



Update Results



CITY OF OAKLAND

Address History with Inspection Log

CONTACT_TYPE = Complainant, Neighbor, Tenant/Occupant, Applicant, Lienee

CONTACT_TYPE = Blank

STREET_NBR = 859

STREET_NAME : Begins With mead

STREET_TYPE : Begins With

APN = ----

DATE_OPENED >=

DATE_OPENED <= 12/31/2017

RECORD_TYPE_SUBTYPE <> Soft Story Retrofit Validation

RECORD_TYPE_TYPE <> Lien

Record ID: 0000796**Address:** 859 MEAD AVE**APN:** 003 001301900**Unit #:****Description:** VACANT UNSECURED BUILDING WITH TRASH AND DEBRIS IN FRONT AND REARYARDS.**Date Opened:** 1/27/2000**Record Status:** Abated**Record Status Date:** 3/3/2009**Job Value:** \$0.00**Requestor:** STAFF-KELLEY

:

Business Name:**License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|------------------|---|-----------------------------------|--|
| 1/27/2000 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | |
| 2/15/2000 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Substantial compliance/no fees | |
| 3/3/2000 | WING LOO | 1st Inspection | No Entry | Scheduled inspection voided by result code 98 on 03/03/09 |
| 7/7/2005 | RICHARD FIELDING | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | COORD. EMERG. CLEAN W/OPD /O SLAUGHTER |
| 7/15/2005 | RICHARD FIELDING | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Inspection re- scheduled | CLEAN BY CITY/LEGAL CORPS W/OWNER |
| 7/25/2005 | RICHARD FIELDING | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Inspection re- scheduled | CASE RETURNED TO PROBLEM PROPERTIES DIVISION |
| 8/2/2005 | WING LOO | 1st Inspection | No Entry | Scheduled inspection voided by result code 98 on 03/03/09 |
| 12/9/2005 | WING LOO | 1st Inspection | No Entry | |

Scheduled inspection voided by result code
98 on 03/03/09

3/3/2009 WING LOO OMC - BLIGHT
ABATEMENT OMC-
Injurious OMC-1 Complaint ABated

Record ID: 0102334

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: VACANT UNSECURED BUILDING WITH TRASH AND DEBRIS IN FRONT AND REAR YARD

Date Opened: 3/27/2001

Record Status: Abated

Record Status Date: 4/30/2001

Job Value: \$0.00

Requestor:

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|-----------------------------------|---|
| 3/27/2001 | DAVID CARRILLO | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | |
| 4/18/2001 | DAVID CARRILLO | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | Auto scheduled from 62 result on 03/27/01 |
| 4/30/2001 | DAVID CARRILLO | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | Reinsp requested from insp result 93 on 04/18/01 |

Record ID: 0107165

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: ACCUMULATION OF TRASH AND DEBRIS IN FRONT OF THE HOUSE. REMOVE BY THE DUE DATE.

Date Opened: 8/17/2001

Record Status: Abated

Record Status Date: 10/11/2001

Job Value: \$0.00

Requestor:

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|-----------------------------------|--|
| 8/20/2001 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | |
| 9/13/2001 | | 1st Inspection | No Entry | Scheduled inspection voided by result code 98 on 10/11/01 |
| 10/11/2001 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | |

Record ID: 0200249

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: VACANT BUILDING WITH TRASH AND DEBRIS IN SIDE DRIVEWAY.

Date Opened: 1/10/2002

Record Status: Abated

Record Status Date: 1/31/2002

Job Value: \$0.00

Requestor: STAFF-KELLEY

:

Business Name:**License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|-----------------------------------|---|
| 1/14/2002 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | |
| 1/23/2002 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Inspection re- scheduled | Reinsp generated from insp result 93 on 01/14/02 |
| 1/31/2002 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | Reinsp generated from insp result 82 on 01/23/02 |
| 2/6/2002 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | |

Record ID: [0206219](#)**Address: 859 MEAD AVE****APN: 003 001301900****Unit #:****Description: TRASH & DEBRIS****Date Opened: 7/23/2002****Record Status: Abated****Record Status Date: 8/20/2002****Job Value: \$0.00****Requestor:**

:

Business Name:**License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|-----------------------------------|---|
| 7/24/2002 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | |
| 8/20/2002 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | Auto scheduled from 62 result on 07/24/02 |

Record ID: [0207479](#)**Address: 859 MEAD AVE****APN: 003 001301900****Unit #:****Description: VACANT BUILDING WORK WITH OUT PERMITS****Date Opened: 8/29/2002****Record Status: Abated****Record Status Date: 6/11/2009****Job Value: \$0.00****Requestor: OPD**

:

Business Name:**License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|--------------------|-----------------|
| 3/3/2009 | WING LOO | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | |
| 6/11/2009 | WING LOO | 1st Inspection | Violation Verified | |

Requestor: WILLIAMS ELIZABETH A

:

Business Name:**License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|------------------|-----------------|
| 3/3/2009 | WING LOO | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | |

6/11/2009 WING LOO 1st Inspection Violation Verified

Record ID: [0209999](#)

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: TRASH AND DEBRIS

Date Opened: 12/24/2002

Record Status: Abated

Record Status Date: 12/26/2002

Job Value: \$0.00

Requestor:

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|------------------|----------------------------|
| 12/25/2002 | | 1st Inspection | No Entry | INSPECTION CANCELLED/TRACI |
| 12/26/2002 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | |

Record ID: [0305629](#)

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: TRASH AND DEBRIS

Date Opened: 8/11/2003

Record Status: Abated

Record Status Date: 8/27/2003

Job Value: \$0.00

Requestor:

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|-----------------------------------|---|
| 8/12/2003 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | |
| 8/27/2003 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | Reinsp requested from insp result 93 on 08/12/03 |

Record ID: [0307457](#)

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: BLIGHT

Date Opened: 10/29/2003

Record Status: No Violation Found

Record Status Date:

Job Value: \$0.00

Requestor: JOEL TENA

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|-------------------------------|-----------------|
| 11/3/2003 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Referred to another Agency | JOEL X7032 |

Record ID: [0307767](#)

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: VACANT ABANDONED BLDG. POSSIBLE REPEAT OFFENDER.

Date Opened: 11/18/2003

Record Status: Abated

Record Status Date: 11/20/2003

Job Value: \$0.00

Requestor: JOEL X7032, SDS TEAM

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|------------------|-----------------|
| 11/20/2003 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | JOEL X7032 |

Record ID: [0503310](#)

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: TRASH IN FRONT OF PROPERTY

Date Opened: 7/6/2005

Record Status: No Violation Found

Record Status Date:

Job Value: \$0.00

Requestor:

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|-------------------------|---|------------------|--|
| 7/7/2005 | PERMIT TRACKING CODE | 1st Inspection | No Entry | Inspection voided 07/07/05 - NA disposition on 07/07/05 |
| 7/7/2005 | HUGO BARRON | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | SEE CASE 0000796 |

Record ID: [0503314](#)

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: BLIGHTED PROPERTIES 859, 849, 851, 853, AND 855

Date Opened: 7/6/2005

Record Status: Abated

Record Status Date: 7/7/2005

Job Value: \$0.00

Requestor: BILL

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|-------------------------|-----------------|-----------------|--|
| 7/7/2005 | PERMIT TRACKING CODE | 1st Inspection | No Entry | Inspection voided 07/07/05 - NA disposition on 07/07/05 |

Record ID: [0603306](#)

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: OVERGROWTH OF VEGETATION AND ACCUMULATION OF TRASH AND DEBRIS

Date Opened: 5/11/2006

Record Status: Abated

Record Status Date: 7/10/2006

Job Value: \$0.00

Requestor:

:

Business Name:**License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|-------------------|---|-----------------------------------|---|
| 5/3/2006 | THOMAS A ESPINOSA | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | |
| 6/15/2006 | THOMAS A ESPINOSA | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | Auto scheduled from 62 result on 05/03/06 |
| 7/10/2006 | THOMAS A ESPINOSA | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint ABated | Reinsp requested from insp result 93 on 06/15/06 |
| 8/2/2006 | THOMAS A ESPINOSA | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Inspection extension | NO COMMENT |
| 4/25/2007 | ROBERT WALKER | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | PHOTOS. SECURE. OVERGROWTH. CHAIRS IN SIDE YARD. |

Record ID: [0905510](#)**Address:** 859 MEAD AVE**APN:** 003 001301900**Unit #:****Description:** MONITOR OF CONDITIONS PER COMPLIANCE PLAN W/CITY ATTORNEY (THRU 9/11)**Date Opened:** 9/2/2009**Record Status:** Non-Actionable**Record Status Date:** 3/7/2011**Job Value:** \$0.00**Requestor:**

:

Business Name:**License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|------------------|---|-----------------------------------|--|
| 12/8/2010 | DAVID C MILES | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | |
| 12/8/2010 | RICHARD FIELDING | 1st Inspection | Unable to Verify | |
| 1/5/2011 | DAVID C MILES | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Substantial compliance/no fees | |
| 3/7/2011 | WING LOO | 1st Inspection | No Entry | NO VIOLATIONS |
| 6/8/2011 | RICHARD FIELDING | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Substantial compliance/no fees | |
| 6/8/2011 | RICHARD FIELDING | 1st Inspection | Unable to Verify | |
| 9/7/2011 | WING LOO | 1st Inspection | No Entry | Scheduled inspection voided by result code 97 on 03/07/11 |
| 9/8/2011 | RICHARD FIELDING | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Substantial compliance/no fees | |
| 9/8/2011 | RICHARD FIELDING | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Substantial compliance/no fees | |
| 12/8/2011 | DAVID C MILES | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Inspection re- scheduled | NO COMMENTS |
| 12/8/2011 | DAVID C MILES | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Inspection re- scheduled | NO COMMENTS |
| 1/9/2012 | RICHARD FIELDING | 1st Inspection | Unable to Verify | Reinsp requested from insp result 82 on 12/08/11 |
| 1/9/2012 | RICHARD FIELDING | 1st Inspection | Unable to Verify | Reinsp requested from insp result 82 on 12/08/11 |

Record ID: [1002816](#)**Address: 859 MEAD AVE****APN: 003 001301900****Unit #:****Description: TRASH & DEBRIS IN FRONT OF PROPERTY, FURNITURE, CARDBOARD ALSO****Date Opened: 5/10/2010****Record Status: No Violation Found****Record Status Date:****Job Value: \$0.00****Requestor:****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|---|-----------------------------|-----------------|
| 5/11/2010 | WING LOO | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Complaint Not Applicable | NO BLIGHT |

Record ID: [1700734](#)**Address: 859 MEAD AVE****APN: 003 001301900****Unit #:****Description: Apt. A No heating, poor ventilation, high humidity. Mice and mold.****Date Opened: 2/22/2017****Record Status: Non-Actionable****Record Status Date: 2/24/2017****Job Value: \$0.00****Requestor: Katie Back****: Katie Back****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|------------------|-----------------|
| 2/24/2017 | Wing Loo | 1st Inspection | Unable to Verify | |

Record ID: [9707931](#)**Address: 859 MEAD AVE****APN: 003 001301900****Unit #:****Description: TRASH AND DEBRIS****Date Opened: 12/19/1997****Record Status: Closed****Record Status Date: 11/17/2000****Job Value: \$0.00****Requestor: STAFF-NEE****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

Record ID: [9800038](#)**Address: 859 MEAD AVE****APN: 003 001301900****Unit #:****Description: TRASH AND DEBRIS****Date Opened: 1/6/1998****Record Status: Closed****Record Status Date: 11/17/2000****Job Value: \$0.00****Requestor: STAFF-NEE****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|---|----------------|-----------------|-----------------|-----------------|
| Record ID: <u>9800092</u> | | | | |
| Address: 859 MEAD AVE, #859 | | | | |
| APN: 003 001301900 | | | | |
| Unit #: 859 | | | | |
| Description: VACANT, UNSECURED TRASH AND DEBRIS. | | | | |
| Date Opened: 1/7/1998 | | | | |
| Record Status: Closed | | | | |
| Record Status Date: 11/17/2000 | | | | |
| Job Value: \$0.00 | | | | |
| Requestor: STAFF | | | | |
| : | | | | |
| Business Name: | | | | |
| License #: | | | | |

