



CITY OF GARDEN GROVE BUILDING SERVICES

General Info : 714-741-5307

Inspection Requests : 855-380-8758

8412 ACACIA AVE

PERMIT#:19-1146

ISSUED:4/15/19

Owner FRANCIS SAVENGRITH		Telephone 714-675-2162	Zip	Building Address 8412 ACACIA AVE	
Address		City	State	Suite/Unit/Building SFD	
Applicant ALPS AIR CONDITIONING & HEATING INC		Telephone (714) 633-8892	Zip 92805	TYPE Mechanical Permit	
Address 1000 E HOWELL AVE STE B SUITE J		City ANAHEIM	State CA	ISSUED BY Vinh Vu	
State Licence 667953		Expires 4/30/19	City Licence	Expires	
Contractor ALPS AIR CONDITIONING & HEATING INC		Telephone (714) 633-8892	Zip 92805	Inspector Dist. J12	
Address 1000 E HOWELL AVE STE B SUITE J		City ANAHEIM	State CA	Parcel Number 13154113	LOT
State Licence 667953		Expires 4/30/19	City Licence	Expires	TRACT
Floor Area(sq. ft.)		Residential/Commercial Residential			
Job Description INSTALL (N) 3TON AC UNIT ON SIDE OF PROPERTY; AC/AIR HANDLER HOOKUP (220V)					
<div style="text-align: center;">DECLARATION</div> <p>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.</p>					
<div style="display: flex; justify-content: space-between;"> <div> X Applicant's Signature Print Name <u>Angelica Martinez</u> </div> <div> Date <u>4/15/19</u> </div> </div>					

Valuation		
		\$0.00
F E E S	Description	Quantity
	Building Permit Document Retention Fee	1
	Building Technology Fee	1
	Air handling unit, up to 2, CFM	1
	Air Conditioning, condensing unit, to 5 tons	1
	Inspection	
	Issuance Fee	1
	TOTAL	
		\$220.00

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.

Permit Type: MECH

ORIGINAL



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 # 19-1116

Job Address: 8412 ACACIA AVE
Property Owner: FRANCIS SAENGGRITH
Contractor: ALPS
State License: 978667953 Class: 20 Business Tax # _____
Applicant: Angelica MARTINEZ
Address: 31225 LA BAYA DR WESTLAKE 91362
Phone No. (714) 675-2162
Phone No. () _____
Phone No. (818) 7357876
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: _____ DATE: 4/15/19

12/12/18

PERMIT NO.: 19-1146

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

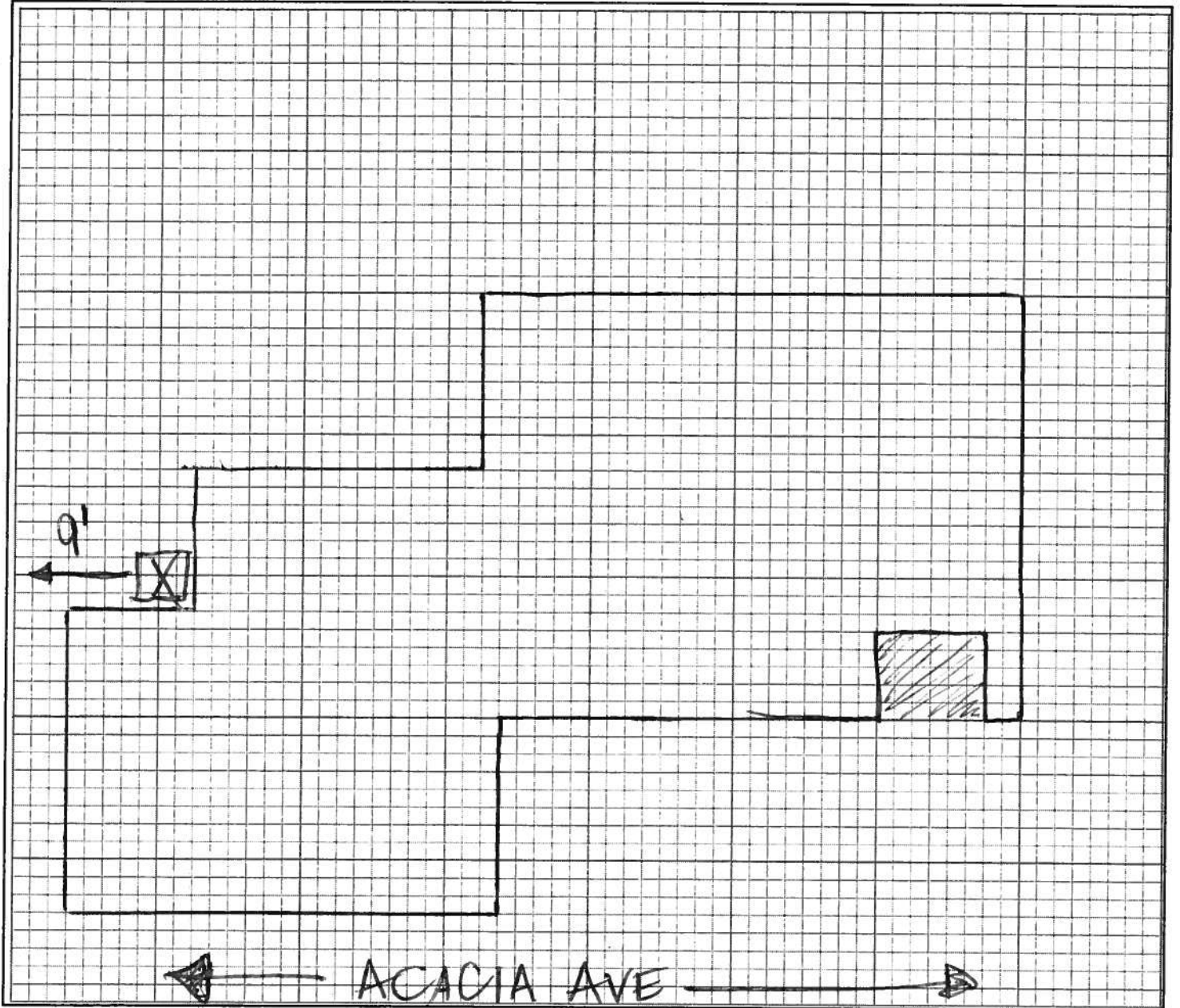
Signature [Signature] Date 4/15/19

CITY OF GARDEN GROVE - COMMUNITY DEVELOPMENT DEPARTMENT

Plot Plan Form

Planning Action:	Zone: <u>R-1</u>	Coverage:	Job Address: <u>0412 ACACIA STAVE</u>	Permit No.: <u>19-1146</u>
Approved By: <u>PJK</u>	Date: <u>4/15/19</u>	Increase:	Assessor Parcel No.:	Tract & Lot #:
Remarks:			Occupancy:	Const. Type: <u>\$9,228</u>
			____ New <input checked="" type="checkbox"/> Alter ____ Add ____ Repair ____ 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 ²)	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 ²)	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)1DiIb)	
This section does not apply to this project.	

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: <i>Kathy Bailey</i>
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:

- The information provided on this Certificate of Compliance is true and correct.
- 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).
- 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.
- 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.
- 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: <i>Kathy Bailey</i>
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.

