

BUILDING PERMIT APPLICATION

OWNER-BUILDER DECLARATION

I hereby affirm under penalty of perjury that I am exempt from the Contractors 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 or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Sec. 7000) of Div. 3 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation 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 Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his or her 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 or she 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 Contractors 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) license pursuant to the Contractors License Law).

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

Date _____ Signature of Owner _____

LICENSED CONTRACTORS DECLARATION

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License Class _____ License Number _____ Expiration Date _____

Date _____ Signature of Contractor _____

WORKERS' COMPENSATION DECLARATION

I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of coverage to self-insure for workers' compensation, as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued.

I have and will maintain workers' compensation insurance, as required by Sec. 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier _____

Policy No. _____

(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, and agree that if I should become subject to the workers' compensation provisions of Sec. 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date _____ Signature of Applicant _____

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

CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury 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 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.

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CITY OF LAKE FOREST

25550 Commercentre Drive #100, Lake Forest, CA 92630
 Counter Hours: M-Th, 8am to 11:45am & 1pm to 5pm
 And alternate Fridays, 8am to 11:45am & 1pm to 5pm

Inspection Request Line: (888) 890-6298

SITE ADDRESS
255 & 257 Siena

ASSESSOR PARCEL NUMBER
TR18189 Lot 4 Oreste

BOOK PAGE PARCEL
Units 21 & 22, Phase 9 duplex

PROPERTY OWNER
[REDACTED]

MAPPING ADDRESS
[REDACTED]

CITY STATE ZIP
[REDACTED]

PHONE NUMBER EMAIL
[REDACTED]

CONTACTS OR ENGINEER'S NAME LICENSE NO.
[REDACTED]

ADDRESS
[REDACTED]

CITY STATE ZIP
[REDACTED]

PHONE NUMBER EMAIL
[REDACTED]

APPLICANT / CONTACT PERSON
[REDACTED]

PHONE NUMBER EMAIL
[REDACTED]

CONTRACTOR'S NAME
[REDACTED]

ADDRESS
[REDACTED]

CITY STATE ZIP
[REDACTED]

PHONE NUMBER EMAIL
[REDACTED]

EXPIRATION
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DESCRIPTION OF WORK:
Duplex Townhomes. Plan 1CR & 2CR

3887 Livable, 900 Garage, 25 Covered Entry
114 Covered Parking, 21 Utility Closet

ODD. GROUP R3-U	TYPE(S) OF CONSTRUCTION V-B	NO. OF UNITS 2
SQUARE FOOTAGE	FIRE SPRINKLERS REQUIRED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
STATISTICAL CLASSIFICATION NO.	UNIT(S) 1	CODE IN EFFECT CBC2016
SPECIAL CONDITIONS / PLANNING FILE NO.		
INITIAL VALUATION	REVISED VALUATION	
PLAN CHECK FEE		
ADDITIONAL PLAN CHECK FEE		
PLAN CHECK NO.	INITIALS	DATE
ADDITIONAL PLAN CHECK NO.	INITIALS	DATE
<input type="checkbox"/> YES <input type="checkbox"/> NO	IS THIS PROJECT IN A SPECIAL FLOOD HAZARD AREA?	
BUILDING PERMIT FEE	\$ _____	
ISSUANCE FEE	\$ _____	
SMIP FEE	\$ _____	
IMAGING FEE	\$ _____	
TOTAL BUILDING PERMIT FEE	\$ _____	
PERMIT NO. 45754	INITIALS	DATE
FINALED BY	CHK NO.	DATE

PLUMBING PERMIT APPLICATION

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SITE ADDRESS
 Serrano Summit Lake Forest 92630
ASSESSOR PARCEL NUMBER
 BOOK _____ PAGE _____ PARCEL _____
ADDITIONAL INFORMATION / LEGAL DESCRIPTION
 TTM 18189 "oreste"
PROPERTY OWNER

