

DATE 12/12/84

ADDRESS East side Kanaka Valley Road

LOCATION Rescue

OWNER PATTISON, Betty & GETTY, Richard

BUILDER Von's Trailer Towing

TYPE OF STRUCTURE Hardship Mobilehome

REMARKS

INSPECTIONS:

Temp. power:

P.G.E. Notified: 1-7-85

Plot Plans:

Septic final:

Health Dept. I.D. finalized:

Permit released:

Final all: 1-8-85

n/c

NUMBER 42632

I 1300

~~1984~~

EL DORADO COUNTY BUILDING DEPARTMENT

PERMIT FOR INSTALLATION OF A MOBILE HOME

Date 12-31-84

Name Richard Getty Mobile Home Installer Vons

Address 7315 Dambacher Address P.O. Box 887

City Roseville State Ca. City Pollock Pine State Ca.

Zip Code 95678 Telephone 791-7066 Zip Code 95726 Telephone 644-3171

Assessment Parcel No. 102-04-12 Contractor's License No. Cal. 100

Construction Permit No. _____

Location/Road Kanaka Valley Road 1351

SITE UTILITY SERVICE

MOBILE HOME DATA

NOTE: (a) Utility connections shall be located outside the rear 1/3 of the Mobile Home within 4' of the left wall.

(b) All utilities must be installed prior to placing the Mobile Home on the site.

- 1. Gas Riser Size 3/4"
- 2. Drain Inlet Size 3"
- 3. Elect. Recept. Rating _____
- 4. Power Supply Connect. Rating 100
- 5. Service Equip. Rating _____

- 1. Size: Length 66 Width _____
- 2. Elect: Cord Amp. _____
Power Assem. Amps. _____
- 3. Gas: Size Inlet 3/4"
- 4. Water Conn. Material 1"
- 5. Drain Conn. Material 3 ABC
- 6. Manufacturer Fleetmac
Model 84 Ser. # X Unit _____
Ser. # U Unit _____
- State Insig. No. _____

FINAL INSPECTION DATE 1-7-85
TAGS ISSUED, ELECT. # 7417 GAS # 6629
INSPECTOR [Signature]

Roof Live Load _____ P.S.F.
Wind Load _____ P.S.F.

I am the owner of the property.

I certify that I am a licensed contractor, that my license is in full force and effect, that I have read this application, and that the above information is correct.

Signature _____
Date _____

| ITEM | FEE |
|---------------------------|----------|
| Installation Permit | _____ |
| Total Fees | \$ _____ |
| Receipt No. | _____ |

SUBMITTED TO _____ DATE _____
 HEALTH DEPT 12-5-84
 ROAD DEPT _____
 FIRE DEPT _____
 WATER DIST _____
 PLANS RETURNED _____

EL DORADO COUNTY BUILDING DEPARTMENT
 APPLICATION FOR CONSTRUCTION PERMIT

REC BY _____

PLAN CHECK
 42638
 PERMIT NUMBER

Richard Getty APPLICANT TO COMPLETE

Owner Betty Pattison
 Mailing Address 7315 Dambacher Dr
 City & State Roseville, CA
 Zip 95678 Telephone 791-7769
 Contractor Vons Trailer Towing
 Address Box 887
 City & State Collock Pines
 Zip 95726 Telephone 644-3171
 Class & Lic # 284686 W Comp _____
 Arch Eng _____
 License # _____
 Lending Agency _____
 Branch _____

AP# 102-04-12 TAC# 100030
 Sec 8 TION R 9E Public Sewer No
 Parcel Map # 102 04 Co Road Existing
 No of Bedrooms 2 Perc Test Yes
 Water Source Well Supplier _____

| PLANNING DEPARTMENT USE | | | |
|----------------------------|--------|-------|----------|
| Lot Size | 10.001 | Zone | RC10 |
| Min Setbacks: | FR 25 | LS 25 | Rear 25 |
| House No. | Riscu | | |
| School Dist. | Riscu | | |
| Super Dist. | 1 | CT | 308 |
| Variance or Special Use No | 584-79 | Date | 10.31.84 |
| Special Dist. | _____ | | |

DRIVING DIRECTIONS Green Valley Rd - Turn N on Deer Valley,
 Left on Kanaka Valley Rd Approx 1/2 mi on Right

