



**CITY OF GARDEN GROVE  
BUILDING SERVICES**

**8412 ACACIA AVE  
PERMIT#:19-1146  
ISSUED:4/15/19**

General Info : 714-741-5307  
Inspection Requests : 855-380-8758

<b>Owner</b> FRANCIS SAVENGRITH			Telephone 714-675-2162		Zip	<b>Building Address</b> 8412 ACACIA AVE																											
Address			City		State	<b>Suite/Unit/Building</b> SFD																											
<b>Applicant</b> ALPS AIR CONDITIONING & HEATING INC			Telephone (714) 633-8892		Zip 92805	<b>TYPE</b> Mechanical Permit		<b>ISSUED BY</b> Vinh Vu																									
Address 1000 E HOWELL AVE STE B SUITE J			City ANAHEIM		State CA	Inspector Dist. J12	Parcel Number 13154113	LOT	TRACT																								
<b>Contractor</b> ALPS AIR CONDITIONING & HEATING INC			Telephone (714) 633-8892		Zip 92805	<b>Valuation</b> \$0.00																											
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State Licence 667953	Expires 4/30/19	City Licence	Expires																														
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Floor Area(sq. ft.)			Residential/Commercial		Residential																												
Job Description INSTALL (N) 3TON AC UNIT ON SIDE OF PROPERTY; AC/AIR HANDLER HOOKUP (220V)																																	
<b>DECLARATION</b>																																	
I certify that I have read this application/permit and state that the information on all pages of this document 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 and County to enter upon the above mentioned property for inspection purposes.																																	
X Applicant's Signature			Print Name <u>Angelica Martinez</u>		Date <u>4/15/19</u>																												

*This is a building permit when properly filled out, signed and validated, and is subject to expiration if work thereunder is suspended for 180 days.*



COMMUNITY AND ECONOMIC DEVELOPMENT DEPARTMENT  
 11222 ACACIA PARKWAY, GARDEN GROVE, CA 92840  
 BUILDING & SAFETY DIVISION (714) 741-5307  
 PLANNING DIVISION (714) 741-5312  
 www.ggcity.org

**PRE-SUBMITTAL REVIEW**

ENTITLEMENT NO. N/A  
 FLOOD AREA?  YES  NO  
 SUBSTANTIAL IMPROVEMENT?  YES  NO  
 OK TO SUBMIT: PGK 4/15/19

PLAN CHECK OR PERMIT # 19-1146

Job Address: 8412 ACACIA AVE  Residential  Commercial  
 Property Owner: FRANCIS SAVERGRITH Phone No. (714) 675-2162  
 Contractor: ALPS Phone No. ( )  
 State License: 78167953 Class: 20 Business Tax # \_\_\_\_\_  
 Applicant: Angelica MARTINEZ Phone No. (818) 7357876  
 Address: 31225 LA BAYA DR WESTLAKE 91362 Email: \_\_\_\_\_

- Building  Electrical  Mechanical  Plumbing  Fire  Solar  Demo

Job Description: NEW 3 TON A/C & COIL  
AC/AIR HANDLER HOOKUP (220V)  
left side yard  
 Valuation: \$ 91228

No. of Stories: \_\_\_\_\_ Construction Type: \_\_\_\_\_ Occupancy Group: \_\_\_\_\_ Occupant Load: \_\_\_\_\_ No. of Units: \_\_\_\_\_

**INTERIOR**

Please add square feet of the following items that apply to your project:

New Construction: \_\_\_\_\_ Addition: \_\_\_\_\_ Remodel: \_\_\_\_\_ Deck: \_\_\_\_\_  
 Balcony: \_\_\_\_\_ Covered Patio: \_\_\_\_\_ Enclosed Patio: \_\_\_\_\_ Trellis/ Gazebo: \_\_\_\_\_

**GARAGE**

- Attached  Detached  1-Car  2-Car  3-Car  4-Car

New Garage sq. ft.: \_\_\_\_\_ Remodel Garage Sq. Ft.: \_\_\_\_\_ Carport Sq. Ft.: \_\_\_\_\_

**EXTERIOR**

- Block Wall  Retaining Wall  Fence Height: \_\_\_\_\_ Linear Ft: \_\_\_\_\_

**SOLAR**

Number of Solar Panels: \_\_\_\_\_ Solar KW: \_\_\_\_\_

**RE-ROOF**

Roof Pitch: \_\_\_\_\_ Squares: \_\_\_\_\_ (1 square = 100 Sq. ft.)