MAILING ADDRESS

CITY _____ **STATE** _____ **ZIP** _____
PHONE NUMBER _____ **EMAIL** _____
ARCHITECT'S OR ENGINEER'S NAME _____ **LICENSE NO.** _____
ADDRESS

CITY _____ **STATE** _____ **ZIP** _____
PHONE NUMBER _____ **EMAIL** _____
APPLICANT / CONTACT PERSON

PHONE NUMBER _____ **EMAIL** _____
CONTRACTOR'S NAME

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APPLICANT TO FILL IN QUANTITY (PLEASE PRINT OR TYPE)		
QTY.	DESCRIPTION	FEES
	Backflow Prevention Device	
2	Bath Tub	
1	Clothes Washer	
1	Dishwasher	
	Floor Sink	
	Gas Regulator	
	Gas System Outlets	
	Additional Gas Outlets over 5 per system	
2	Hose Bibbs	
	Lavatory	
	Roof Drain	
5	Sinks	
2	Showers	
	Sprinkler System (per meter)	
1	Sprinkler Piping System (future use)	
	Sprinkler Piping (additional / alteration / repair)	
	Standpipes (wet / dry / combination)	
	Temporary Gas Service/Work	
3	Toilets	
	Trap Primers	
	Urinals	
1	Water Heaters	
	Yard Water Distribution System	
	PLUMBING PERMIT SUBTOTAL	\$ _____
	PLUMBING PLAN CHECK FEE	\$ _____
PLAN CHECK NO.	INITIALS	DATE
	CK NO.	
	PLUMBING PERMIT FEE	\$ _____
	ISSUANCE FEE	\$ _____
	TOTAL PLUMBING PERMIT FEE	\$ _____
PERMIT NO.	INITIALS	DATE
	CK NO.	
FINALED BY		DATE

ELECTRICAL PERMIT APPLICATION

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ADDITIONAL INFORMATION / LEGAL DESCRIPTION
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PROPERTY OWNER

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PHONE NUMBER EMAIL

APPLICANT / CONTACT PERSON

PHONE NUMBER EMAIL

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APPLICANT TO FILL IN QUANTITY (PLEASE PRINT OR TYPE)

	EACH	QTY.	FEE
OUTLETS			
Rec: 29 Light 32 Sw. 27			
Total: (additional over 20)			
LIGHTING FIXTURES			
Total: 3 (additional over 20)			
FIXED APPLIANCE (NOT OVER 1 HP)			
<input type="checkbox"/> Water Heater <input type="checkbox"/> Dishwasher <input type="checkbox"/> Clotheswasher <input type="checkbox"/> Disposal <input type="checkbox"/> Heater <input type="checkbox"/> Fan <input type="checkbox"/> Other			
<input type="checkbox"/> FAU <input type="checkbox"/> A/C <input type="checkbox"/> Oven <input type="checkbox"/> Hood <input type="checkbox"/> Range <input type="checkbox"/> Dryer			
POWER APPARATUS (IN HP, KW, or KVA)			
<input type="checkbox"/> Up to and including 1 <input type="checkbox"/> From 1 up to and including 10 <input type="checkbox"/> From 10 up to and including 50 <input type="checkbox"/> From 50 up to and including 100 <input type="checkbox"/> Over 100			
SERVICES, SWITCH BOARDS & SUB.			
<input type="checkbox"/> 0 - 399 AMPS < 600 volts <input type="checkbox"/> 400 - 1000 AMPS < 600 volts <input type="checkbox"/> Over 1000 AMPS < 600 volts <input type="checkbox"/> Over 600 volt rating (all amperages) <input type="checkbox"/> Service Meter <input type="checkbox"/> Electrical Subpanel <input type="checkbox"/> Switchboard Change or Additions <input type="checkbox"/> Temp. Power Pole			
SIGNS			
<input type="checkbox"/> Sign with 1 Transformer <input type="checkbox"/> Addtl. Sign & 1 Transformer <input type="checkbox"/> Addtl. Transformer / Flasher / Timer <input type="checkbox"/> Altering / Changing Letter on Sign			
TIME CLOCKS			
RELOCATED BUILDING ELECTRICAL			
BUSWAYS (each 100 ft or fraction thereof)			
ELECTRICAL PERMIT SUBTOTAL		\$	_____
PLAN CHECK FEE		\$	_____
PLAN CHECK NO.	INITIALS	DATE	
	CK NO.		
ELECTRICAL PERMIT FEE		\$	_____
ISSUANCE FEE		\$	_____
TOTAL ELECTRICAL PERMIT FEE		\$	_____
PERMIT NO.	INITIALS	DATE	
FINALED BY	CK NO.	DATE	