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|---------------------------------------|----------------|-----------------|-----------------|-----------------|
| Record ID: <u>9907110</u> | | | | |
| Address: 859 MEAD AVE | | | | |
| APN: 003 001301900 | | | | |
| Unit #: | | | | |
| Description: GARBAGE IN FRONT | | | | |
| Date Opened: 7/6/1999 | | | | |
| Record Status: Closed | | | | |
| Record Status Date: 11/17/2000 | | | | |
| Job Value: \$0.00 | | | | |
| Requestor: HUGH BASSETTE | | | | |
| : | | | | |
| Business Name: | | | | |
| License #: | | | | |

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|-------------------------|---|-----------------------------------|---|
| 7/7/1999 | | OMC - BLIGHT ABATEMENT OMC- Injurious OMC-1 | Viol. verified / not corrected | |
| 8/2/1999 | PERMIT TRACKING CODE | 1st Inspection | No Entry | Inspection voided 11/17/00 - complaint closed 11/17/00 |

| | | | | |
|--|--|--|--|--|
| Record ID: <u>B0200773</u> | | | | |
| Address: 859 MEAD AVE | | | | |
| APN: 003 001301900 | | | | |
| Unit #: | | | | |
| Description: Dry rot damage from inside at rear of bldg and under window. | | | | |
| Date Opened: 2/25/2002 | | | | |
| Record Status: Expired | | | | |
| Record Status Date: 3/11/2003 | | | | |
| Job Value: \$550.00 | | | | |
| Requestor: WILLIAMS ELIZABETH A | | | | |
| : | | | | |
| Business Name: | | | | |
| License #: | | | | |

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|--|----------------|-----------------|-----------------|-----------------|
| Record ID: <u>RB0401305</u> | | | | |
| Address: 859 MEAD AVE | | | | |
| APN: 003 001301900 | | | | |
| Unit #: | | | | |
| Description: demolish 2,596 sq. ft. 2 family dwelling | | | | |
| Date Opened: 3/29/2004 | | | | |
| Record Status: Expired | | | | |
| Record Status Date: 1/28/2005 | | | | |
| Job Value: \$0.00 | | | | |
| Requestor: WILLIAMS ELIZABETH A | | | | |

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
| 3/30/2004 | | FIELD CHECK 00N | APPROVED | POSTING |
| 3/30/2004 | | FIELD CHECK 00N | APPROVED | POSTING |

Record ID: [RE1503461](#)

Address: 859 MEAD AVE

APN: 003 001301900

Unit #:

Description: (4) 100 amp service upgrade for fourplex.

Date Opened: 10/22/2015

Record Status: Expired

Record Status Date: 7/15/2016

Job Value: \$0.00

Requestor: Ivonne Gomez - LOA

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------------|-----------------|-----------------|---|
| 10/30/2015 | Steve Johnson | Frame | Not Pass | Date: 10/30/2015 Provide AIC letter from PG&E. Patch stucco behind service equipment. Water heater in unit B is bonded. |
| 12/10/2015 | Joanneke F Verschuur | Frame | Not Pass | Date: 12/10/2015 For meter release: previous CN on both 857 and 859 permits 1) AIC letter from PGE and main breakers rated per AIC, 2) 250-350 Amp Main requires #2 grounding electrode conductor from ground bars to main panel, 3) bonding at Water Heaters min #6 wire, need access to reinspect, 4) unit sub-panels requires separate ground bus from neutral bus, 5) 857 units A and B also need second kitchen circuits, 6) did not inspect 859 interior wiring, if any |
| 1/13/2016 | Anthony Harbaugh | Frame | Pass | green tag issued for meter release. |

For real-time, direct access to information via the Internet, 24 hours a day - <https://aca.accela.com/oakland>

Permits for which no major inspection has been approved within 180 days shall expire by limitation. No refund more than 180 days after expiration or final.



CITY OF OAKLAND

250 FRANK H. OGAWA PLAZA ■ 2ND FLOOR ■ OAKLAND, CA 94612

Planning and Building Department
www.oaklandnet.com

PH: 510-238-3891

FAX: 510-238-2263

TDD: 510-238-3254

Permit No: RE1503461 Residential Electrical - Alteration

Job Site: 859 MEAD AVE

Filed Date: 10/22/2015

Parcel No: 003 001301900

Schedule Inspection by calling: 510-238-3444

District:

Project Description: (4) 100 amp service upgrade for fourplex.

Related Permits:

| | <u>Name</u> | <u>Applicant</u> | <u>Address</u> | <u>Phone</u> | <u>License #</u> |
|--------------|----------------------|------------------|----------------------------|--------------|------------------|
| Owner: | WILLIAMS ELIZABETH A | | PO BOX 1436 SAN MARTIN, CA | 510-395-4477 | |
| Owner-Agent: | Ivonne Gomez - LOA | X | PO BOX 1436 SAN MARTIN, CA | 510-395-4477 | |

PERMIT DETAILS: Building/Residential/Electrical/Alteration

General Information

PGE Application Number:

Occupancy Group:

Sets Of Plans:

Calculations:

Title 24 Energy Calc for Electrical Heater:

Title 24 Energy Calc for Lighting:

Description of Proposed Work

SERVICE (1st 100 AMPS)

Quantity: 4

TOTAL FEES TO BE PAID AT FILING: \$309.83

| | | | | | |
|----------------------------|---------|------------|----------|------------------------|---------|
| Application Fee | \$70.00 | Inspection | \$200.00 | Records Management Fee | \$25.65 |
| Technology Enhancement Fee | \$14.18 | | | | |

Plans Checked By _____ Date _____

Permit Issued By AB Date 10-23-15

Finalized By _____ Date _____

CITY COPY



Permit No: RE1503461

Parcel No: 003 001301900

Job Site: 859 MEAD AVE

Page 3 of 3

An application for a building permit has been submitted in your name listing yourself as the builder of the property improvements specified. We are providing you with an Owner-Builder Acknowledgment and Information Verification Form to make you aware of your responsibilities and possible risk you may incur by having this permit issued in your name as the Owner-Builder. We will not issue a building permit until you have read, initialed your understanding of each provision, signed, and returned this form to us at our official address indicated. An agent of the owner cannot execute this notice unless you, the property owner, obtain the prior approval of the permitting authority.

OWNER'S ACKNOWLEDGMENT AND VERIFICATION OF INFORMATION

DIRECTIONS: Read and initial each statement below to signify you understand or verify this information.

- ☒ 1. I understand a frequent practice of unlicensed persons is to have the property owner obtain an "Owner-Builder" building permit that erroneously implies that the property owner is providing his or her own labor and material personally. I, as an Owner-Builder, may be held liable and subject to serious financial risk for any injuries sustained by an unlicensed person and his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an Owner-Builder and am aware of the limits of my insurance coverage for injuries to workers on my property.
- ☒ 2. I understand building permits are not required to be signed by property owners unless they are responsible for the construction and are not hiring a licensed Contractor to assume this responsibility.
- ☒ 3. I understand as an "Owner-Builder" I am the responsible party of record on the permit. I understand that I may protect myself from potential financial risk by hiring a licensed Contractor and having the permit filed in his or her name instead of my own.
- ☒ 4. I understand Contractors are required by law to be licensed and bonded in California and to list their license numbers on permits and contracts.
- ☒ 5. I understand if I employ or otherwise engage any persons, other than California licensed Contractors, and the total value of my construction is at least five hundred dollars (\$500), including labor and materials, I may be considered an "employer" under state and federal law.
- ☒ 6. I understand if I am considered an "employer" under state and federal law, I must register with the state and federal government, withhold payroll taxes, provide workers' compensation disability insurance, and contribute to unemployment compensation for each "employee." I also understand my failure to abide by these laws may subject me to serious financial risk.
- ☒ 7. I understand under California Contractors' State License Law, an Owner-Builder who builds single-family residential structures cannot legally build them with the intent to offer them for sale, unless all work is performed by licensed subcontractors and the number of structures does not exceed four within any calendar year, or all of the work is performed under contract with a licensed general building Contractor.
- ☒ 8. I understand as an Owner-Builder if I sell the property for which this permit is issued, I may be held liable for any financial or personal injuries sustained by any subsequent owner(s) that result from any latent construction defects in workmanship or materials.
- ☒ 9. I understand I may obtain more information regarding my obligations as an "employer" from the Internal Revenue Service, the United States Small Business Administration, the California Department of Benefit Payments, and the California Division of Industrial Accidents. I also understand I may contact the California Contractors' State License Board (CSLB) at 1-800-321-CSLB (2752) or www.cslb.ca.gov for more information about licensed contractors.
- ☒ 10. I am aware of and consent to an Owner-Builder building permit applied for in my name, and understand that I am the party legally and financially responsible for proposed construction activity.
- ☒ 11. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern Owner-Builders as well as employers.
- ☒ 12. I agree to notify the issuer of this form immediately of any additions, deletions, or changes to any of the information I have provided on this form.

Licensed contractors are regulated by laws designed to protect the public. If you contract with someone who does not have a license, the Contractors' State License Board may be unable to assist you with any financial loss you may sustain as a result of a complaint. Your only remedy against unlicensed Contractors may be in civil court. It is also important for you to understand that if an unlicensed Contractor or employee of that individual or firm is injured while working on your property, you may be held liable for damages. If you obtain a permit as Owner-Builder and wish to hire Contractors, you will be responsible for verifying whether or not those Contractors are properly licensed and the status of their workers' compensation insurance coverage. Before a building permit can be issued, this form must be completed and signed by the property owner and returned to the agency responsible for issuing the permit. A copy of the property owner's driver's license, form notarization, or other verification acceptable to the agency is required to be presented when the permit is issued to verify the property owner's signature.

Ivonne Armer

Name (Print)

Ivonne Armer

Signature ☐ Owner ☐ Agent

10.22.2015

Date

Permits for which no final inspection has been approved within 180 days shall expire by limitation. Not more than 180 days after expiration of final



Permit No. RF-1505461

Parcel No. 003-001301900

Job Site: 3591 MEAD AVE

Page 2 of 3

OWNER-BUILDER DECLARATION

☒ I hereby affirm under penalty of perjury that I am exempt from the Contractors' State License Law for the reason(s) indicated below by the checkmark(s) I have placed next to the applicable item(s). (Section 7041.5, Business and Professions Code). Any city or county that requires a permit to construct, alter, improve, demolish, or repair any structure prior to its issuance, also requires the applicant for the permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors' State License Law (Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professions Code), or that he or she is exempt from licensure and the basis for the alleged exemption. Any violation of Section 7041.5 by any applicant for a permit subjects the applicant to a civil penalty 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 all or portions of the work, and the structure is not intended or offered for sale. (Section 7044, Business and Professions Code). The Contractors' State License Law does not apply to an owner of property who, through employees or personal efforts, builds or improves the property, provided that the 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 it was not built or improved for the purpose of sale.

☐ I, as owner of the property, am exclusively contracting with licensed contractors to construct the project. (Section 7044, Business and Professions Code). The Contractors' State License Law does not apply to an owner of property who builds or improves thereon, and who contracts for the project with all licensed contractors pursuant to the Contractors' State License Law.

