THIS IS A 2 PART FORM WRITE ON A FIRM SURFACE

not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative of this city to enter upon the abovementioned property

ろころ

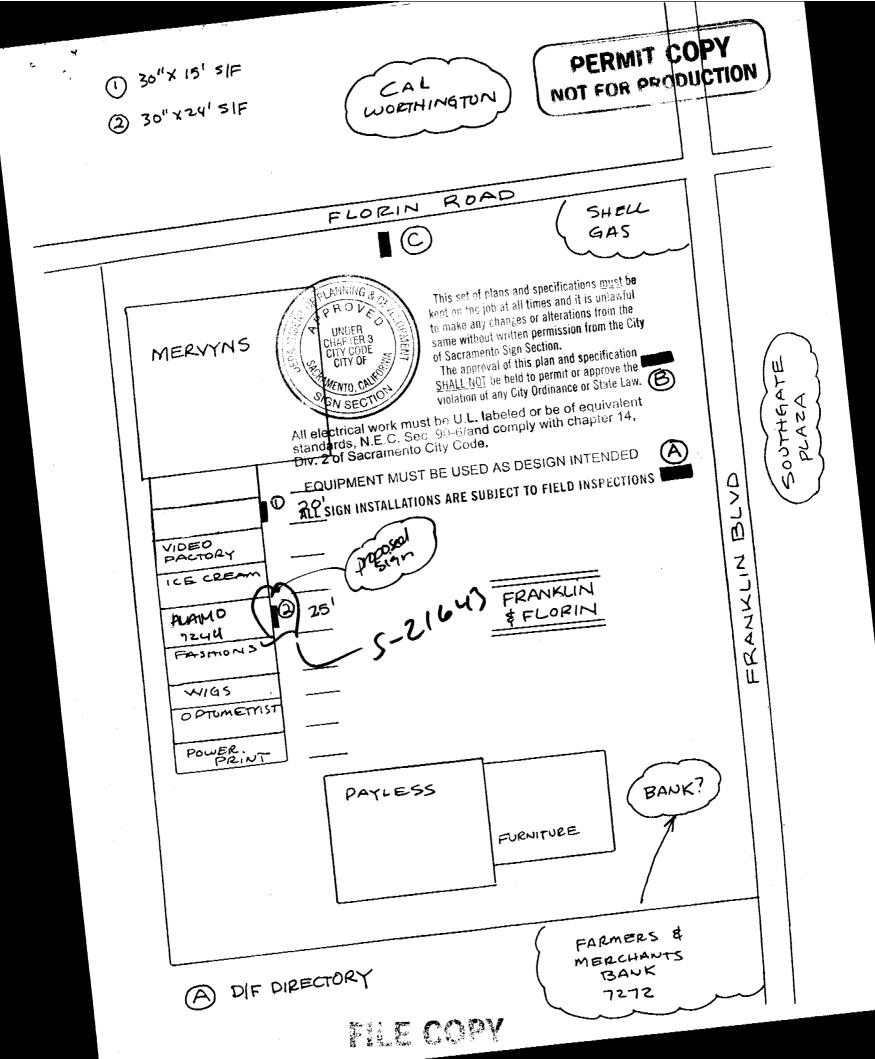
Signature of Applicant or Agent である。 I certify that I have read this application and state that all information is correct. I agree to

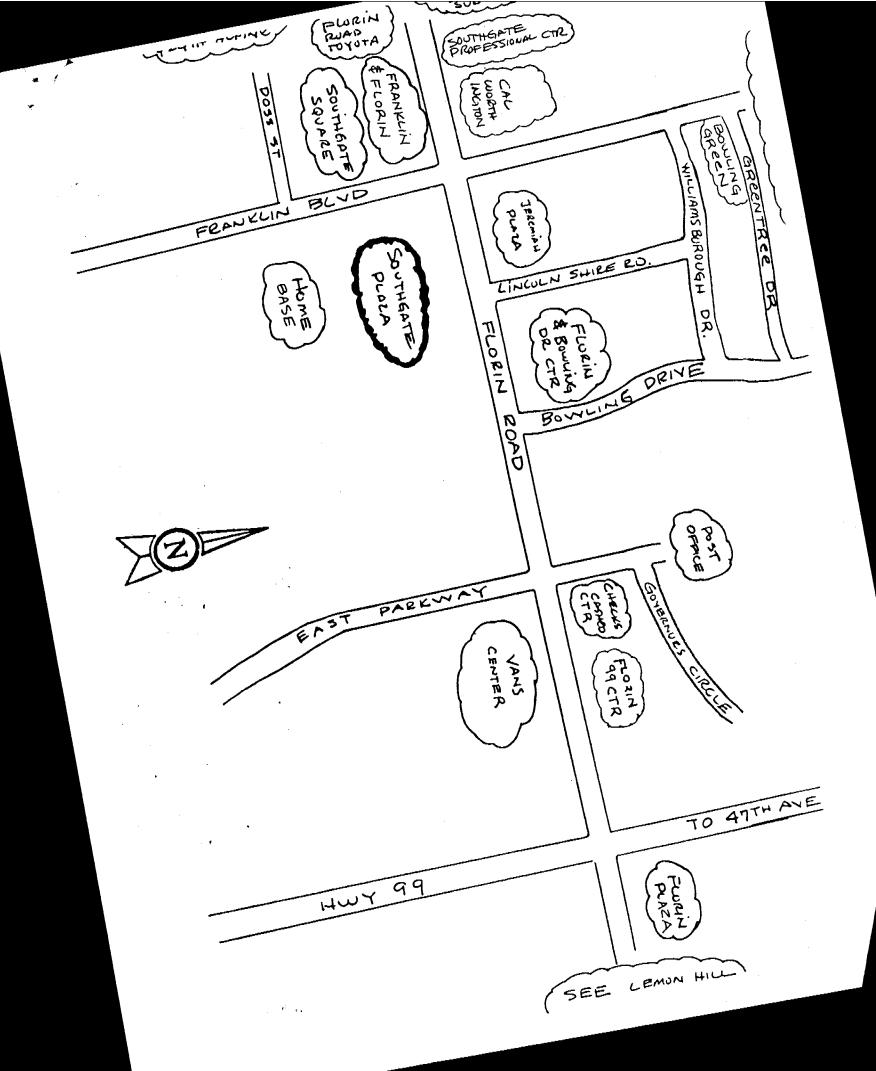
for inspection purposes.

