calculated Fees:		144.82
		Total Additional Fees:		.00
		Total Fees Due.....:		144.82
		Total Payments.....:		.00
		BALANCE DUE.....:		144.82

CONTRACTORS DECLARATION

I certify that I am properly licensed by the State of California Contractors License Law.

Signature X [Signature]

COMPLETE A or B

WORKER'S COMPENSATION DECLARATION

A I hereby affirm that I have a policy of Worker's Compensation Insurance. A certified copy of a certificate of that insurance is herewith furnished, and on file with the Town. I further affirm that I shall keep the insurance in effect throughout the job.

Signature X [Signature]

CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE

B 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 Worker's Compensation Laws of the State of California.

Signature X [Signature]

CERTIFICATION OF PERMIT ISSUANCE

I certify that I have read this application and state that the above information is correct. I agree to comply with all Town ordinances and State Laws relating to building construction, and hereby authorize representatives of this Town to enter upon the above mentioned property for inspection purposes.

Signature X [Signature]



**TOWN OF LOS GATOS
COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING PERMIT**

Permit Number: B00-000744

Work Description: REPLACE WINDOWS ALL OF HOUSE

Building Address: 52 ASHLER AV

Status: ISSUED

Owner: [REDACTED]

Applied: 08/02/2000

Address: 52 ASHLER AVE

Approved: 08/02/2000

City: LOS GATOS CA

Issued: 08/02/2000

Contractor: RITTER CONSTRUCTION

Expires: 01/29/2001

License: 567533

Address: [REDACTED]

City: [REDACTED]

Business Lic.: Also is Applicant

Arch\Eng\Design:

License:

Address:

City:

Valuation: 12,000.00

Total Sq.Ft.: Livable Sq.Ft.:

Class Code: 434 Bldg Count: 001 Unit Count: 000

***** PERMIT FEES *****

Permit Issuance:	25.00	Park Tax:	.00
Building Permit:	188.00	Planning Plan Ck.:	.00
Title-24:	.00	Micro Planning:	.00
Seismic Tax:	1.20	Storm Drain Eng.:	.00
Plan Check:	.00	Road Impact Fee:	.00
Micro Building:	2.00	Computer Services:	7.52
Construction Tax:	.00	Gen Pln Updt.:	.00
Utility Tax:	.00		

Total Calculated Fees:	223.72
Total Additional Fees:	.00
Total Fees Due:	223.72
Total Payments:	.00
BALANCE DUE:	223.72

LICENSED CONTRACTOR'S DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 of division 3 of the Business and Professions Code, and my license is in full force and effect.

Signature: [Signature]

COMPLETE A or B

WORKER'S COMPENSATION DECLARATION

A) I hereby affirm under penalty of perjury I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

Signature: [Signature]

CERTIFICATE OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE

B) 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, and agree that, if I should become subject to the worker's compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Signature: _____

WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO \$100,000, IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE.

CERTIFICATION OF OWNER/BUILDER DECLARATION

I hereby affirm under penalty of perjury that I, as owner of the property, have read this application and the owner/builder information form attached is correct. I agree to comply with all Town ordinances and State Laws relating to building construction, and hereby authorize representatives of this Town to enter upon the above mentioned property for inspections.

Signature: _____

TOWN OF LOS GATOS

INSPECTION REQUESTS * PHONE 354-8677 (VOICE MAIL)

110 E. MAIN ST., LOS GATOS, CA 95032

BUILDING DEPARTMENT * PHONE 354-8661 FAX 354-7593

BUILDING ADDRESS 52 Ashler Ave. Los Gatos CA. 95030		HOMEOWNER'S ASSOCIATION (check)	For Official Use Only B00- _____ B00- _____ E00- _____ M00- _____ P00- _____ _____ Plans _____ Energy Calcs _____ Soil R. _____ Struc. Calcs <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:30%;"></th> <th style="width:30%;">Req.</th> <th style="width:30%;">Hold</th> <th style="width:30%;">Approved</th> </tr> </thead> <tbody> <tr><td>Planning:</td><td></td><td></td><td></td></tr> <tr><td>SK [6807]</td><td></td><td></td><td></td></tr> <tr><td>CR [5720]</td><td></td><td></td><td></td></tr> <tr><td>SAND [6873]</td><td></td><td></td><td></td></tr> <tr><td>SDAV [6875]</td><td></td><td></td><td></td></tr> <tr><td>JOEL [6879]</td><td></td><td></td><td></td></tr> <tr><td>TRIS [6860]</td><td></td><td></td><td></td></tr> <tr><td>SL [5702]</td><td></td><td></td><td></td></tr> <tr><td>Schools:</td><td></td><td></td><td></td></tr> <tr><td>Fire:</td><td></td><td></td><td></td></tr> <tr><td>WVSD:</td><td></td><td></td><td></td></tr> <tr><td>Health Dept:</td><td></td><td></td><td></td></tr> <tr><td>Hazardous</td><td></td><td></td><td></td></tr> <tr><td>Material Clearance:</td><td></td><td></td><td></td></tr> <tr><td>Comments:</td><td></td><td></td><td></td></tr> <tr><td>Historic or Pre - 1941</td><td></td><td></td><td></td></tr> <tr><td>Plan Check Fee:</td><td></td><td></td><td></td></tr> <tr><td>Town's Valuation:</td><td></td><td></td><td></td></tr> <tr><td>Building Approved:</td><td></td><td></td><td></td></tr> <tr><td>Fire Sprinkler System</td><td></td><td></td><td></td></tr> <tr><td>Ready To Issue:</td><td></td><td></td><td></td></tr> <tr><td>Contacted Owner / Contractor on:</td><td></td><td></td><td></td></tr> <tr><td>Application Processed By:</td><td></td><td></td><td></td></tr> </tbody> </table>		Req.	Hold	Approved	Planning:				SK [6807]				CR [5720]				SAND [6873]				SDAV [6875]				JOEL [6879]				TRIS [6860]				SL [5702]				Schools:				Fire:				WVSD:				Health Dept:				Hazardous				Material Clearance:				Comments:				Historic or Pre - 1941				Plan Check Fee:				Town's Valuation:				Building Approved:				Fire Sprinkler System				Ready To Issue:				Contacted Owner / Contractor on:				Application Processed By:			
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USE OF EXISTING BUILDING (Please mark)	Commercial Building/ Parking Structure	DATE																																																																																																	
Single-family Residence <input checked="" type="checkbox"/>	Multi-family/Apartments	Attached Garage or Detached Garage																																																																																																	
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CITY		ZIP																																																																																																	
CONTRACTOR		PHONE																																																																																																	
STATE LICENSE		CONTRACTOR'S EXPIRATION DATE																																																																																																	
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