☒ I am exempt from licensure under the Contractors' State License Law for the following reason:

By my signature below, I acknowledge that, except for my personal residence in which I must have resided for at least one year prior to completion of the improvements covered by this permit, I cannot legally sell a structure that I have built as an owner-builder if it has not been constructed in its entirety by licensed contractors. I understand that a copy of the applicable law, Section 7044 of the Business and Professions Code, is available upon request when this application is submitted or at the following Web Site: <http://www.reginfo.gov/california/>.

RENOVATION REPAIR AND PAINTING ACKNOWLEDGMENT

EPA's Lead Renovation, Repair and Painting Rule (RRP Rule) requires that firms performing renovation, repair, and painting projects that disturb lead-based paint in homes, child care facilities, and preschools built before 1978 have their firm certified by EPA or use certified renovators who are trained by EPA-approved training providers and follow lead-safe work practices. As the property owner preparing to do work on a Pre-1978 building, I have read the explanation of the RRP Rule and will ensure that any paint disturbing work will be done by or supervised by an RRP certified individual(s). Failure to follow the rule may result in enforcement action by the EPA. For additional information on complying with lead safety requirements, contact the Alameda County Healthy Homes Department at (510) 557-3230 or 1-800-253-2372 or visit <http://www.adhhs.org>.

HAZARDOUS MATERIALS DECLARATION

I hereby affirm that the intended occupancy (HWP) (I WILL NOT use, handle or store any hazardous or acutely hazardous materials (Checking "HWP" acknowledges that Sections 25505, 25533, and 25540 of the Health and Safety Code, as well as filing instructions were made available to you)).

I hereby agree to save, defend, indemnify and keep harmless the City of Oakland and its officials, officers, employees, representatives, agents, and volunteers from all actions, claims, demands, litigation, or proceedings, including those for attorneys' fees, against the city in consequence of the granting of this permit or from the use or occupancy of the public right-of-way, public easement, or any sidewalk, street, or sub-sidewalk or otherwise by virtue thereof, and will in all things strictly comply with the conditions under which this permit is granted.

By my signature below, I certify to each of the following:

- ☐ I am the property owner or authorized to act on the property owner's behalf.
- ☐ I have read this application and the information I have provided is correct.
- ☐ I agree to comply with all applicable city and county ordinances and state laws relating to building construction.
- ☐ I authorize representatives of this city or county to enter the above-identified property for inspection purposes.

NOTICE: No activities related to the approved work including storage/use of materials is allowed within the public right-of-way without an encroachment permit. DUST control measures shall be used throughout all phases of construction.

Name (Print)

Signature of Owner/Agent

Date



CEDA - Building Services
250 Frank H. Ogawa Plaza,
Suite 2114
Oakland, California 94612
(510) 238-3444 Inspections
(510) 238-2263 fax

| | |
|---|----------------------------|
| Effective July 1, 2015 | (510) 238-3444 Inspections |
| JOB ADDRESS: | 859 Mead Ave. |
| CONTR. LIC. NO.: | Kauffman Ramez Armonone |
| BUILDING PERMIT #: | Ivanne Ramez 510-860-0106 |
| USE OF BUILDING: | Unrts. |
| Electrical, Plumbing, Mechanical Permit #s: | |

| |
|--|
| Permits expire unless major inspections are approved by the City every 6 months. |
| Date of building permit application determines applicable standards. |
| Optional Plan Check is only available with additional processing and overtime fees |
| I'm requesting the optional plancheck |
| Documentation needed for inspection: |
| <input type="checkbox"/> PGE application number |
| <input type="checkbox"/> Title 24 Energy Calc for Electric Heater |
| <input type="checkbox"/> Title 24 Energy Calc for Lighting |
| <input type="checkbox"/> AIC letter, Load calcs & 1 line diagrams |

DESCRIPTION OF PROPOSED WORK:

| Qty. | PLUMBING | Cost/U | Insp Fee | Qty. | MECHANICAL | Cost/U | Insp Fee | Qty. | ELECTRICAL | Cost/U | Insp Fee |
|-----------------------------------|----------------------------|--------|---------------|-----------------------------------|--------------------------|--------|---------------|-----------------------------------|----------------------------|--------|---------------|
| | Apt.in-lieu next 7 ** (hr) | 99.00 | | | A/C UNITS (<100 kbtu/s) | 101.00 | | 4 | SERVICE (100) AMPS | 151.00 | |
| | TOILETS | 50.00 | | | A/C UNITS (>100 kbtu/s) | 168.00 | | | >100 AMP/100 INCR | 50.00 | |
| | URINALS | 50.00 | | | EVAP COOLER | 43.00 | | | >600 VOLTS/200 KVA | 57.00 | |
| | LAVATORY/ BASIN | 50.00 | | | CONDEN / COMPRESS | 28.00 | | | METER (EXTRA) | 50.00 | |
| | SHOWERS | 50.00 | | | (ZONE) COIL / RADIANT | 28.00 | | | CIRCUIT / FEEDER | 5.40 | |
| | TUBS | 50.00 | | | CONDENSATE DRAIN | 18.75 | | | Apt.in-lieu next 7 ** (hr) | 99.00 | |
| | SINKS | 50.00 | | | (ZONE) Low Pressure Duct | 34.00 | | | Incandes./LED Fixtures | 3.00 | |
| | DISHWASHER Resid | 50.00 | | | F.A.U. (forced air unit) | 218.00 | | | (Fluor balast) FIXTURES | 3.00 | |
| | GARBAGE DISP Resid | 50.00 | | | WALL FURNACE | 218.00 | | | FIXT. (HighPresSod. HID) | 3.00 | |
| | LAUNDRY TRAY | 50.00 | | | FLOOR FURNACE | 43.00 | | | SWITCHES | 3.00 | |
| | CLOTHES WASHER | 50.00 | | | DUAL UNIT Heat / Cool | 79.00 | | | RECEPTACLES | 3.00 | |
| | DRINKING FOUNTAIN | 50.00 | | | GAS APPLIANCE Misc | 18.75 | | | RANGE/ TOP or OVEN * | 50.00 | |
| | FLOOR SINKS | 50.00 | | | GAS LIGHT/ LOG | 18.75 | | | DRYER * | 50.00 | |
| | FLOOR DRAIN | 50.00 | | | GAS INCINERATOR / KILN | 87.00 | | | FAN (Exhaust; Kitch/Bath) | 34.00 | |
| | INDIRECT WASTE | 50.00 | | | BOILERS (TO 30 HP) | 87.00 | | | DISPOSAL * | 34.00 | |
| | WASTE/VENT ALT Res | 28.00 | | | BOILERS (> 30 HP) | 140.00 | | | DISHWASHER * | 34.00 | |
| | RAIN WATER LEADER | 28.00 | | | FIREPLACE / BURNER | 87.00 | | | AIR COND. (1st 5 hp) * | 101.00 | |
| | BACK WATER VALVE | 28.00 | | | HEAT EXCH/ PUMP | 43.00 | | | AIR COND (ea. add'l hp) | 34.00 | |
| | EJECTOR/SUMP | 87.00 | | | Gas Torch Bunsen Burner | 18.75 | | | HEATERS (AIR) KW * | 3.00 | |
| | WATER SERVICE | 28.00 | | | | | | | (WATER) KW (\$403 max) | 3.00 | |
| | WATER ALTERATION | 28.00 | | | | | | | FURNACE * | 50.00 | |
| | WATER HEATERS | 28.00 | | | ENVIR AIR DUCT Resid | 18.75 | | | SWIMMING POOL * | 140.00 | |
| | BACK FLOW DEVICE | 28.00 | | | FLUES | 18.75 | | | OUTDOOR SPA Hot Tub * | 87.00 | |
| | GAS TEST / PIPE Low | 53.00 | | | FAN BLWER to 10k cfm | 34.00 | | | INDOOR SPA HIDR. * | 62.00 | |
| | ROMAN TUBS & BAPT | 87.00 | | | FAN BLWER >10K cfm | 69.00 | | | FOUNTAIN | 53.00 | |
| | GAS DRYERS Resid | 18.75 | | | VAR. AIR VOL. DAMPER | 18.75 | | | MFG. BLDG 1ST SECT. | 131.00 | |
| | GAS RANGES Resid | 18.75 | | | FIRE / SMOKE DAMP * | 18.75 | | | MFG. BLDG. + SECT. | 43.00 | |
| | FLUES (water heater only) | 18.75 | | | MFG. BLDG 1ST SECT. | 131.00 | | | | | |
| | SWIM. POOL / SPA | 504.00 | | | MFG. BLDG. + SECT. | 43.00 | | | SERVICE (TEMP.) | 79.00 | |
| | BLDG SEWER to PL | 173.00 | | | | | | | MOVED BLDG. (per hour) | 62.00 | |
| | MFG. BLDG 1ST SECT. | 131.00 | | | | | | | LOW VOLTAGE SYSTEM | 158.00 | |
| | MFG. BLDG. + SECT. | 43.00 | | | RADIATOR | 28.00 | | | SURVEY (per hour) | 202.00 | |
| | GREY WATER | 84.00 | | | GAS TEST / PIPE Low | 53.00 | | | METER RESET: SFD | 67.00 | |
| | CATCH BASIN | 88.00 | | | DRYER VENT Resid | 18.75 | | | : APT (Ea) | 87.00 | |
| | DRAIN TO STREET | 43.00 | | | RANGE VENT Resid | 18.75 | | | : COMM (per hour) | 202.00 | |
| | On-Site Storm Drain Piping | 173.00 | | | | | | | COMMERCIAL ONLY | | |
| | COMMERCIAL ONLY | | | | COMMERCIAL ONLY | | | | Motion Picture Machine | 18.75 | |
| | GAS TEST / PIPE Med | 87.00 | | | GAS TEST/ PIPE Med | 87.00 | | | CASE BEV / FR / VEG | 18.75 | |
| | GARBAGE DISP Com | 28.00 | | | ENVIR AIR DUCT Com | 43.00 | | | GASOLINE DISP. | 18.75 | |
| | DISHWASHER Com | 28.00 | | | DRYER VENT Com | 28.00 | | | SIGN (NEW) | 84.00 | |
| | GREASE TRAP | 87.00 | | | RANGE VENT Com | 28.00 | | | SIGN (EXISTING) | 50.00 | |
| | GREASE INTERCEPTOR | 174.00 | | | COMMERCIAL HOOD *** | 173.00 | | | OUTLINE NEON KVA | 50.00 | |
| | WASTE/VENT ALT Com | 28.00 | | | MISC. INDUST. EQUIP. | 140.00 | | | MISC. APPARATUS kw | 34.00 | |
| | GAS DRYERS Com | 28.00 | | | | | | | MOTORS HP (\$403 max) | 3.80 | |
| | GAS RANGES Com | 28.00 | | | | | | | X-RAY / DENTAL UNIT | 18.75 | |
| INSPECTION SUBTOTAL (\$71.00 min) | | | \$110.00 | INSPECTION SUBTOTAL (\$71.00 min) | | | \$110.00 | INSPECTION SUBTOTAL (\$71.00 min) | | | \$110.00 |
| PLAN CHK(20%res/ 64%com) | | | | PLAN CHK(20%res/ 64%com) | | | | PLAN CHK(20%res/ 64%com) | | | |
| APPLICATION FEE | | | 70.00 | APPLICATION FEE | | | 70.00 | APPLICATION FEE | | | 70.00 |
| TOTAL | | | \$180.00 | TOTAL | | | \$180.00 | TOTAL | | | \$180.00 |
| Records Mgmt | | | 9.50% \$17.10 | Records Mgmt | | | 9.50% \$17.10 | Records Mgmt | | | 9.50% \$17.10 |
| Tech Enhancement | | | 5.25% \$9.45 | Tech Enhancement | | | 5.25% \$9.45 | Tech Enhancement | | | 5.25% \$9.45 |
| GRAND TOTAL: | | | \$206.55 | GRAND TOTAL: | | | \$206.55 | GRAND TOTAL: | | | \$206.55 |

