

11209-2-2  
 OCT 8 1952

**FOR APPLICANT TO FILL IN**

BUILDING ADDRESS 10209-6-8 Prairie Ave.

LOCALITY Lennox

NEAREST CROSS ST. 102nd

OWNER Mrs. Lottie T. Blake

MAIL ADDRESS 4015 W. 102nd

CITY Lennox TEL. NO. OR 7-3443

ARCHITECT OR ENGINEER TEL. NO.

ADDRESS

CONTRACTOR Max Porter TEL. NO. OR 1-4843

ADDRESS 4655 Century, Inglewood

LEGAL DESCRIPTION S. 3816' at. of Lot No. 25 of Block

TRACT Lockhaven

SIZE OF LOT 58.6 x 87 NO. OF BLDGS. NOW ON LOT none

USE OF EXISTING BLDG. NO. OF FAMILIES NO. OF ROOMS

**DESCRIPTION OF WORK**

NEW	<input checked="" type="checkbox"/>	ALTERATION	<input type="checkbox"/>	ADDITION	<input type="checkbox"/>
REPAIR	<input type="checkbox"/>	MOVING	<input type="checkbox"/>	DEMOLISH	<input type="checkbox"/>

SQ. FT. SIZE 1560 NO. OF ROOMS 12 STORIES One

WALL COVERING Stucco ROOF COVERING Comp.

USE OF NEW BUILDING 3 unit apartment

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION.

SIGNATURE OF PERMITTEE [Signature]

AUTHORIZED AGT.

76A63BA-3 7-49 \$

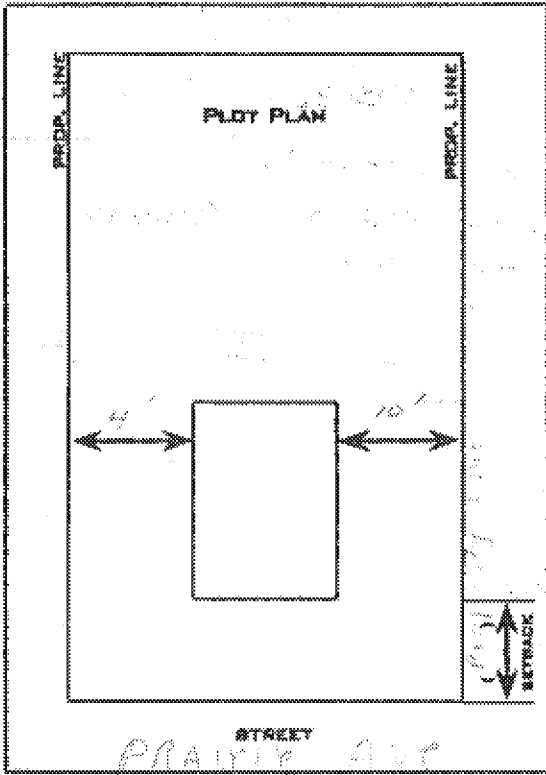
VALUATION 12980<sup>00</sup>

P. C. \$ FEE 20<sup>25</sup>

FEE 40<sup>50</sup>

**FOR OFFICE USE ONLY**

DISTRICT NO.	PLAN CK. NO.	PERMIT NO.
<u>7</u>	<u>59365</u>	<u>03226</u>
RECEIVED BY	DATE OF APPL.	DATE ISSUED
<u>NELSON</u>	<u>10-6-52</u>	<u>10-20-52</u>
BUILDING ADDRESS	<u>10209-6-8 S. PRAIRIE</u>	
LOCALITY	<u>LENNOX</u>	
NEAREST CROSS ST.	<u>102</u>	
FIRE ZONE	NO. OF PLANS	TYPE
<u>-</u>	<u>2</u>	<u>V</u>
		GROUP
		<u>H</u>
BLOG.	ORD. NO.	
SETBACK LINE <u>0</u>		
APPROVED BY	DATE	
USE ZONE <u>R-3</u>	APPROVED BY	DATE
<b>CORRECTIONS</b>		
<u>9196</u>		
<u>1-27-53</u>		
<u>1-9 36" in below floor</u>		
<u>for structural compartment</u>		
<u>gather</u>		
ORIGINAL		
<b>APPROVALS</b>		
FOUNDATION: LOCATION FORMS, MATERIALS	INSPECTOR	DATE
	<u>[Signature]</u>	<u>10-20-52</u>
FRAME: FIRE STOPS, BRACING, BOLTS	<u>[Signature]</u>	<u>10-20-52</u>
LATH, INT.	<u>[Signature]</u>	<u>10-20-52</u>
LATH, EXT.	<u>[Signature]</u>	<u>10-20-52</u>
PLASTER, INT.	<u>[Signature]</u>	<u>1-27-53</u>
PLASTER, EXT.	<u>[Signature]</u>	<u>2-2-53</u>
FINAL	<u>[Signature]</u>	<u>2-2-53</u>



Map Number.....