Select the structures to be part of this work:

- Main Structure  Garage  Patio  Accessory Structure

Tearing off existing layers?

- 1 Layer  2 Layers  3 Layers  No layers removed

New Roof Sheathing?

- Partial, Repaired areas  1/2" OSB  5/8" OSB  1/2" CDX  5/8" CDX  
 Fiberglass Base Sheet  Tongue and Groove

What Underlayment is being installed?

- 2 Layers of #15 felt  #30 felt  #40 felt  TG-2  None

Are there solar panels installed on the roof?  Yes  No

THIS APPLICATION WILL EXPIRE IN 180 DAYS FROM THE DATE RECEIVED UNLESS A BUILDING PERMIT HAS BEEN ISSUED. NON- REFUNDABLE PLAN CHECK FEES ARE DUE UPON SUBMITTAL. CONTRACTORS ARE REQUIRED TO OBTAIN A CITY OF GARDEN GROVE BUSINESS TAX.

SIGNATURE: [Signature] DATE: 4/15/19

OWNER / BUILDER DECLARATION

Section 7031.5 of the California Business and Professions code provides as follows:

"Each county or city which requires the issuance of a permit as a condition precedent to the construction, alteration, improvement, demolition or repair of any building or structure shall also require that each applicant for such a permit file as a condition precedent to the issuance of a permit a statement which he has prepared and signed stating that the applicant is licensed under provisions of this chapter, giving the number of his license and stating that is in full force and effect, or, if the applicant is exempt from the provisions of this chapter, the basis of the alleged exemption. Any violation of this section by any applicant for a permit shall be subject to a civil penalty of not more than five hundred dollars (\$500.00)."

- 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 and Professions Code: The contractor's license law does not apply to owner of property who builds or improves thereon, and who does such work himself or through his employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvements is sold within one year of completion, the owner/builder will have the burden of proving that they 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. (Section 7044 of the Business and Professions Code: The contractor's license law does not apply to 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.)

Signature \_\_\_\_\_ Date \_\_\_\_\_

LICENSED CONTRACTOR'S DECLARATION

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

License Class 20 State Lic. No. 667953 Business Tax No. \_\_\_\_\_ Contractor Name Alps A/c & Heating  
 Contractor/Agent Angelica Martinez Phone No. 626 214 7902 Address 1000 E Howell Ave  
Anaheim 92805

WORKER'S COMPENSATION DECLARATION

Warning: Failure to secure worker's 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 in section 3706 of the labor code, interest, and attorney fees.

I hereby declare that I have a certificate of consent to self-insure, or a certificate of Worker's Compensation Insurance, or a certified copy thereof (Labor Code Section 3800).

Policy No. FLA00731700 Carrier FALLS LAKE Expiration Date 10/19/19

CERTIFICATION OF EXEMPTION FROM WORKER'S COMPENSATION INSURANCE

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 \_\_\_\_\_ Date \_\_\_\_\_

RIGHT OF ENTRY (READ CONDITIONS BELOW)

The work authorized by this permit is subject to all rules and regulations set forth in the ordinances and amendments of the City of Garden Grove, and the laws of the State of California in regard to such work, and all amendments thereto.

This permit becomes null and void if work is not commenced within one hundred eighty (180) days from date of issuance, or if work is suspended at any time during construction for the same period of time, or if any work is done in violation of the City or State laws governing same.

I acknowledge that a fee may be charged for re-inspection due to negligence, incomplete work, or failure to make corrections.

I certify that I am the property owner or authorized to act on the property owner's behalf. I certify that I have read this application and state that the above information is correct. I agree to comply with all City and applicable County ordinances, and State laws relating to building construction, and hereby authorize representatives of the City to enter upon the above mentioned property for the purpose of inspections.