You must contact PG&E for all electric panel upgrades prior to City inspections. Call PG&E at 1-877-743-7782 or www.pge.com

*Requires dedicated circuit. ** Apartment in-lieu is only for each unit within new apartment buildings larger than 4 units. ***Need Hood Cut Sheet for inspection approval before install

| | |
|--|---------------|
| CERTIFICATE OF COMPLIANCE | CF1R-ALT-03-E |
| Alterations - HVAC CZ 1, 3 to 7 and 16 (formerly CF-1R-ALT-HVAC) | (Page 1 of 1) |

| | | | | | |
|--|--|---|------------|---|---|
| Site Address: | | Enforcement Agency: | | Date Prepared: | Permit#: |
| Equipment Type | | Equipment Efficiency | | New: Ducting, Plenums, Lineset Required R-value | Conditioned Floor Area (sq ft) |
| <input type="checkbox"/> Packaged System | <input type="checkbox"/> Evaporator Coil | _____ AFUE | _____ COP | <input type="checkbox"/> R-6 (CZ 1,3-7) Ducts | <input type="checkbox"/> Setback (If not already present, must be installed) |
| <input type="checkbox"/> Split System | <input type="checkbox"/> Condensing Unit | _____ SEER | _____ HSPF | <input type="checkbox"/> R-8 ¹ (CZ 16) Ducts | |
| <input type="checkbox"/> Furnace | <input type="checkbox"/> Lineset | _____ EER | | <input type="checkbox"/> R-6 (all CZ's) Plenums | |
| | | | | <input type="checkbox"/> R-5 or R7.5 Lineset ³ | |
| HERS VERIFICATION SUMMARY Installer determines work to be completed and matches to one of the options below. At permit application this form is allowed to be filled out by hand. For final inspection all forms are to be registered (no hand filled forms allowed) and a copy left on site. | | | | | |
| <input type="checkbox"/> 1. HVAC Changeout/Repair. Can include new ducting | | Required Compliance Documents to be left on site for Final: | | | |
| All Equipment, Condenser Unit, Evaporator Coil, Air Handler/Furnace | | CF1R-ALT-02-E CF2R: MECH-01, MECH-20-HERS CF3R: MECH-20-HERS | | | |
| Installer Requirement: Duct leakage ($\leq 15\%$ or, $\leq 10\%$ to outside, or seal all accessible leaks) Exempted from duct leakage testing if: <input type="checkbox"/> 1. Duct system registered with HERS provider as previously sealed, or <input type="checkbox"/> 2. There is less than 40 linear feet of duct in unconditioned space, or <input type="checkbox"/> 3. Existing duct systems are constructed, insulated or sealed with asbestos (list manufacture date of building _____) | | | | | |
| <input type="checkbox"/> 2. New HVAC System | | Required Compliance Documents to be left on site for Final: | | | |
| All new equipment and All New Ducts ² | | CF1R-ALT-02-E CF2R-MECH-01, MECH-20-HERS, MECH-22-HERS, MECH-(23 or 24)-HERS CF3R-MECH-20-HERS, MECH-22-HERS, MECH-(23 or 24)-HERS ² | | | |
| Installer Requirement: Duct leakage $\leq 6\%$, Fan Efficacy (.58W/CFM), Air Flow ≥ 350 CFM/ton (or Standards Table 150.0-C / D alternative) | | | | | |
| <input type="checkbox"/> 3. All New Ducts with Replacement | | Required Compliance Documents to be left on site for Final: | | | |
| Includes replacing or installing All New Ducts ² and one or more of the following: Condenser Unit, Evaporator Coil, Furnace | | CF1R-ALT-02-E CF2R-MECH-01, MECH-20-HERS, MECH-(23 or 24)-HERS CF3R-MECH-20-HERS, MECH-(23 or 24)-HERS | | | |
| Installer Requirement: Duct leakage $\leq 6\%$, Air Flow ≥ 350 CFM/ton (or Standards Table 150.0-C / D alternative) <input type="checkbox"/> Exempted from duct leakage testing if existing duct systems are constructed, insulated or sealed with asbestos. | | | | | |
| <input type="checkbox"/> 4. New Ducting over 40 feet | | Required Compliance Documents to be left on site for Final: | | | |
| Adding or replacing ducts in unconditioned space but less than All New Ducts ² | | CF1R-ALT-02-E CF2R: MECH-20-HERS CF3R: MECH-20-HERS | | | |
| Installer Required to: Duct leakage ($\leq 15\%$ or, $\leq 10\%$ to outside, or seal all accessible leaks) <input type="checkbox"/> Exempted from duct leakage testing if existing duct systems are constructed, insulated or sealed with asbestos. | | | | | |
| ¹ All new ducting R-8 required when more than 40 ft installed and R-6 when less than 40 ft installed. This includes in walls, between floors etc. ² A New Duct system is when the duct system is constructed of at least 75 percent new duct material, and up to 25 percent may consist of reused parts from the dwelling unit's existing duct system (e.g., registers, grilles, boots, air handler, plenums, duct material). ³ R-5 (1" thick insulation) for linesets 1" and less. R-7.5 (1.5" thick insulation) for linesets over 1 inch. Most mfg will require Suction line Diameter with insulation as the following 1.5-2T-2%", 2.5-3T-2%", 3.5 to 4T-2%", 5T-4%" | | | | | |
| Contractor (Documentation Author's /Responsible Designer'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 California Business and Professions Code to accept responsibility for the information on this document. 3. That the energy features and performance specifications for the design identified on this Certificate of Compliance conform to the requirements of Title 24, Parts 1 and 6 of the California Code of Regulations (CCR). 4. 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 CCR. 5. 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. | | | | | |
| Responsible Designer Name: | | Responsible Designer Signature: | | Date Signed: | License: |
| Company: | | Address: | | City/State/Zip: | Phone: |



LETTER OF AGENCY FOR PROPERTY OWNERS

VALID UP TO 180 DAYS ONLY

BUILDING SERVICES DIVISION
250 Frank Ogawa Plaza
2nd Fl., Suite 2114
Oakland, Ca 94612
VOICE: (510) 238-3443
FAX: (510) 238-2263

NAME OF PROPERTY OWNER:

X Elizabeth Ann Williams

PROPERTY ADDRESS:

2735 Market St. # 879 + 857 859 Meadow

By my signature below I authorize Thomas Espinosa to act as my agent/representative in obtaining any permits related to the work described below from the CEDA/ Building Services Division for the above listed property address.

BRIEFLY DESCRIBE WORK TO BE PERFORMED:

Remodel all trades Electrical

As proof of ownership, I have attached either 1) a copy of my property deed, or 2) a current tax bill which identifies me as the owner of said property.

X [Signature]
PROPERTY OWNER'S SIGNATURE (MUST BE SIGNED BEFORE A NOTARY PUBLIC)

X Elizabeth Ann Williams
PRINT NAME OF PROPERTY OWNER

10/27/2015
DATE
(510) 395-4477
PROPERTY OWNER'S PHONE NUMBER

USE SPACE BELOW FOR SIGNATURE NOTARIZATION

State of California Santa Clara
County of Santa Clara

Subscribed and sworn to (or affirmed) before me on this October 27 2015 by

(1) Elizabeth Ann Williams
DATE
NAME OF SIGNER

proved to me on the basis of satisfactory evidence to be the person who appeared before me (.) (.)

(2) _____
NAME OF SIGNER

proved to me on the basis of satisfactory evidence to be the person who appeared before me.)

Signature [Signature]
Signature of Notary Public



A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

Place Notary Seal Above



CITY OF OAKLAND

250 FRANK H. OGAWA PLAZA • SUITE 2340 • OAKLAND, CALIFORNIA 94612-2031

Planning & Building Department

Bureau of Building

Inspections, Permits and Code Enforcement Services

www.oaklandnet.com

(510) 238-3444

FAX: (510) 238-2959

TDD: (510) 238-3254

CORRECTION NOTICE

(MUST BE AVAILABLE DURING EACH INSPECTION)

Permittee _____ Job Location 859 Mead Av.
Address _____ Permit No. RE 1503461
City/State _____ Date/Time 10-30-15

1. If you have questions about a deficiency, listed below, you may:
 - a. Telephone your Inspector
 - b. Email your Inspector
 - c. Come to the Bureau of Building, 250 Frank Ogawa Plaza, 2nd Floor 8:00 a.m. – 9:30 a.m. Mon, Tues, Wed, Thurs, Friday or 9:30 a.m. – 10:00 a.m. Wed. (Bring your approved plans and this Correction Notice)
2. **Do Not** conceal any work until "Ok to Pour/Ok to Cover" is signed by the City on the Permit Inspection card.
3. **To approve** a field revision, bring your approved plans; 3 copies of your revision, your Correction Notice, calculations/certification/reports/etc. and review fees to the Inspection Counter between 8:00 a.m. – 9:30 a.m.
4. All permits will expire unless major inspections are approved by the City every six (6) months (or sooner).
5. Building, Electrical, Plumbing and Mechanical inspections must be scheduled separately, well in advance, 510-238-3444.
6. Additional fees will be charged for additional jobsite visits after your "pre-paid limit" is exceeded. Cashiering 510-238-4774
7. Inspection cancellations received after 10:00 a.m. on the scheduled inspection date will be deducted from the pre-paid jobsite visits.

① Provide AIC letter from PGE.

② Patch studs at service locations.

③ WH bonding in unit B OK.

S. Johnson
Inspector

sejohnson@oaklandnet.com
Email

(510) 238- 3914
Telephone

| Log Date | Log Action | Operator | Record ID | Record Type | Inspection Status | Scheduled Date | Request Comment | Inspection Date | Inspector | Result | Con Request Date | Submit Date | Department | Alternate ID | Requestor | Inspection Sequence Number |
|----------------|------------|-----------|-------------------|--|-------------------|----------------|-----------------|-----------------|------------------|-----------|------------------|----------------|--------------------|--------------|---------------|----------------------------|
| 1/14/2016 8:59 | Update | AHARBAUGH | 15CAP-00000-33864 | Building/Residential/Electrical/Alteration | Frame | Pass | 1/13/2016 0:00 | 1/13/2016 12:30 | Anthony Harbaugh | green tag | 1/14/2016 8:57 | 1/14/2016 8:57 | Permit Residential | RE1503461 | Maurice Early | 7818647 |
| 1/14/2016 8:57 | Update | MEARLY | 15CAP-00000-33864 | Building/Residential/Electrical/Alteration | Frame | Scheduled | 1/13/2016 0:00 | | Anthony Harbaugh | | 1/14/2016 8:57 | 1/14/2016 8:57 | Permit Residential | RE1503461 | Maurice Early | 7818647 |
| 1/14/2016 8:56 | Create | MEARLY | 15CAP-00000-33864 | Building/Residential/Electrical/Alteration | Frame | Pending | | | | | 1/14/2016 8:56 | | | RE1503461 | Maurice Early | 7818647 |

Russell, Simon

From: Espinosa, Thomas
Sent: Tuesday, March 01, 2016 10:22 AM
To: eawrentals@aol.com
Subject: FW: Send data from MFP11219019 03/01/2016 11:09
Attachments: DOC030116.pdf

-----Original Message-----

From: Building Services [mailto:BuildingServices_Toshiba32412@oaklandnet.com]
Sent: Tuesday, March 01, 2016 11:10 AM
To: Espinosa, Thomas
Subject: Send data from MFP11219019 03/01/2016 11:09

Scanned from MFP11219019
Date:03/01/2016 11:09
Pages:5
Resolution:300x300 DPI

Document sent from Toshiba copier. Please do not reply to this message

**[DOC030116.p
df]**

| | |
|----------|--|
| \$300 | for previous Electrical Final 857-859 need |
| \$300 | 877 27th Final |
| \$250 | For Elec AOP on permit 875 27th |
| \$300 | Rough 875 27th |
| \$300 | Final 875 27th |
| \$210.56 | Re issue expired RP 1501661 857 need |
| \$196.97 | Re issue expired RE 1502087 857 need |