No. Assigned by.....

Field Check by.....

Date.....

**FOR APPLICANT TO FILL IN**

BUILDING ADDRESS 10204 Prairie Ave.

LOCALITY Lennox

NEAREST CROSS ST. 102nd

OWNER Mrs. Lottie T. Blake

MAIL ADDRESS 4015 W. 102nd

CITY Lennox TEL. NO. OR 7-3443

ARCHITECT OR ENGINEER TEL. NO.

ADDRESS

CONTRACTOR Max Porter TEL. NO. OR 1-4843

ADDRESS 4655 Century, Inglewood

LEGAL DESCRIPTION 3.28' 0" of N. LOT NO. 1021 OF Lot 25 BLOCK

TRACT Lockhaven

SIZE OF LOT 58.6 x 87 NO. OF BLDGS. NOW ON LOT none

USE OF EXISTING BLDG. NO. OF FAMILIES NO. OF ROOMS

**DESCRIPTION OF WORK**

NEW	<input checked="" type="checkbox"/>	ALTERATION	<input type="checkbox"/>	ADDITION	<input type="checkbox"/>
REPAIR	<input type="checkbox"/>	MOVING	<input type="checkbox"/>	DEMOLISH	<input type="checkbox"/>

SQ. FT. SIZE 408 NO. OF ROOMS two STORIES

WALL COVERING Stucco ROOF COVERING Comp.

USE OF NEW BUILDING Double garage

I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING BUILDING CONSTRUCTION.

SIGNATURE OF PERMITTEE [Signature]

AUTHORIZED AGT.

76A638A-3 7-49 \$ 1020<sup>00</sup> VALUATION

P. O. S FEE 6<sup>30</sup>

**FOR OFFICE USE ONLY**

DISTRICT NO. <u>7</u>	PLAN CK. NO.	PERMIT NO. <u>03227</u>
RECEIVED BY <u>NELSON</u>	DATE OF APPL.	DATE ISSUED <u>10-20-52</u>
BUILDING ADDRESS <u>10204 S. PRAIRIE</u>	LOCALITY <u>LENNOX</u>	
NEAREST CROSS ST. <u>102</u>	FIRE ZONE <u>—</u>	NO. OF PLANS <u>2</u>
	TYPE <u>II</u>	GROUP <u>J</u>
BLDG. SETBACK LINE <u>— 0 —</u>	ORD. NO.	
APPROVED BY	DATE	
USE ZONE <u>C-3</u>	APPROVED BY	DATE
<u>4196</u>	<b>CORRECTIONS</b>	

ORIGINAL

**APPROVALS**

FOUNDATION: LOCATION FORMS, MATERIALS	INSPECTOR	DATE
FRAME: FIRE STOPS, BRACING, BOLTS	<u>[Signature]</u>	<u>11-10-52</u>
LATH, INT.	<u>[Signature]</u>	<u>11-10-52</u>
LATH, EXT.	<u>[Signature]</u>	<u>11-10-52</u>
PLASTER, INT.	<u>[Signature]</u>	<u>11-27-52</u>
PLASTER, EXT.	<u>[Signature]</u>	<u>11-27-52</u>
FINAL	<u>[Signature]</u>	<u>11-27-52</u>

**WORKERS' COMPENSATION DECLARATION**

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

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. My worker's compensation insurance carrier and policy number are:

CARRIER GRANT *E.P.*

POLICY NUMBER UC0015125400 *4-19-06*

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

APPLICANT: [Signature] DATE: 5-17-05

**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.**

**LICENSED CONTRACTORS DECLARATION**

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

License Number 79207 License Class B.W.C. *E.P.*

Contractor Five Const. Date 3-17-05 *3-31-04*

**OWNER-BUILDER DECLARATION**

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):

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).

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

**CONSTRUCTION LENDING AGENCY**

I hereby affirm 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 ISROTEL

Lender's Address 165-35 LA CIENAGA BLVD

I certify that I have read this application and state that the above information is correct. I agree to comply with all City 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.