Due to the possible presence of lead-based paint, lead safe work practices are required for all repairs in pre-1979 buildings that disturb paint. Failure to do so could create lead hazards that violate California Health and Safety Code Sections 17920.10 and 105256 and may be subject to a \$1000 fine or criminal prosecution. For more information call 1-800-LA-4-LEAD

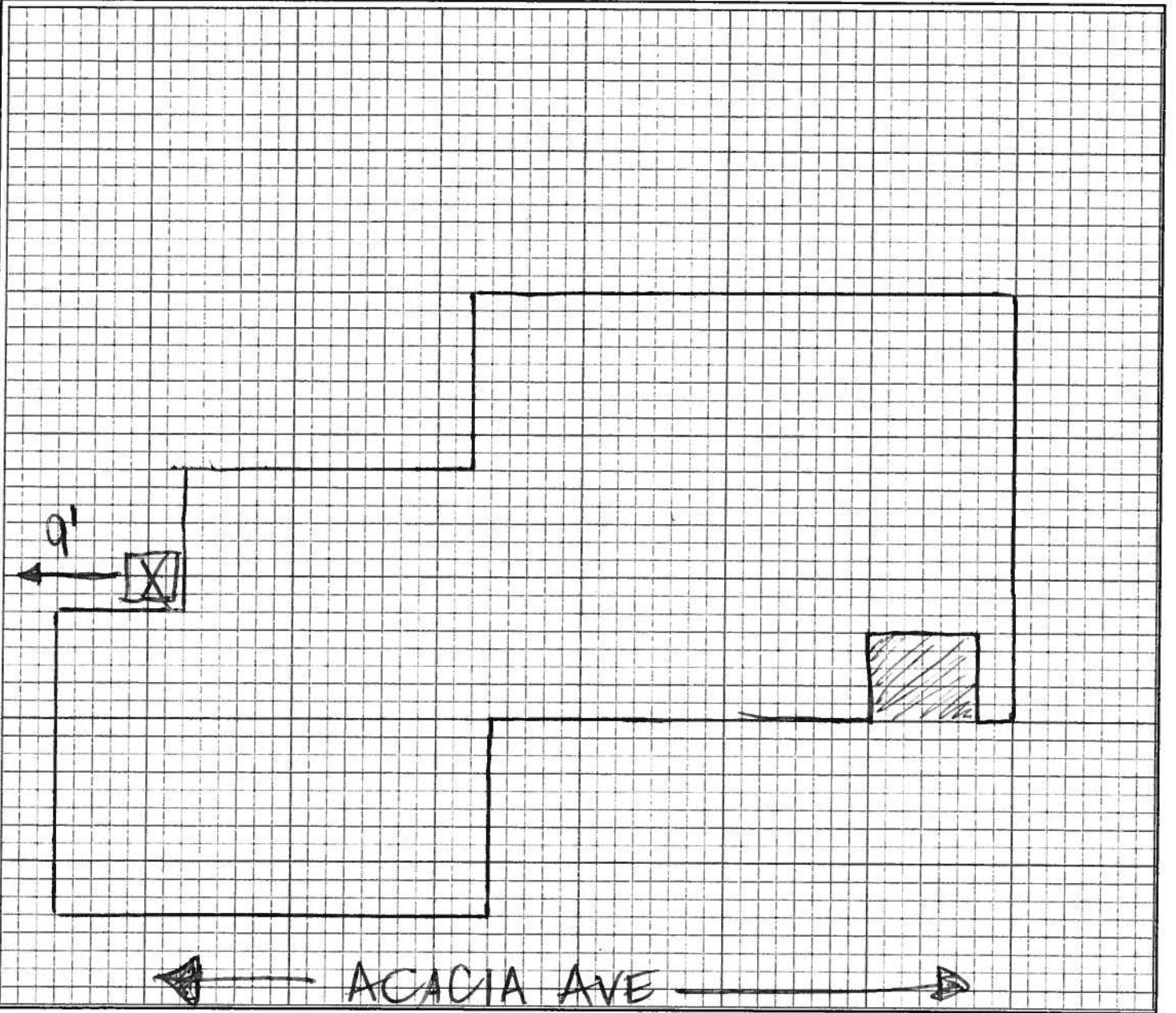
Signature [Signature] Date 4/15/19

**Plot Plan Form**

Planning Action:	Zone: <b>R-1</b>	Coverage:
Approved By: <b>FJK</b>	Date: <b>4/15/19</b>	Increase:
Remarks:		

Job Address: <b>0412 ACACIA STAVE</b>	Permit No.: <b>19-1146</b>
Assessor Parcel No.:	Tract & Lot #:
Occupancy:	Const. Type: <b>Value: \$9,228</b>
<input type="checkbox"/> New <input checked="" type="checkbox"/> Alter <input type="checkbox"/> Add <input type="checkbox"/> Repair <input type="checkbox"/> Demo	

**Job Description:** **NEW 3 TON A/C - Left side yard**  
**CDIL**  
**AIR HANDLER HOOKUP (220V)**



I certify the information hereon is complete & correct.