Total

RP1501661 Renew Permit \$210.56

Record ID: RP1501661

Menu Reports Help

Application Type: Residential Plumbing - Alteration**Address:** 857 MEAD AVE**Parcel No:** 003 001301900**Description of Work:** Plumbing for remodel.**File Date:** 06/24/2015**Application Status:** Expired**Job Value:** \$0.00**Total Fee Assessed:** \$210.56**Total Fee Invoiced:** \$210.56**Balance:** \$0.00**IF THIS IS A PRIORITY LIEN, REFER TO THE LIEN BALANCE BELOW****Owner Name:** WILLIAMS ELIZABETH A**Owner Address:** PO BOX 1436, SAN MARTIN, CA 950461436

| Contact Info: | Name | Organization Name | Contact Type | Relationship | Address |
|---------------|------------------|-------------------|--------------|--------------|----------|
| | <u>WILLIAMS</u> | | Applicant | Owner- | PO BOX |
| | <u>ELIZAB...</u> | | Builder | | 1436, |
| | | | | | SAN |
| | | | | | MARTI... |

Licensed Professionals Info: Primary License Number License Type Name Business Name Business License #

| Workflow Status: | Task | Assigned To | Status | Status Date | Action By |
|------------------|--------------------|-------------|----------|-------------|-----------|
| | <u>Application</u> | | OTC | 06/24/2015 | Wing Loo |
| | <u>Intake</u> | | Issuance | | |
| | Plan | | | | |
| | Routing | | | | |
| | <u>Permit</u> | | Issued | 06/24/2015 | Wing Loo |
| | <u>Issuance</u> | | | | |
| | <u>Inspection</u> | | | | |
| | Plan | | | | |
| | Review | | | | |
| | Final Check | | | | |
| | Post | | | | |
| | Constructi... | | | | |

Custom Fields: App Spec Info_RP

GENERAL INFORMATION

Sets of Plans

Calculations

Occupancy Group

Building Use

I

RE 1502087 Renew Permit

\$196.97

Record ID: RE1502087

Menu Reports Help

Application Type: Residential Electrical - AlterationAddress: 857 MEAD AVEParcel No: 003 001301900Description of Work: Electrical for remodel including new subpanel in unit 857B.File Date: 06/24/2015Application Status: ExpiredJob Value: \$0.00Total Fee Assessed: \$206.32Total Fee Invoiced: \$196.97Balance: \$0.00

IF THIS IS A PRIORITY LIEN, REFER TO THE LIEN BALANCE BELOW

Owner Name: WILLIAMS ELIZABETH AOwner Address: PO BOX 1436, SAN MARTIN, CA 950461436

| Contact Info: | Name | Organization Name | Contact Type | Relationship | Address |
|---------------|------------------|-------------------|--------------|--------------|----------|
| | <u>WILLIAMS</u> | | Applicant | Owner- | PO BOX |
| | <u>ELIZAB...</u> | | | Builder | 1436, |
| | | | | | SAN |
| | | | | | MARTI... |

Licensed Professionals Info: Primary License Number License Type Name Business Name Business License #

| Workflow Status: | Task | Assigned To | Status | Status Date | Action By |
|------------------|----------------------|-------------|----------|-------------|-----------|
| | <u>Application</u> | | OTC | 06/24/2015 | Wing Loo |
| | <u>Intake</u> | | Issuance | | |
| | <u>Plan</u> | | | | |
| | <u>Routing</u> | | | | |
| | <u>Permit</u> | | Issued | 06/24/2015 | Wing Loo |
| | <u>Issuance</u> | | | | |
| | <u>Inspection</u> | | | | |
| | <u>Plan</u> | | | | |
| | <u>Review</u> | | | | |
| | <u>Final Check</u> | | | | |
| | <u>Post</u> | | | | |
| | <u>Constructi...</u> | | | | |

No record(s) updated by expression.

Custom Fields: App Spec Info_RE

GENERAL INFORMATION

PGE Application Number

110604591

Title 24 Energy Calc for Electrical Heater

Sets of Plans

Calculation

Record ID: RB1504824

Menu

Reports

Help

Application Type: Residential Building - AlterationAddress: 877 27TH STParcel No: 003 000502300Description of Work: Kitchen and bathroom remodelFile Date: 11/10/2015Application Status: IssuedJob Value: \$8,000.00Total Fee Assessed: \$656.87Total Fee Invoiced: \$656.87Balance: \$0.00**IF THIS IS A PRIORITY LIEN, REFER TO THE LIEN BALANCE BELOW**Owner Name: WILLIAMS ELIZABETH AOwner Address: PO BOX 1436, SAN MARTIN, CA 950461436

Contact Info: Name Organization Name Contact Type Relationship Address

WILLIAMS

Applicant

Owner-

PO BOX

ELIZAB...

Agent

1436,

SAN

MARTI...

Licensed Professionals Info: Primary License Number License Type Name Business Name Business License #

Workflow Status: Task Assigned To Status Status Date Action By

Application

OTC

11/10/2015

Robert

Intake

Pili

Plan Routing

Plan Check

Review

Zoning Review

Zoning Inspecti...

Fire Marshal Re...

Constr.Recyclin... Patrick
Hayes

CP Permit

Compl...

Final Check

Permit Issuance

Issued 11/10/2015

Robert

Pili

Inspection

Certificate of ...

Post Constructi...

Custom Fields: **BLD_RBB_ALT**

Sets of Plans

Change of Address

Structural Calculations

Record ID: RB1403610

Menu

Reports

Help

Final \$300

Application Type: Residential Building - Alteration**Address:** 857 MEAD AVE**Parcel No:** 003 001301900**Description of Work:** Unit B: Kitchen & bathroom remodel including construction of partition walls to enclose water heater in kitchen stucco on left side. (add \$7000) DRX150994**File Date:** 12/10/2014**Application Status:** Permit Issued**Job Value:** \$10,000.00**Total Fee Assessed:** \$1,324.84**Total Fee Invoiced:** \$1,324.84**Balance:** \$0.00**IF THIS IS A PRIORITY LIEN, REFER TO THE LIEN BALANCE BELOW****Owner Name:** WILLIAMS ELIZABETH A**Owner Address:** PO BOX 1436, SAN MARTIN, CA 950461436

| Contact Info: | Name | Organization Name | Contact Type | Relationship | Address |
|---------------|------------------|-------------------|--------------|--------------|----------|
| | <u>WILLIAMS</u> | | Applicant | Owner- | PO BOX |
| | <u>ELIZAB...</u> | | | Builder | 1436, |
| | | | | | SAN |
| | | | | | MARTI... |

Licensed Professionals Info: Primary License Number License Type Name Business Name Business License #

| Workflow Status: | Task | Assigned To | Status | Status Date | Action By |
|------------------|---------------------------|---------------|--------|-------------|-----------|
| | <u>Application</u> | | Intake | 06/24/2015 | Wing Loo |
| | <u>Intake</u> | | Co... | | |
| | <u>Plan Routing</u> | | | | |
| | <u>Final Check</u> | | | | |
| | <u>Permit Issuance</u> | | Issued | 06/24/2015 | Wing Loo |
| | <u>Inspection</u> | | | | |
| | <u>Plan Check</u> | | | | |
| | <u>Review</u> | | | | |
| | <u>Zoning Review</u> | | | | |
| | <u>Zoning Inspecti...</u> | | | | |
| | <u>Fire Marshal Re...</u> | Hilda Ortiz | | | |
| | <u>Constr.Recyclin...</u> | | | | |
| | <u>CP Permit</u> | | | | |
| | <u>Compl...</u> | | | | |
| | <u>Certificate of ...</u> | | | | |
| | <u>Post Constructi...</u> | Rafael Campos | | | |

Custom Fields: BLD_RBB_ALT

Sets of Plans

Change of Address

Structural Calculations

Verizon

12:00 PM

57%



(510) 410-2780

Good morning hope you feel better
got to trim painting going alder
wood works been prepped and
started to tile things come along
really good love you

Dec 23, 2015, 9:32 AM

Looks good. What is up with the
electric on Mead?

I spoke with Gwen. She has a 12:00
appointment. You have permission
to enter.

Thank you

YW!

Dec 23, 2015, 3:58 PM



Text Message



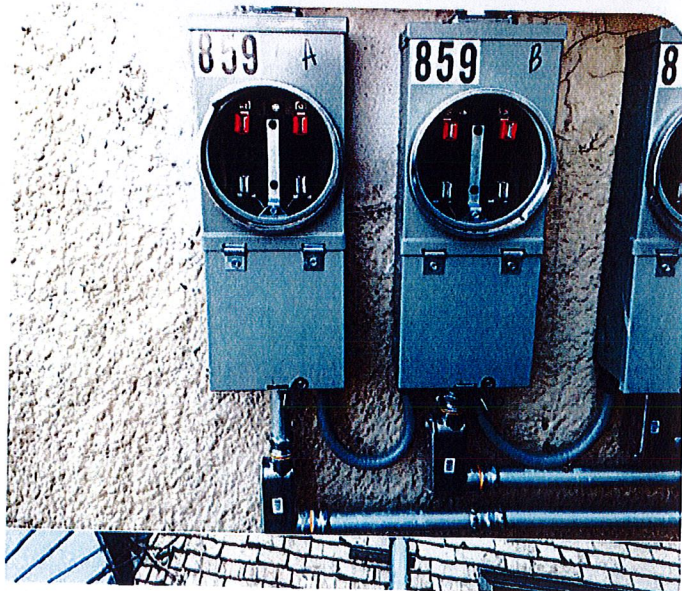
Verizon

12:00 PM

57%



(510) 410-2780



Text Message



Verizon

12:00 PM

57%



(510) 410-2780



Text Message



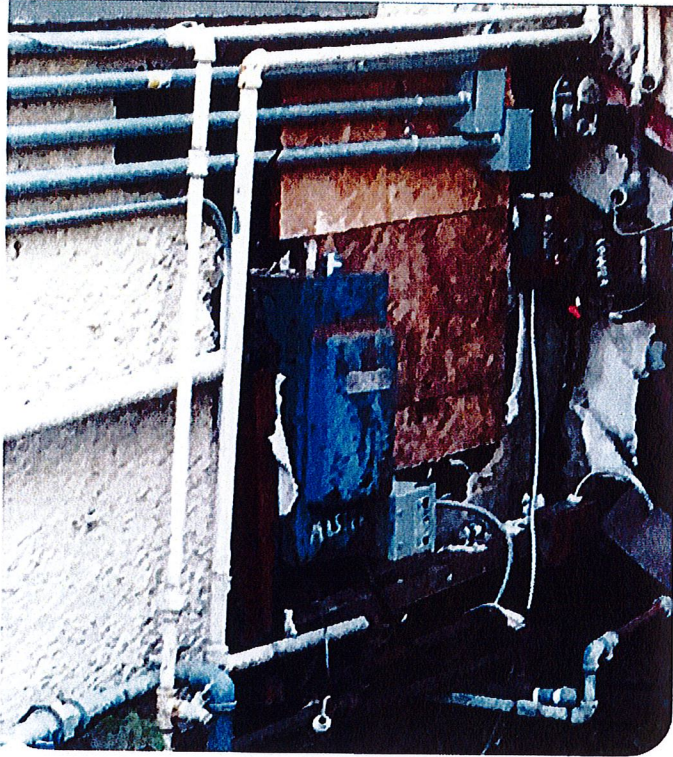
Verizon

12:00 PM

57%



(510) 410-2780



Dec 24, 2015, 1:06 PM

| Person | Fri | Sat | Sun | Mon | Tues | Wed | Thurs | Total | Wage |
|--|-----|-----|-----|-----|------|-----|-------|-------|------|
| Thomas E | 10 | 12 | 10 | 8 | 8 | 10 | 8 | 66 | 20 |
| Arnold | 12 | 8 | 9 | 12 | 12 | 12 | 10 | 75 | 23 |
| etman | 12 | 8 | 9 | 12 | 12 | 12 | 10 | 75 | 14 |
| Vill | | | | 10 | 10 | 8 | 8 | 36 | 17 |
| Material \$58. | | | | | | | | | |
| Total to Evone \$600.00 EW \$2300.00 TAE | | | | | | | | | |
| Balance to Evone \$800.00 | | | | | | | | | |
| Total TAE \$2300.00 | | | | | | | | | |



Text Message





(510) 410-2780

Jan 11, 2016, 6:59 PM

Well this is upsetting, arnold needs the money for bail, everything is that if everything looked bad why didnt derek say anything in the house looked good, we went 2 weeks without pay, but what i dont understand And we really need the money by tommorw because i need to pay bills light bill they áre gonna cut it off Tommorw

Jan 12, 2016, 9:56 AM

Please call me about Mead

Please call me back when you will talk with me rather than talk over me.