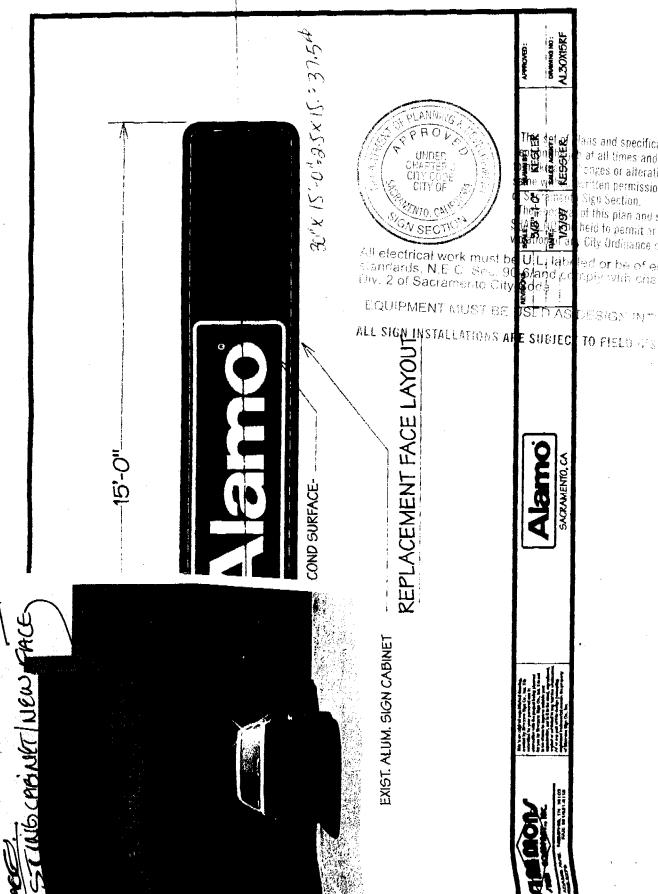
Date

SIGN PERMIT APPLICATION **USE BLACK INK BALL POINT PEN — PRESS FIRMLY**

IS NOT COMMENCED WITHIN 180 DAYS.	THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED
FEES \$	AND ATTORNEY S FEES.
CITY BUSINESS LICENSOLUTION OTHER	
	Date: 6.11.61 Applicant: Challin Aynson
SIGN APPLICATION FEE	agree that it I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.
FEES: RECEIVED DATE AMOUNT	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
SIGN INSPECTOR DATE	(This section need not be completed if the permit is for one hundred
ELECTRICAL INSPECTOR DATE DATE DATE	Policy Number 478-46
FINAL INSPECTIONS	Carrier SATE FUND
DENIED BY PATE DATE	by Section 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:
A. TYPE OF SIGN	I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.
NOIT AUTA KBIS	I hereby affirm under penalty of perjury one of the following declarations:
ES NO WHICH I	WORKER'S COMPENSATION DECLARATION
SPECIAL PERMIT REQUIRED? YES NO P#	BUILDING INSPECTION DIVISION 264-7619
DESIGN REVIEW REQUIRED? YES NO APPROVED BY	OF CAODANE WITH
ENGINEERING REQUIRED? YES NO APPROVED BY	14014-5
OFFICE USE ONLY	TALALO"
OCCUPANCY FRONTAGE (FT)	SIGN COPY RUPY CX STINGO CASINGET
POLE SIZE FOOTING SIZE STREET FRONTAGE (FT)	Ø PLASTIC □ MONUMENT □ WINYL/GATOR FOAM □ WOODEN □ PROJECTING ☑ RE-FACE
(A X B) SIGN AREA 37. ST 3d	☐ INDIVIDUAL LETTERS ☐ PAINTED ON BUILDING ☐ LOGO☐ DOUBLE FACED☐ METAL ☐ POLE ☐ DOUBLE FACED
(A) HEIGHT 30 (B) LENGTH 15 (A)	☐ INTERIOR / ELECT. ☐ ☐ NON-ILLUMINATED ☐
CC38 11E 228 25 CM	BUSINESS OWNER A CAR TOUR PORT OF THE PROPERTY OF THE PROPERT
1241 98841 349.1600	CARROLLES CONTRACTOR
ZIP CODE PHONE NO.	NAME OF APPLICANT ADDRESS
MIT NO. 010 7436	PERIVER NO. 049-0380-018 PERIV
70x6 C-2 2	7244 PREVIOUS BLUD.
SUITE INSP. AREA	SITE ADDRESS







lans and specifications <u>must</u> be at all times and it is unlawful enges or alterations from the critten permission from the City

of this plan and specification held to permit or approve the City Ordinance of Lints Law

led or be of edulations Inply with chap

DESIGN INT