Application for

Commercial Construction Permit

DEPARTMENT OF BUILDING AND SAFETY CITY OF POMONA

Job Add. 1057 E.	5
Zone Classification No.	C.Z
35-36- 37 LEGAL DESCRIPT	пои
Lot No. 34 Block No.	Tract 9242
OWNER Clorence	Stover
Address	
Builder or CONTRACTOR W J J P	tchea .
Address	Ontario
Plans by	
Title	
DESCRIPTION OF BU	JILDING
OCCUPANCY Drive-In	Restuarant
Type of CONSTRUCTION Concrete	Block
Dimensions 30 x44	No. Stories
Type of Roof Flat - Bull	Hup Carel
Heating	
Valuation of Work \$ 2 5000 Fee	\$ 44 00
Signature of WARITCHA	د ا
By Dent Goods	m,
Issued PERMIT NO. 27256 Date	6-15-54
Issued by	
1500 10/45/5	

Application for Miscellaneous Construction Permit

DEPARTMENT OF BUILDING AND SAFETY
CITY OF POMONA

Zone Classification I	No.	C-2
	LEGAL DESCRIPTION	ON
	DI1. NI -	Tract
Lot No.	Block No.	Iraci
	- 200	,
OWNER /	Donalds	•
Address		
Builder or CONTRACTOR	ine-O-	Lite C
		~//
Address	-	
Plans by		
DES	CRIPTION OF WORK T	O BE DONE
Insta	Il Ne	in Sign
on 2	Posts	
27 X1	2 -	
Borde	von B	ulding
30 TI	ansform	ers-75
Und 2	ab.	
Valuation of	24 "	1200
	800 - Fee	1 d
	O Lane.	ya-
Signature of Applicant		73.
Signature of Applicant Issued PERMIT NO.	37360 Da	077

Application for Electrical or Refrigeration Permit DEPARTMENT OF BUILDING AND SAFETY CITY OF POMONA JOB **ADDRESS** OWNER Building Zone CONTRACTOR TYPE OF OCCUPANCY Private Garage Comm. Res. LIGHTING POWER Meter Size__ Meter Service Conduit Size____ Conduit Size____ Wire Size____ Wire Size____ Switch Size__ Switch Size_ PANEL BOARD PANEL BOARD Breakers_____ Fuses_ Breakers_____ Fuses_ No. Motor Cir.__ No. Motor Cir. Range W. Heater_ **MOTORS** No. HP Ph Space Heater____ Miscel. WIRING INSTALLATION Conduit St. Tube No. Lts.___Sws. PERMIT FEES Fixs. No. Out No. Fix. Motors Range REFRIGERATION Miscel. REFRIG. New____Repair_ PERMIT. TOTAL FEE Signature of CONTRACTOR Issued PERMIT NO. REFRIG. Building Permit No .__

Application for Miscellaneous Construction Permit

DEPARTMENT OF BUILDING AND SAFETY

Job Add. / 05	7 E &	5- AV	
Zone Classification	No.		
LEGAL DESCRIPTION			
Lot No.	Block No.	Tract	
LOI INO.	BIOCK TAO:	Tidei	
ME	* / / / :	/ A	
OWNER //-	Donald .	5 Urive-1	
Address			
Builder or CONTRACTOR	isher Bro	S Port	
	Silver Oil		
Address			
Plans by			
DES	CRIPTION OF WORK TO	BE DONE	
Base Elnit	for Ret	rigention	
Refriger	ation Per	mit No	
	00	,00	
Valuation of Work	Fee \$	1	
Signature of Applicant	ester QJ	ishen	
		77.	

Application for Miscellaneous Construction Permit DEPARTMENT OF BUILDING AND SAFETY CITY OF POMONA Job Add. Zone Classification No. LEGAL DESCRIPTION Block No. Tract Lot No. Address Builder or CONTRACTOR **POMONA** Address Plans by DESCRIPTION OF WORK TO BE DONE Valuation of Work Fee \$ Signature of Applicant Issued PERMIT NO Date Issued by FORM 190-2M-2-53 PB