I also expect the green tags for Mead to be there today. You stated it was already done.

Hello Elizabeth most important thing I want you to understand is I love you I love everything you've done for me I think you're great
 never I talk to all the people there



Text Message





(510) 410-2780

Hello Elizabeth most important thing I want you to understand is I love you I love everything you've done for me I think you're great person I talk to all the people there Garichin everybody and they say yeah they don't know why I should have to be sanded down over do... >

As I stated many times we will discuss this in person. But I still need the Mead stickers. You told me this was already handled. This is one of the reasons why the electricity is STILL not on at Mead.

Hi Elizabeth I gave Gary the sticker when I left so I will have to talk to hardball to go put another one on tomorrow OK bye bye hon

Hi Elizabeth I gave Gary the sticker when I left so I will have to talk to hardball to go put another one on tomorrow OK bye bye hon

Who is Gary? Please get this sticker handled and make sure it is verified in the City records. We are still friends! We need to and will



Text Message





(510) 410-2780

Who is Gary? Please get this sticker handled and make sure it is verified in the City records. We are still friends! We need to and will work this out.

Jan 12, 2016, 11:39 AM

That's a good thing I know that and I was just shocked by this I always put my best foot forward and I just feel hurt that you didn't please you and make sure that's on the morning bye

Jan 13, 2016, 10:21 AM

Say sogood morning a call Derek and I called you no answer's inspectors going over there I need the paperwork he needs the paperwork they gave

I don't have paperwork you were handling this

Jan 13, 2016, 12:52 PM



Text Message





(510) 410-2780

Jan 13, 2016, 12:52 PM



So there it is and I'm paying right now the 300 call me



Text Message





(510) 410-2780

OK

Jan 21, 2016, 9:27 AM

I won't be able to make Elizabeth
dime would let me use the car so
sorry take care I don't really know
where were at with anything so if
you have anything you want to do
over the phone let me know if
you're going to be around

Jan 22, 2016, 9:58 AM

Good morning Elizabeth this is
Tommy so I still don't know what's
going on and appears most basic so
I guess I shouldn't be wasting my
time looking for other projects are
and you appear to feel justified not
to Pay me for the last workout or
the guys well I have your keys so I
guess I'll drop them off with one of
your guys today do you think I have
the \$300 coming that I paid for the
inspector on your electrical if so
could you deposit that for me thank
you again for everything call me
when you need me your friend
Tommy



Text Message





Update Results



CITY OF OAKLAND

Address History with Inspection Log

CONTACT_TYPE = Complainant, Neighbor, Tenant/Occupant, Applicant, Lienee

CONTACT_TYPE = Blank

STREET_NBR = 2735

STREET_NAME : Begins With market

STREET_TYPE : Begins With

APN = ----

DATE_OPENED >=

DATE_OPENED <= 12/31/2017

RECORD_TYPE_SUBTYPE <> Soft Story Retrofit Validation

RECORD_TYPE_TYPE <> Lien

Record ID: 1402577**Address: 2735 Market ST****APN: 005 045100400****Unit #:**

Description: Unit# 2735 Work without permits: Bathroom, kitchen, laundry room, electrical, plumbing & building permits required.

Date Opened: 7/9/2014**Record Status: Violation Verified****Record Status Date: 7/8/2014****Job Value: \$0.00****Requestor:**

:

Business Name:**License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------------|--------------------|-----------------|
| 7/8/2014 | Greg Clarke | 1st Inspection | Violation Verified | |
| 8/8/2014 | Greg Clarke | Follow-up Inspection | No Abated | |
| 9/10/2014 | Greg Clarke | Follow-up Inspection | Abated | |
| 10/10/2014 | Greg Clarke | Follow-up Inspection | No Abated | |
| 12/17/2014 | Greg Clarke | Follow-up Inspection | No Abated | |
| 1/20/2015 | Greg Clarke | Monitoring Inspection | No Progress | |
| 2/20/2015 | Greg Clarke | Monitoring Inspection | No Progress | |
| 3/20/2015 | Greg Clarke | Monitoring Inspection | No Progress | |
| 5/7/2015 | Greg Clarke | Monitoring Inspection | Partial Compliance | |
| 6/8/2015 | Greg Clarke | Monitoring Inspection | No Progress | |
| 7/8/2015 | Greg Clarke | Monitoring Inspection | No Progress | |
| 8/7/2015 | Greg Clarke | Monitoring Inspection | No Progress | |
| 9/18/2015 | Greg Clarke | Monitoring Inspection | No Progress | |
| 10/15/2015 | Greg Clarke | Monitoring Inspection | Partial Compliance | |
| 11/4/2015 | Greg Clarke | Monitoring Inspection | Partial Compliance | |
| 12/4/2015 | Greg Clarke | Monitoring Inspection | Partial Compliance | |
| 1/7/2016 | Greg Clarke | Follow-up Inspection | Partially Abated | |

| | | | |
|----------|--------------|-----------------------|--------------------|
| 2/9/2016 | Greg Clarke | Monitoring Inspection | Partial Compliance |
| | Greg Clarke | Follow-up Inspection | Cancelled |
| | Tom Espinosa | Follow-up Inspection | Cancelled |
| | Tom Espinosa | Follow-up Inspection | Cancelled |

Record ID: [9403607](#)**Address: 2735 MARKET ST****APN:****Unit #:**

Description: ROOF CAVING IN, WINDOWS BROKEN, ROOF LEAKING

Date Opened: 12/15/1994**Record Status: Closed****Record Status Date: 1/24/1995****Job Value: \$0.00****Requestor: LYNETTE VAUGHN****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

Record ID: [9500790](#)**Address: 2735 MARKET ST****APN:****Unit #:**

Description: NO ENTRY-02/02/95 #90 NO ONE HOME

Date Opened: 1/27/1995**Record Status: Closed****Record Status Date: 3/23/1995****Job Value: \$0.00****Requestor: MS. VAUGHN****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

Record ID: [B1504047](#)**Address: 2735 MARKET ST, #2735****APN: 005 045100400****Unit #: 2735**

Description: Unit# 2735 - Work without permits: Non-structural remodel of bathroom, kitchen, laundry room to abate CE# 1402577

Date Opened: 9/22/2015**Record Status: Final****Record Status Date: 11/23/2015****Job Value: \$50,000.00****Requestor: WILLIAMS ELIZABETH A****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|---|
| 9/29/2015 | Bill Bergstrom | Field Check | Need More Info | Date: 9/28/2015 This Field check was canceled by contractor over the phone. This inspection should be done by either Bill Bergstrom or Gregory Clarke. |
| 10/14/2015 | Bill Bergstrom | Field Check | Need More Info | Date: 10/13/2015 Inspection canceled by contractor. Only Bill Bergstrom or Greg Clarke can do Field check. |
| 10/16/2015 | Bill Bergstrom | Field Check | Need More Info | Date: 10/16/2015 See correction notice in attachments. At time of inspection contractor was under the assumption that he had an issued permit. I explaining to him that this is a field check to see the conditions under which we would issue a permit. I left him a correction notice explaining what would |

needed to be opened up for a field check. The contractor had only the most rudimentary English skills I explain to him and some of the other workers on the site that they did not have an active permit, that they would need to expose the work that had been done and covered with out inspections before the field check could be done. Correction notice 1. The address associated with complaint #1402577 is unit 2737 Market St. (917 28th st. Is another building located at the rear corner of this complex and should not be used in referring to this complaint or the permit application.) 2. Remove all sheet rock on walls and ceiling that have been covers before inspection. 3. Remove floor covering and expose. Work has been done under the floor. 4. Reschedule this field check after the above items have been completed.

| | | | | |
|------------|------------------|----------------|---------|--------------------------|
| 11/4/2015 | Anthony Harbaugh | Frame | Pass | rough frame ok to cover. |
| 11/20/2015 | Anthony Harbaugh | Final Building | Partial | final ok |
| | | Final Building | Pending | |

Record ID: [E1503460](#)**Address: 2735 MARKET ST, #2735****APN: 005 045100400****Unit #: 2735****Description: Electrical/ Unit# 2735 - Work without permits: Non-structural remodel of bathroom, kitchen, laundry room to abate CE# 1402577 - 100amp service upgrade****Date Opened: 10/22/2015****Record Status: Final****Record Status Date: 11/23/2015****Job Value: \$0.00****Requestor: Ivonne Gomez - Agent****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|------------------------|-----------------------|------------------------|------------------------|-------------------------------------|
| 11/4/2015 | Anthony Harbaugh | Frame | Pass | wire, box make up and sub panel ok. |
| 11/20/2015 | Anthony Harbaugh | Final Electrical | Pass | final ok |

Record ID: [P1502734](#)**Address: 2735 MARKET ST, #2735****APN: 005 045100400****Unit #: 2735****Description: Plumbing/Unit# 2735 - Work without permits: Non-structural remodel of bathroom, kitchen, laundry room to abate CE# 1402577****Date Opened: 10/22/2015****Record Status: Final****Record Status Date: 11/23/2015****Job Value: \$0.00****Requestor: Ivonne Gomez - Agent****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|------------------------|-----------------------|------------------------|------------------------|-------------------------------------|
| 11/4/2015 | Anthony Harbaugh | Frame | Pass | DWV water and gas pipe ok to cover. |
| 11/20/2015 | Anthony Harbaugh | Final Plumbing | Pass | final ok |

**For real-time, direct access to
information via the Internet, 24 hours a
day - <https://aca.accela.com/oakland>**



Update Results



CITY OF OAKLAND

Address History with Inspection Log

CONTACT_TYPE = Complainant, Neighbor, Tenant/Occupant, Applicant, Lienee

CONTACT_TYPE = Blank

STREET_NBR = 917

STREET_NAME : Begins With 28th

STREET_TYPE : Begins With

APN = ----

DATE_OPENED >=

DATE_OPENED <= 12/31/2017

RECORD_TYPE_SUBTYPE <> Soft Story Retrofit Validation

RECORD_TYPE_TYPE <> Lien

Record ID: 0800471**Address: 917 28TH ST****APN: 005 045100400****Unit #:****Description:** RAW SEWAGE SPILLING ONTO SIDEWALK FOR THE LAST 3 WEEKS.**Date Opened: 1/28/2008****Record Status: Abated****Record Status Date: 2/19/2008****Job Value: \$0.00****Requestor:****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|--------------------|-----------------|--------------------|---|
| 1/29/2008 | WILLIAM M MORIARTY | 1st Inspection | Violation Verified | VERIFIED COMPLAINT / SEWER STOPPAGE - CORRECTED PTS ADDRESS |
| 2/6/2008 | WILLIAM M MORIARTY | 1st Inspection | No Violations | SEWER WORKED ON SITE NOW REPAIRING BROKEN SEWER LATERAL W/ PERMIT |
| 2/14/2008 | WILLIAM M MORIARTY | 1st Inspection | No Entry | Scheduled inspection voided by result code 98 on 02/19/08 |
| 2/19/2008 | WILLIAM M MORIARTY | 1st Inspection | Violation Verified | NEW SEWER INSTALLED - CLOSE AS ABATED |