MECHANICAL PERMIT APPLICATION

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BOOK PAGE PARCEL
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QTY	DESCRIPTION	FEES
	AIR HANDLING UNIT < or = 5,000 CFM	
	AIR HANDLING UNIT > 5,000 CFM	
1	AIR CONDITIONING OR HEAT PUMPS Up TO 5 Tons/HP Over 5 Tons/HP	
	AIR INLETS AND OUTLETS	
1	APPLIANCE VENT(S)	
	EVAPORATIVE COOLER	
	COOLING / REHEATING COIL / ELECT. STRIP	
	FURNANCE (floor / floor mounted / recessed)	
1	FURNACE WITH DUCTS & VENTS Up to 100,000 BTU More than 100,00 BTU	
1	HOOD WITH ATTACHED FANS/DUCTS	
	INCINERATOR	
	MANUFACTURED FIREPLACES(S)	
	REPAIR / ALTERATION / ADDITION (to boiler, compressor, or absorption system) Up to 5HP or 100,000 BTU More than 5HP or 100,000 BTU	
	REPAIR / ALTERATION / ADDITION TO HEATING / COOLING SYSTEMS INCLUDING CONTROLS OR REGISTERS	
1	VENTILATING FAN(S)	
	VENTILATING SYSTEM(S)	
	MECHANICAL PERMIT SUBTOTAL	\$ _____
	PLAN CHECK FEE	\$ _____
PLAN CHECK NO.	INITIALS	DATE
	CK NO.	
	MECHANICAL PERMIT FEE	\$ _____
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PERMIT NO.	INITIALS	DATE
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FINALED BY		DATE

Schedule of Properties SFD



ORESTE AT SERRANO SUMMIT PHASE 9

Date Printed: 03/11/20

Community: **ORESTE AT SERRANO SUMMIT**
 Phase: **9** Tract: 18189
 BRE Phase: Acctg Job #: 11522
 Zip Code: 92630 Date:
 Prepared by: Revised:

REVISIONS

3/11/20	Plan 3 SF changed from 2167 to 2171

SPECIAL NOTES

REFER TO START SCHEDULE FOR TRENCH DATES
 All homes protected by NFPA 13D fire sprinkler system.
 R designation = Garage Right (detached only)
 A = Spanish
 B = Craftsman
 C = Ranch

APPROVALS

Project Manager: DocuSigned by: Date: 3/11/2020

Director of Purchasing: DocuSigned by: Date: 3/11/2020

Home Site #	Plan & Elev.	R	Square Footage	Address	Color Scheme	Struct. Obsv	Back Flow	Drop Garage	Garage	Porch/Entry	Deck	Enhanced	Phase	
21	2C	R	2010	255 Siena	1	No	No	No	423	13			9	
22	1C	R	1877	257 Siena	1	No	No	No	477	12			9	
23	3C	R	2171	259 Siena	2	No	No	No	448	185	179		9	
24	4C	R	2426	261 Siena	2	No	No	No	448	41	103		9	
TOTAL NUMBER OF HOMES				4	SQUARE FOOTAGE			8,484						

45754
45755