APPLICANT: [Signature] DATE: 5-17-05

PERMIT NO:

5137-0118

**BUILDING PERMIT**

CITY OF INGLEWOOD

DIVISION OF BUILDING AND SAFETY

ONE MANCHESTER BOULEVARD / INGLEWOOD, CALIFORNIA 90301

310 / 412-3294

PLAN CHECK:

Job Address 10204 S. Prairie

Project No. 10693-01

GROUP	TYPE	FIRE ZONE	USE ZONE

Plans Checked \_\_\_\_\_ Date \_\_\_\_\_

Plans Approved [Signature] Date \_\_\_\_\_

Permit Issued [Signature] Date 5-17-05

PLAN CHECK FEE	ADD'L PLAN CHECK	PERMIT FEE
		<u>153-</u>

1. Job Address 10204 PRAIRIE AVE

2. Owner LASHAWN BROWN  
Address 1024 PRAIRIE AVE  
City INGLEWOOD Zip 90703  
Tel. No. \_\_\_\_\_

3. Contractor FIVE CONST.  
Street Address 1435 LA CIENAGA  
City LA State CA  
Tel. No. 818-65-2278  
City License No. 028028 pd. 5/17/06  
Architect or Engineer \_\_\_\_\_

4. \_\_\_\_\_  
Tel. No. \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ Zip \_\_\_\_\_

5. DESCRIPTION OF WORK TO BE DONE  
New \_\_\_ Add \_\_\_ Alter \_\_\_ Repair \_\_\_ Demolish \_\_\_

DESCRIBE NEW BUILDING  
Gross Area \_\_\_\_\_ No. Stories \_\_\_\_\_ Ext. Walls \_\_\_\_\_

DESCRIBE PRESENT BUILDING  
Gross Area \_\_\_\_\_ No. Stories \_\_\_\_\_ Ext. Walls \_\_\_\_\_

DESCRIBE ADDITION  
Gross Area \_\_\_\_\_ No. Stories \_\_\_\_\_ Ext. Walls \_\_\_\_\_

DESCRIBE WORK  
REAR W/ HOUSE + GARAGE  
SHINGLES 23'x16'6" IN  
INSULATION SHINGLES

6. Proposed use of building \_\_\_\_\_

Present use of building \_\_\_\_\_

7. Valuation (including labor and material)  
\$5900

8. I certify that I have read this application and state that the above information is correct. I agree to comply with all city ordinances and state laws regulating building construction. I certify that in the performance of the above work for which this permit is issued I shall not employ any person in violation of the Labor Code of California relating to Workmen's Compensation.

OWNER OR CONTRACTOR \_\_\_\_\_ BY \_\_\_\_\_ AUTHORIZED AGENT

**INSPECTION RECORD**

WILL THE APPLICANT OR FUTURE BUILDING OCCUPANT HANDLE A HAZARDOUS MATERIAL OR A MIXTURE CONTAINING A HAZARDOUS MATERIAL EQUAL TO OR GREATER THAN THE AMOUNTS SPECIFIED ON THE HAZARDOUS MATERIALS INFORMATION GUIDE?  
YES  NO

WILL THE INTENDED USE OF THE BUILDING BY THE APPLICANT OR FUTURE BUILDING OCCUPANT REQUIRE A PERMIT FOR CONSTRUCTION OR MODIFICATION FROM THE SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT (SCAQMD)? SEE PERMITTING CHECKLIST FOR GUIDELINES.  
YES  NO

I HAVE READ THE HAZARDOUS INFORMATION GUIDE AND THE SCAQMD OCCUPANT PERMITTING CHECKLIST. I UNDERSTAND MY REQUIREMENTS CONCERNING HAZARDOUS MATERIALS REPORTING AND FOR OBTAINING A PERMIT FROM THE SCAQMD.

OWNER OR AGENT \_\_\_\_\_

Plan. Div. App'l.	Health Dept.
Co. San. Dist.	School Dist.
Fire Sprinklers	Fire Alarm

**APPROVALS**

	DATE	INSPECTOR
Foundation		
Floor Joists		
Sheathing	<u>5-17-05</u>	<u>[Signature]</u>
Frams		
Ext. Lath		
Final	<u>5-24-05</u>	<u>[Signature]</u>

JOB ADDRESS 10204 S. Prairie Ave

PERMIT NO:

1106601-1-222

# BUILDING PERMIT

CITY OF INGLEWOOD

DIVISION OF BUILDING AND SAFETY

ONE MANCHESTER BOULEVARD / INGLEWOOD, CALIFORNIA 90301  
310 / 412-5294

PLAN CHECK:

1106202-1-216

pd 3/3/11

### WORKERS' COMPENSATION DECLARATION

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



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. My worker's compensation insurance carrier and policy number are:

CARRIER: Safely Home

POLICY NUMBER: 1093068-2010



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

APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

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.