OF ARTMENT OF COMMUNITY DEVELOPMENT APPLICATION FOR BUILDING PERMIT



Building This is a Building Permit When Properly Com-Address Lot No. Tract Blk. pleted and Validated, and is not Transferable. It Mailing Tel. will expire if work is not started in 180 days, or if SAME No. 034 Applicant Address work is abandoned for more than 180 days. Mailing Tel. CALL FOR ALL INSPECTIONS Owner Address No. 74 All work must be inspected and approved before Tel. ame Contractor No. placing concrete, or concealing framing, electrical. plumbing or mechanical work. A final inspection Mailing City (License Tax No. end Certificate of Occupancy must be obtained Address City prior to occupancy and clamarice of connection Architect State License No. of utilities. or Eng. Address Type of Occ. FINAL INSPECTIO Use New Add Alter Repair Demolish Group Const. Zone 🚄 INSPECTOR Sq. Ft. No. of No. of No. Valuation 00 SIGNATURE Size Bedrooms Stories Units DESCRIPTION OF WORK SMIP 56-51190-8526 \$ 50 \$ CODE PL. CK. NO. 56-51190-8527 LICENSED CONTRACTORS DECLARATION CERTIFICATE OF EXEMPTION FROM PARK-REC \$ WORKER'S COMPENSATION INSURANCE TAX I HEREBY AFFIRM THAT I AM LICENSED under the provisions on Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code, and my license is in full (This section need not be completed if the permit is for one hundred dollars (\$100.00) or less.) PLAN CHECK I certify that in the performance of the work force and effect. for which this permit issued, I shall not employ 600 E PERMIT FEE \$ License Class and Number any person in any manner so as to become subject to the Workers' Compensation Laws of California. E PENALTY **I**Signature ISSUANCE NOTICE TO APPLICANT: If, after making this FEE OWNER-BUILDER DECLARATION Certificate of Exemption, you should become sub-ject to the Workers' Compensation provisions of I hereby affirm that I am exempt from the Contractors License Law for the following reason: (A) I, as the owner of the property, or my Employees with wages as their sole compensation, will do TOTAL the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed PERMIT NO. the work, and the structure is not intended or offered for sale. CONSTRUCTION LENDING AGENCY (B) I, as owner of the property, am contracting exclusively with licensed contractors to construct I HEREBY AFFIRM that there (is)-(is not) a construction loan existant to finance the work for which this permit is issued (Sec. 3097, Civ. C.). the project. I HEREBY AFFIRM THAT I AM EXEMPT from the Contractors License Law under Section Lender's Name 7044 B. & P. Code for this reason: (B) Lender's Address I certify that I have read this application and state that the above information is correct. I agree WORKER'S COMPENSATION DECLARATION to comply with all city and county ordinances and I hereby affirm that I have a certificate of constate laws relating to building construction, and hereby authorize representatives of this county to sent to self-insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec. 3800, Labor Code). upon the above-mentioned property for respection purposes. Policy No. _ Company . CHIERO PPP ON ZONING Date) Certified copy is hereby furnished.) Certified copy is filled with the Pomona ORDINANCE COMPL lease Conserve water City Clerk. Date

INSPECTION COPY



BUILDING AND SAFETY DIVISION

The City of POMONA BUILDING AND SAFETY DIVISIO	P.O. Box 660, 91769 505 South Garey Avenue Telephone (909) 620-2371 24 hour Inspection Pelephone (909) 620-2422
	Date: 11/02/2011 RMIT # B11-1002 sued by: NHARD
	#/VAULT#
Lot <u>L004</u> Blk. Tract <u>T</u> REPAIR Applicant <u>JOSE DIAZ/AUTHORIZED AGENT</u> Phone (909) -	- Ju
Mailing 1057 E. MISSION BL.	IPLANNING USE ONLY
Address POMONA CA 91766 Owner CHANG SI WANG AND YOUNG H Phone (909) -	Approved By:
Mailing 1057 E. MISSION BL.	11/2/8/
Address POMONA CA POMON-A	Date: 11/3/1/1
	CONTR
	BUS LIC#
Address	Type Const
	Occ Group
MailingAddress	Use Zone Code 24
Sq. Ft. Size 0 Stories 0 Units 0 Bedrooms 0 VALUATIO	
DESCRIPTION OF WORK	FEES
TEAR OFF EXISTING, RESHEATH WITH 1/2 IN. CDX, IF NECESSARY, APPLY HOT MOP/ ROLLED ROOFING/ BUILT-UP	DEV. TAX \$.00 SMIP 26 (R) \$.00
Length: Width: Area: 2000	SMIP 27 (C) \$ 1.74
	PLAN CHECK \$.00 PERMIT \$ 143.00
	TRAFFIC SIG \$.00
This is a BUILDING PERMIT when properly validated is not transferable. It will expire if work is not started or is	PARKS \$.00 ROAD/HWY \$.00
abandoned for more than 180 days. All work must be inspected	PUBLIC SAF. \$.00
and approved before placing concrete, or concealing framing, electrical, plumbing, or mechanical work. A final inspection	OTHER \$.00 BL JOB FEE \$ 42.90
and Certificate of Occupancy must be obtained prior to	PENALTY \$.00
occupancy. PLANS APPROVED BY: Wall/fence shall not prevent access to any utility structure,	ISSUANCE \$ 25.00 MPGS \$ 3.33
meter or other facility. Interfering utility may be relocated	ANALYSIS \$ 1.33
or fence/wall modified to avoid utility. CONTACT UTILITY. PROJECT COMMENTS:	SB 1473 \$ 1.00 TOTAL \$ 218.30
** U.B.C SECC 310.9.1 SMOKE DETECTORS REQUIRED ON ALL	