**FRANCES SAVENGRITH**  
 Owner's Name (print)

*[Signature]*  
 Signature (owner/agent)

**4/15/19**  
 Date

White: Inspection

Yellow: Assessor

Pink: Permittee

**CERTIFICATE OF COMPLIANCE**

CF1R-ALT-02-E

**Alterations to Space Conditioning Systems (formerly CF-1R-ALT-HVAC)**

(Page 1 of 3)

Project Name:

Savengrith

Date Prepared:

2019-04-13

**A. General Information**

CF1R-ALT-02 is applicable to multiple space conditioning systems contained within a single dwelling unit. When multiple dwelling units must be documented, use one CF1R-ALT-02 document for each dwelling unit.

01	Project Name	Savengrith	02	Date Prepared	2019-04-13
03	Project Location	8412 Acacia	04	Building Type	Single family
05	CA City	Garden Grove	06	Dwelling Unit Name	Savengrith
07	Zip Code	92841	08	Dwelling Unit Conditioned Floor Area (ft <sup>2</sup> )	1058
09	Climate Zone	8	10	Number of Space Conditioning (SC) Systems in this Dwelling Unit:	1

**B. Space Conditioning (SC) System Information**

01	02	03	04	05	06	07	08	09	10
SC System Identification or Name	SC System Location or Area Served	CFA served by this SC System (ft <sup>2</sup> )	Is the SC system a ducted system?	Installing a refrigerant containing component?	Installing new SC system components?	Installing more than 40 feet of ducts?	Installing entirely new duct system?	Installing entirely new SC system?	Alteration Type
System 1	Location 1	1058	Yes	Yes	Yes	No	No	No	Altered space conditioning system

**C. Extension of Existing Duct System, Greater Than 40 Feet (Section150.2(b)1Diiib)**

This section does not apply to this project.

Registration Number: 219-A020085787A-000-000-0000000-0000

Registration Date/Time: 2019-04-13 14:55:18

HERS Provider: CalCERTS

CA Building Energy Efficiency Standards - 2016 Residential Compliance

Report Version: 2018.0.001

Report Generated: 2019-04-13 14:55:12

Schema Version: rev 20190426

**Documentation Author's Declaration Statement**

**1. I certify that this Certificate of Compliance documentation is accurate and complete.**

Documentation Author Name: Bailey, Kathy

Documentation Author Signature: *Kathy Bailey*

Company: ALPS AIR CONDITIONING & HEATING INC

Signature Date: 2019-04-13 14:55:18

Address: 1000 E Howell

CEA/HERS Certification Identification (if applicable):

City/State/Zip: ANAHEIM CA 92805

Phone: 714-633-8892

**Responsible Person's Declaration statement**

I certify the following under penalty of perjury, under the laws of the State of California:

1. The information provided on this Certificate of Compliance is true and correct.
2. I am eligible under Division 3 of the Business and Professions Code to accept responsibility for the building design or system design identified on this Certificate of Compliance (responsible designer).
3. That the energy features and performance specifications, materials, components, and manufactured devices for the building design or system design identified on this Certificate of Compliance conform to the requirements of Title 24, Part 1 and Part 6 of the California Code of Regulations.
4. The building design features or system design features identified on this Certificate of Compliance are consistent with the information provided on other applicable compliance documents, worksheets, calculations, plans and specifications submitted to the enforcement agency for approval with this building permit application.
5. I will ensure that a registered copy of this Certificate of Compliance shall be made available with the building permit(s) issued for the building, and made available to the enforcement agency for all applicable inspections. I understand that a registered copy of this Certificate of Compliance is required to be included with the documentation the builder provides to the building owner at occupancy.

Responsible Designer Name: Bailey, Kathy

Responsible Designer Signature: *Kathy Bailey*

Company: ALPS AIR CONDITIONING & HEATING INC

Date Signed: 2019-04-13 14:55:18

Address: 1000 E Howell

License: 667953

City/State/Zip: ANAHEIM CA 92805

Phone: 714-633-8892

*Digitally signed by CalCERTS. This digital signature is provided in order to secure the content of this registered document, and in no way implies Registration Provider responsibility for the accuracy of the information.*