Record ID: 1301545**Address: 917 28TH ST****APN: 005 045100400****Unit #:****Description:** PLUMBING PROBLEMS(2727 MARKET ST)**Date Opened: 3/26/2013****Record Status: Abated****Record Status Date: 5/22/2013****Job Value: \$0.00****Requestor:**

:
Business Name:
License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|--------------------|-----------------|--------------------|------------------|
| 3/27/2013 | ANTHONY L HARBAUGH | 1st Inspection | Violation Verified | NOV |
| 4/4/2013 | ANTHONY L HARBAUGH | 1st Inspection | No Entry | MATCH NOV |
| 5/6/2013 | ANTHONY L HARBAUGH | 1st Inspection | No Entry | VM |
| 5/14/2013 | ANTHONY L HARBAUGH | 1st Inspection | No Entry | VM |
| 5/22/2013 | ANTHONY L HARBAUGH | 1st Inspection | Violation Verified | COMPLAINT ABATED |

Record ID: [1400914](#)

Address: 917 28TH ST

APN: 005 045100400

Unit #:

Description: CEILING IN BATHROOM HAS FALLEN IN, CEILING IN BEDROOM LEAKING WATER, MOLD, NO HEAT IN UNIT, CARPET IS OLD & DAMAGED, ELECTRICAL PROBLEMS, ALSO CONSTRUCTION TO BUILDING W/OUT PERMITS. TENANT'S ACTUAL ADDRESS IS 2731 MARKET ST

Date Opened: 2/21/2014

Record Status: Violation Verified

Record Status Date: 2/26/2014

Job Value:

Requestor:

: DANIELLE JOHNSON

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|------------------|--|---------------------|--|
| 2/24/2014 | Anthony Harbaugh | 1st Inspection | Unable to Verify | Left voicemail for a return call from tenant to schedule inspection. |
| 3/31/2014 | Anthony Harbaugh | Follow-up Inspection 1st Inspection | Abated Scheduled | POC received closing case. |

Record ID: [1400963](#)

Address: 917 28TH ST

APN: 005 045100400

Unit #:

Description: HOLES IN WALLS & CEILINGS, BROKEN WINDOWS, MOLD PRESENT

Date Opened: 2/27/2014

Record Status: Violation Verified

Record Status Date: 3/4/2014

Job Value:

Requestor:

: VERONICA GARZA

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|------------------|--|---------------------|--|
| 3/4/2014 | Anthony Harbaugh | 1st Inspection | Violation Verified | Visited site and verifeid complaint sending owner a NOV to make repairs. |
| 4/7/2014 | Anthony Harbaugh | Follow-up Inspection 1st Inspection | Abated Scheduled | POC received closing case. |

Record ID: [9501637](#)

Address: 917 28TH ST

APN: 005 045100400

Unit #:

Description: VACANT, UNSECURE. FINDINGS: VERIFIED, FAXED H-39 TO MR. LEE AT 1814FRANKLIN ST., OAK. FANNIE MAE OWNS PROPERTY.

Date Opened: 3/3/1995

Record Status: Closed

Record Status Date: 6/2/1995

Job Value: \$0.00

Requestor: ABH

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

Record ID: [B1400890](#)**Address: 917 28TH ST****APN: 005 045100400****Unit #:**

Description: remodel kitchen in unit addressed as 2735 - cmplt. #1402577

Date Opened: 7/16/2014**Record Status: Expired****Record Status Date: 12/12/2015****Job Value: \$5,000.00****Requestor: WILLIAMS ELIZABETH A**

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

| | | | | |
|----------|----------------|-------------|----------------|--|
| 8/4/2014 | Bill Bergstrom | Field Check | Need More Info | Date: 8/4/2014 Field check notes 8/4/14 LIFE SAFETY ISSUE: There is a new flexible signal wall duct running through the kitchen wall cavity from the unit below where an oval B vent should be. This situation must be addressed immediately, wherever it exists in the building. permits pulled and work inspected. 1. Permits required building electrical plumbing & mechanical. 2. Provide layout of kitchen showing location of cabinets, appliances water heater, switches receptacles and lighting 3. Change permit description to full remodel of unit. 4. Increase valuation to \$40,000 5. Remove all new sheet rock from walls and ceiling 6. Have all areas of floors open where work has been done. 7. Call for inspections of building electric plumbing and mechanical when all work is exposed. WMB x4775 |
|----------|----------------|-------------|----------------|--|

Jorge Reyes

Field Check

Cancelled

Record ID: [B1401426](#)**Address: 917 28TH ST, #911 & 915****APN: 005 045100400****Unit #: 911 & 915**

Description: Non structural kitchen and bath remodel for units 911 and 915. No exterior work & no change to wall layout

Date Opened: 12/10/2014**Record Status: Final****Record Status Date: 7/22/2015****Job Value: \$7,500.00****Requestor: WILLIAMS ELIZABETH A**

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

| | | | | |
|-----------|-------------------|-------|----------|--|
| 5/13/2015 | Bill Bergstrom | Frame | Not Pass | Date: 5/13/2015 Correction notice for unit 915 see attachments |
| 5/21/2015 | Steve Brandeberry | Frame | Partial | Date: 5/21/2015 -Frame at unit 915 (stud shoes) verified by WXM during plumbing inspection. -Sheet rock repair okay at unit 915. -Tub shower wall repair okay at unit 915 |
| 6/3/2015 | Steve Brandeberry | Frame | Partial | Date: 6/3/2015 -Frame and insulation at unit 911 okay to cover less environmental air duct protection in floor ceiling -subject to |

| | | | |
|-----------|-------------------|----------------|---------|
| 6/10/2015 | Steve Brandeberry | Frame | Partial |
| 7/9/2015 | Jorge Reyes | Final Building | Partial |

plumbing and mechanical approval. -Okay to sheet rock and install tile backer after plumbing and mechanical and leave environmental air duct protection exposed for next inspection

Date: 6/10/2015 EAD protection, sheet rock and tub/ shower walls at unit # 911 okay.
Date: 7/9/2015 Final inspection OK pending final trades

Record ID: B1504057**Address: 917 28TH ST****APN: 005 045100400****Unit #:****Description:** Remodel kitchens and bathroom for units 2721 market St, 2725 Market St, and 2727 Market St.**Date Opened: 9/23/2015****Record Status: Expired****Record Status Date: 6/8/2016****Job Value: \$20,000.00****Requestor: WILLIAMS ELIZABETH A****: Ivonne Gomez****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|-------------------|-----------------|--------------------|--|
| 10/6/2015 | Steve Brandeberry | Frame | Partial | Date: 10/6/2015 Unit 2721 ok to cover. |
| 10/7/2015 | Steve Brandeberry | Frame | Cancelled In Field | Date: 10/7/2015 Inspection canceled in the a.m. by contractor. |
| 10/29/2015 | Bill Bergstrom | Final Building | Partial | Date: 10/29/2015 Final ok less PSL |
| 11/6/2015 | Bill Bergstrom | Final Building | Partial | Date: 11/3/2015 Final unit 2721 (less electric) |
| 11/20/2015 | Anthony Harbaugh | Frame | Pass | rough ok |
| 12/11/2015 | Anthony Harbaugh | Frame | Pass | final ok for unit 2727. remaining units to come. |
| | Anthony Harbaugh | Final Building | Cancelled | |
| | | Frame | Pending | |
| | | Final Building | Pending | |
| | | Frame | Pending | |

Record ID: E1401068**Address: 917 28TH ST, #911 & 915****APN: 005 045100400****Unit #: 911 & 915****Description:** Electrical for non structural kitchen and bath remodel for units 911 and 915. Lights to remain**Date Opened: 12/10/2014****Record Status: Final****Record Status Date: 7/21/2015****Job Value: \$0.00****Requestor: WILLIAMS ELIZABETH A****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|------------------|-----------------|---|
| 5/19/2015 | Joel Garcia | Frame | Partial | Rough OK unit 915 |
| 6/3/2015 | Joel Garcia | Frame | Partial | Date: 6/3/2015 Unit 911 rough ok. Sub-panel at final |
| 7/9/2015 | Joel Garcia | Final Electrical | Not Pass | Date: 7/9/2015 AFCI protection as required, all kitchen receptacles shall be GFCI type, dedicated bathroom circuit. "Units 911 and 915" |
| 7/21/2015 | Joel Garcia | Final Electrical | Pass | Date: 7/21/2015 Final ok |
| | Joel Garcia | Frame | Cancelled | |
| | | Final Electrical | Pending | |
| | Joel Garcia | Frame | Scheduled | |

Record ID: [E1503122](#)**Address: 917 28TH ST****APN: 005 045100400****Unit #:**

Description: ELECTRICAL to remodel kitchens and bathroom for units 2721 market St, 2725 Market St, and 2727 Market St.

Date Opened: 9/23/2015**Record Status: Final****Record Status Date: 10/29/2015****Job Value: \$0.00****Requestor: WILLIAMS ELIZABETH A****: Ivonne Gomez****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|------------------|-----------------|---|
| 10/6/2015 | Joel Garcia | Frame | Partial | Date: 10/6/2015 Rough ok. Sub-panel feeders T-C |
| 10/29/2015 | Joel Garcia | Final Electrical | Pass | Date: 10/29/2015 Counter receptacles per 2'4' rule Lighting controls per title 24 |

Record ID: [P1400789](#)**Address: 917 28TH ST, #911 & 915****APN: 005 045100400****Unit #: 911 & 915**

Description: Plumbing for non structural kitchen and bath remodel for units 911 and 915.

Date Opened: 12/10/2014**Record Status: Final****Record Status Date: 7/16/2015****Job Value: \$0.00****Requestor: WILLIAMS ELIZABETH A****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|------------------|-----------------|---------------------|---|
| 3/20/2015 | William Moriarty | Frame | Cancelled In Office | Date: 3/20/2015 Inspection cancelled in office per Karen. |
| 5/13/2015 | William Moriarty | Frame | Partial | Date: 5/13/2015 In wall plumbing inspection for upper unit #915. Bathtub will need either a fire rated access door or no slip-nuts. Automatic washer standpipe requires P-trap existing drain is 1-1/2" inch and is existing non-conforming. Okay to close floor and walls for second-floor alterations, leave access for tub test. |
| 5/19/2015 | William Moriarty | Frame | Partial | Date: 5/19/2015 Tub test for unit #915 (upper unit). Tub test OK, upper unit okay to close walls. Unit #911 (lower unit) tub test to come. |
| 6/3/2015 | William Moriarty | Frame | Pass | Date: 6/3/2015 Tub test completed on unit 911 first floor unit. Unit 915 and 911 tub test now complete and all in wall rough plumbing complete. Okay given to close walls both units pending building and electrical approval. |
| 7/9/2015 | William Moriarty | Final Plumbing | Not Pass | Date: 7/9/2015 Corrections required, WH too high for safely servicing. Water heater disconnect and bonding. See attached C/N. |
| 7/16/2015 | William Moriarty | Final Plumbing | Pass | Date: 7/16/2015 Final inspections completed. |

Record ID: [P1502470](#)**Address: 917 28TH ST****APN: 005 045100400****Unit #:**

Description: PLUMBING to remodel kitchens and bathroom for units 2721 market St, 2725 Market St, and 2727 Market St.