### LICENSED CONTRACTORS DECLARATION

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

License Number: 598872 License Class: B-1

Signature: Muhammad Power Date: 3/3/11

### OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Section 7031.5, Business and Professions Code):



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).



I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Section 7044, Business and Professions Code).

### CONSTRUCTION LENDING AGENCY

I hereby affirm 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: N/A

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 ordinances and State laws relating to building construction, and hereby authorize representatives of this City to inspect the above mentioned property for inspection purposes.

APPLICANT: Muhammad Power DATE: 3/7/11

7/23/11  
EP

1. Job Address: 10204 Prairie Ave  
 2. Owner: Muhammad Power  
 Address: 221 Avenue B  
Redondo Beach 90277  
 Tel. No. (6310) 12222707  
 3. Contractor: Muhammad Power  
 Street Address: 10204 Prairie Ave  
 City: Inglewood State: CA  
 Tel. No. (310) 493-9607  
 City License No. 186362 pd 2/8/11  
 4. Architect or Engineer: \_\_\_\_\_  
 Tel. No. \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City \_\_\_\_\_ Zip \_\_\_\_\_

5. DESCRIPTION OF WORK TO BE DONE  
New \_\_\_ Add \_\_\_ Alter \_\_\_ Repair \_\_\_ Demolish X

DESCRIBE NEW BUILDING  
Gross Area \_\_\_\_\_ No. Stories \_\_\_\_\_ Ext. Walls \_\_\_\_\_

DESCRIBE PRESENT BUILDING  
Gross Area \_\_\_\_\_ No. Stories \_\_\_\_\_ Ext. Walls \_\_\_\_\_

DESCRIBE ADDITION  
Gross Area \_\_\_\_\_ No. Stories \_\_\_\_\_ Ext. Walls \_\_\_\_\_

DESCRIBE WORK  
Remodel Kitchens & Baths in three (3) units, Remove & install windows, doors, drywall throughout as needed

7. Valuation (including labor and material)  
\$ 39,000.00

8. I certify that I have read this application and state that the above information is correct. I agree to comply with all city ordinances and state laws regulating building construction. I certify that in the performance of the above work for which this permit is issued I shall not employ any person in violation of the Labor Code of California relating to Workmen's Compensation.  
OWNER OR CONTRACTOR: Muhammad Power AUTHORIZED AGENT: \_\_\_\_\_

Job Address: 10204 Prairie Ave

Project No. BAACR-2011-03-02192

GROUP	TYPE	FIRE ZONE	USE ZONE
<u>R-3</u>	<u>VN</u>		
Plans Checked	<u>BC</u>	Date	<u>3/3/11</u>
Plans Approved	<u>BC</u>	Date	<u>3/7/11</u>
Permit Issued	<u>BC</u>	Date	<u>3/7/11</u>
PLAN CHECK FEE	ADD'L PLAN CHECK	PERMIT FEE	
<u>453</u>		<u>533</u>	
<u>8-10-11 wall heaters inspected</u>			

### INSPECTION RECORD

WILL THE APPLICANT OR FUTURE BUILDING OCCUPANT HANDLE A HAZARDOUS MATERIAL OR A MIXTURE CONTAINING A HAZARDOUS MATERIAL EQUAL TO OR GREATER THAN THE AMOUNTS SPECIFIED ON THE HAZARDOUS MATERIALS INFORMATION GUIDE?

YES  NO

WILL THE INTENDED USE OF THE BUILDING BY THE APPLICANT OR FUTURE BUILDING OCCUPANT REQUIRE A PERMIT FOR CONSTRUCTION OR MODIFICATION FROM THE SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT (SCAQMD)? SEE PERMITTING CHECKLIST FOR GUIDELINES.

YES  NO

I HAVE READ THE HAZARDOUS INFORMATION GUIDE AND THE SCAQMD PERMITTING CHECKLIST. I UNDERSTAND MY REQUIREMENTS CONCERNING HAZARDOUS MATERIALS REPORTING AND FOR OBTAINING A PERMIT FROM THE SCAQMD.

OWNER OR AGENT

Plan. Div. Appv'l.	Health Dept.
Co. San. Dist.	School Dist.
Fire Sprinklers	Fire Alarm

### APPROVALS

	DATE	INSPECTOR
Foundation		
Floor Joists		
Sheathing		
Frams		
<u>Drywall</u>	<u>4-07-11</u>	<u>[Signature]</u>
Ext. Lath		
Final	<u>8-31-11</u>	<u>[Signature]</u>

JOB ADDRESS

10204 - 10206 - 10208 S PRAIRIE