Date Opened: 9/23/2015

Record Status: Final**Record Status Date: 10/29/2015****Job Value: \$0.00****Requestor: WILLIAMS ELIZABETH A****: Ivonne Gomez****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|------------------|-----------------|-----------------|---|
| 10/6/2015 | Kevin Martin | Frame | Pass | Date: 10/6/2015 Rough ok to cover. Water heater to come. Need toCheck clearances for water heater by windows. Tub test ok.KM. |
| 10/29/2015 | William Moriarty | Final Plumbing | Pass | Date: 10/29/2015 Unit #2721 final inspections completed and approved. |

Record ID: [P1601306](#)**Address: 917 28TH ST****APN: 005 045100400****Unit #:****Description: Rerouting water main servicing unites #911 and #913****Date Opened: 5/12/2016****Record Status: Expired****Record Status Date: 11/15/2016****Job Value: \$0.00****Requestor: DERRICK CANADA - LOA****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|------------------|-----------------|-----------------|--|
| 5/17/2016 | William Moriarty | Frame | Pass | Date: 5/17/2016 Inspection of two (2) replaced water services from meter to building connections. Two (2) 3/4" copper water services, OK to cover. Final approved. |

Record ID: [P1602677](#)**Address: 917 28TH ST****APN: 005 045100400****Unit #:****Description: Repair break in sewer lateral.****Date Opened: 9/21/2016****Record Status: Expired****Record Status Date: 3/23/2017****Job Value: \$0.00****Requestor: WILLIAMS ELIZABETH A****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|------------------|-----------------|-----------------|---|
| 11/18/2016 | Kevin Martin | Final Plumbing | Not Pass | Date: 11/18/2016 CN 18nov16: 1) remove all san tees. Install approved combo fittings per code. 2) remove all fernco bands. Install approved adapter bands. 3) install accessible clean out at end of line pointing toward market street. 4) remove all Jim caps. Install ci blind plugs instead. Running test ok since system is live to apartments. KM |
| 12/9/2016 | William Moriarty | Final Plumbing | Not Pass | Date: 12/9/2016 Inspection is for the upper later and is past our jurisdiction of to a point 2' past building line. Contractor has been told to obtain a sewer lateral permit and have Public Works inspection. Material is now 4" ABS and contractor has been informed that this will probably not be approved with plastic piping. See attachment. |
| 12/13/2016 | Kevin Martin | Final Plumbing | Not Pass | |

Date: 12/13/2016 CN items fixed from November inspection. Dec 9th inspection notes not completed. KM

Kevin Martin
Kevin Martin

Final Plumbing
Final Plumbing

Cancelled
Cancelled

Record ID: [R1400107](#)

Address: 917 28TH ST

APN: 005 045100400

Unit #:

Description: RE-ROOFING CERTIFICATE

Date Opened: 1/24/2014

Record Status: Certificate Issued

Record Status Date: 1/24/2014

Job Value: \$0.00

Requestor: ELIZABETH ANN WILLIAMS

:

Business Name:

License #:

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

Record ID: [RB9600521](#)

Address: 917 28TH ST

APN: 005 045100400

Unit #:

Description: Replace all windows, 2 wall heaters and 2 water heaters.

Date Opened: 2/9/1996

Record Status: Final

Record Status Date: 2/27/1996

Job Value: \$2,500.00

Requestor: UNIVERSAL DOORTECH INC

:

Business Name:

License #: 506933

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|--------------------|------------------|--|
| 2/16/1996 | | ROUGH 03P | APPROVED | WINDOWS O.K. - NEED SDS ONLY FOR FINAL |
| 2/16/1996 | | FINAL BUILDING 04P | PARTIAL APPROVAL | |
| 2/16/1996 | | FINAL BUILDING 04P | PARTIAL APPROVAL | |
| 2/16/1996 | | ROUGH 03P | APPROVED | WINDOWS O.K. - NEED SDS ONLY FOR FINAL |
| 2/27/1996 | | FINAL BUILDING 04P | APPROVED | FINAL O.K. |
| 2/27/1996 | | FINAL BUILDING 04P | APPROVED | FINAL O.K. |

Record ID: [RM1200196](#)

Address: 917 28TH ST

APN: 005 045100400

Unit #:

Description: replace 80% furnace

Date Opened: 1/26/2012

Record Status: Final

Record Status Date: 3/14/2012

Job Value: \$0.00

Requestor: OCEANSIDE INVESTMENTS INC

:

Business Name:

License #: 773970

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|----------------------|-----------------|---|
| 3/14/2012 | | FINAL MECHANICAL 04P | APPROVED | DIRECT VENT FURNACE REPLACEMENT - FINAL |

Record ID: [RM9600207](#)

Address: 917 28TH ST**APN: 005 045100400****Unit #:**

Description: Replace two wall heaters and two water heaters.

Date Opened: 2/9/1996**Record Status: Final****Record Status Date: 2/27/1996****Job Value: \$0.00****Requestor: UNIVERSAL DOORTECH INC****:****Business Name:****License #: 506933**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|----------------------|------------------|---|
| 2/13/1996 | | FINAL MECHANICAL 04P | PARTIAL APPROVAL | FINAL O.K. DIR. VENT BOTH UNITS, W.H. #917 ONLY |
| 2/13/1996 | | FINAL MECHANICAL 04P | PARTIAL APPROVAL | FINAL O.K. DIR. VENT BOTH UNITS, W.H. #917 ONLY |
| 2/27/1996 | | FINAL MECHANICAL 04P | APPROVED | FINAL O.K. |
| 2/27/1996 | | FINAL MECHANICAL 04P | APPROVED | FINAL O.K. |

Record ID: [RP0202405](#)**Address: 917 28TH ST****APN: 005 045100400****Unit #:**

Description: Gas test to reset meter at unit 919 of duplex.

Date Opened: 8/14/2002**Record Status: Expired****Record Status Date: 4/25/2003****Job Value: \$0.00****Requestor: JAVIER E. GOMEZ****:****Business Name:****License #:**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
| 8/20/2002 | | GAS TEST 04N | APPROVED | C/N |
| 8/20/2002 | | GAS TEST 04N | APPROVED | C/N |

Record ID: [RP1201230](#)**Address: 917 28TH ST****APN: 005 045100400****Unit #:**

Description: Replace water heater.

Date Opened: 6/4/2012**Record Status: Final****Record Status Date: 8/30/2012****Job Value: \$0.00****Requestor: OCEANSIDE INVESTMENTS INC****:****Business Name:****License #: 773970**

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|--------------------|--------------------|---|
| 6/29/2012 | ROBERT BERNAL | FRAME 03M | NO ACCESS/NO PLANS | R/CINDY,925-551-4700 RQSTS AM NO ACCESS |
| 8/30/2012 | ROBERT BERNAL | FINAL PLUMBING 04P | APPROVED | FINAL OK |

Record ID: [SL0800116](#)**Address: 917 28TH ST****APN: 005 045100400****Unit #:**

Description: . Repair/replace sewer lateral and excavate beyond property line in public right-of-way.

Date Opened: 1/28/2008

Record Status: Final

Record Status Date: 2/7/2008

Job Value: \$0.00

Requestor: TOM MARTIN PLUMBING

:

Business Name:

License #: 831632

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

Record ID: [SL1201548](#)

Address: 917 28TH ST

APN: 005 045100400

Unit #:

Description: Repair/replace sewer lateral and EXCAVATE in PUBLIC RIGHT-OF-WAY. Overflow device may be needed. Call PWA INSPECTION prior to start: 510-238-3651. 4th FLOOR.

Date Opened: 8/8/2012

Record Status: Permit Issued

Record Status Date: 8/8/2012

Job Value: \$0.00

Requestor: PLUMBING MINISTRY, THE

:

Business Name:

License #: 894946

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

Record ID: [SL1301044](#)

Address: 917 28TH ST

APN: 005 045100400

Unit #:

Description: Repair/replace building sewer ON PROPERTY ONLY. SL & X required beyond PL. Overflow device may be needed. Call PWA INSPECTION prior to start: 510-238-3651. 4th FLOOR

Date Opened: 4/3/2013

Record Status: Permit Issued

Record Status Date: 4/3/2013

Job Value: \$0.00

Requestor: PLUMBING MINISTRY, THE

:

Business Name:

License #: 894946

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

Record ID: [X0800216](#)

Address: 917 28TH ST

APN: 005 045100400

Unit #:

Description: . Repair/replace sewer lateral and excavate beyond property line in public right-of-way.

Date Opened: 1/28/2008

Record Status: Permit Issued

Record Status Date: 1/28/2008

Job Value: \$0.00

Requestor: TOM MARTIN PLUMBING

:

Business Name:

License #: 831632

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|-----------------|----------------|-----------------|-----------------|-----------------|
|-----------------|----------------|-----------------|-----------------|-----------------|

Record ID: [X1201567](#)

Address: 917 28TH ST

APN: 005 045100400

Unit #:

Description:

Date Opened: 8/8/2012

Record Status: Permit Issued

Record Status Date: 8/8/2012

Job Value: \$0.00

Requestor: PLUMBING MINISTRY, THE

:

Business Name:

License #: 894946

| Inspection Date | Inspector Name | Inspection Type | Status / Result | Result Comments |
|--|----------------|-----------------|-----------------|-----------------|
| For real-time, direct access to information via the Internet, 24 hours a day - https://aca.accela.com/oakland | | | | |

Applications for which no permit is issued within 180 days shall expire by limitation. No refund more than 180 days after expiration or final.



CITY OF OAKLAND

250 FRANK H. OGAWA PLAZA ■ 2ND FLOOR ■ OAKLAND, CA 94612

Planning and Building Department
www.oaklandnet.com

PH: 510-238-3891
FAX: 510-238-2263
TDD: 510-238-3254

Permit No: B1504047 Non-Residential Building - Alteration

Filed Date: 9/22/2015

Job Site: 917 28TH ST

Schedule Inspection by calling: 510-238-3444

Parcel No: 005 045100400

District:

Project Description: Unit# 2735 Work without permits: Bathroom, kitchen, laundry room, electrical, plumbing & building permits required.

Related Permits: 1402577 L15000112

Full Unit Remodeling

| Name | Applicant | Address | Phone | License # |
|-------------------------------------|-----------|----------------------------|-------|-----------|
| Owner-Builder: WILLIAMS ELIZABETH A | X | PO BOX 1436 SAN MARTIN, CA | | |

PERMIT DETAILS: Non-Residential/Building/Alteration

General Information

Green Code Checklist:

Sets Of Plans: 0
Structural Calculations:

Report - Soil/Geotech:
Energy Calculations (T24):

Proposed Building Information

Building Use: Apartment > 5 Units
Occupancy Group: R-2 Residential > 2 Units
Construction Type: VB - Combustible Construction;
No Fire Rating

Number of Stories:
Number Of Units: 1
No. of Additional Bedrooms:

Fire Sprinklers:
Total Floor Area (sq ft): 0
Additional Floor Area (sq ft):

Work Information

Job Value: \$15,000.00

TOTAL FEES TO BE PAID AT FILING: \$2,726.24

| | | | | | |
|-----------------|----------|-------------------------------|----------|-------------------------------|----------|
| Application Fee | \$70.00 | CBSC | \$0.90 | CITY CBSC | \$0.10 |
| CITY SMIP | \$0.16 | Field Check Inspection | \$202.00 | General Plan Surcharge | \$64.50 |
| Inspection Fee | \$613.00 | Plan Check and Processing Fee | \$809.16 | Records Management Fee | \$225.70 |
| SMIP | \$2.99 | Technology Enhancement Fee | \$124.73 | Work Commenced Without Permit | \$613.00 |

THIS FIELD CHECK TO BE DONE BY
WMB X4775
BILL BERGSTROM
&
GREG CLARK

NB305 MEP PERMITS - 2X FEES

917 28TH ST
(2735 MARKET ST)