DESCRIPTION OF WORK

Building Use Site Conn. for Hardship Mobile Home Make Fleetwood
 Electric _____ Amps _____ Size 14x66 State Mfg _____ Year 1984
 Plumbing _____ Serial # _____
 Type of Heating _____ License # _____
 Sewage septic For Period of Conditional

OWNER / CONTRACTOR / AGENT - SIGN ON REVERSE SIDE OF APPLICATION

FOR OFFICE USE ONLY

| APPROVALS | APP BY | DATE | DOC | TYPE | SQ FT | COST | VALUATION |
|--------------------|--------|------|-----|-------------------------|-------|------|-----------|
| Health | | | | | | | |
| Planning | SUP | | | Site Conn. for Hardship | | | |
| Fire Dist. | | | | | | | |
| Sewer | | | | | | | |
| Water | | | | | | | |
| Road Dep. | | | | | | | |
| Total Valuation \$ | | | | | | | |

FEES

Construction _____
 M.H. Site 80.
 Sewage → _____
 Encroachment _____
 Penalty _____
SUB TOTAL _____
 High School _____
 Elementary School _____
 Special C S _____
TOTAL FEES _____

150

Plans Approved By _____ Date _____ Fee _____

CONTRACTOR OWNER ORDER

THIS ORDER IS VALID ONLY IF SIGNED BY THE CONTRACTOR AND OWNER.

THIS ORDER IS VALID ONLY IF SIGNED BY THE CONTRACTOR AND OWNER.

DATE: 12-5-84

DATE: 12-5-84

12-5-84

[Handwritten Signature]

DATE: 12-5-84

DATE: 12-5-84

12-5-84

[Handwritten Signature]

| | |
|----------------------|------------|
| ROUTED TO _____ | DATE _____ |
| HEALTH DEPT _____ | |
| ROAD DEPT _____ | |
| FIRE DEPT _____ | |
| WATER DIST _____ | |
| PLANS RETURNED _____ | |

EL DORADO COUNTY BUILDING DEPARTMENT

APPLICATION FOR CONSTRUCTION PERMIT

REC BY _____

PLAN CHECK # _____

PERMIT NUMBER _____

Richard Betty APPLICANT TO COMPLETE

Owner Betty Tartischi

Mailing Address _____ Dr

City & State _____ CA

Zip 91701 Telephone 711-7767

Contractor _____

Address _____

City & State Truck Pines

Zip 91706 Telephone 44-3171

Class & Lic. # 24186 W. Comp. _____

Arch/Eng. _____

License # _____

Lending Agency _____

Branch _____

A.P.# 102-04-12 TAC# 10030

Sec. 8 T 10N R 9E Public Sewer N

Parcel Map # 10304 Co. Road Existing

No. of Bedrooms 2 Perc. Test YES

Water Source Well Supplier _____

PLANNING DEPARTMENT USE

Lot Size _____ Zone _____

Min Setbacks: FR _____ RS _____ LS _____ Rear _____

House No. _____

School Dist. _____

Super. Dist. _____ CT _____

Variance or Special Use No. 27-79 Date 12.31.79

Special Dist. _____

DRIVING DIRECTIONS: From Valley Rd - Turn N on Deer Valley, to 1st on Kawaiia Valley Rd At way 1/2 mile on right

DESCRIPTION OF WORK

Building Use: _____ Mobile Home Make Electwood

Electric _____ Amps _____ Size 14x6

Plumbing _____ Serial # _____

Type of Heating _____ License # _____

Sewage _____ For Period of _____

EL DORADO COUNTY RECEIVED

DEC 5 1984

CONNECTING TO EXISTING SYSTEM

OWNER / CONTRACTOR / AGENT - SIGN ON REVERSE SIDE DIVISION OF ENVIRONMENTAL HEALTH

FOR OFFICE USE ONLY

| APPROVALS | APP BY | DATE | OCC | TYPE | SQ FT | COST | VALUATION |
|---------------------------|--------|----------------|-----|------|-------|------|-----------|
| Health | | <u>12/5/79</u> | | | | | |
| Planning | | | | | | | |
| Fire Dist. | | | | | | | |
| Sewer | | | | | | | |
| Water | | | | | | | |
| Road Dep. | | | | | | | |
| Total Valuation \$ | | | | | | | |

FEES

Construction _____

MH Site _____

Sewage → _____

Encroachment _____

Penalty _____

SUB TOTAL _____

High School _____

Elementary School _____

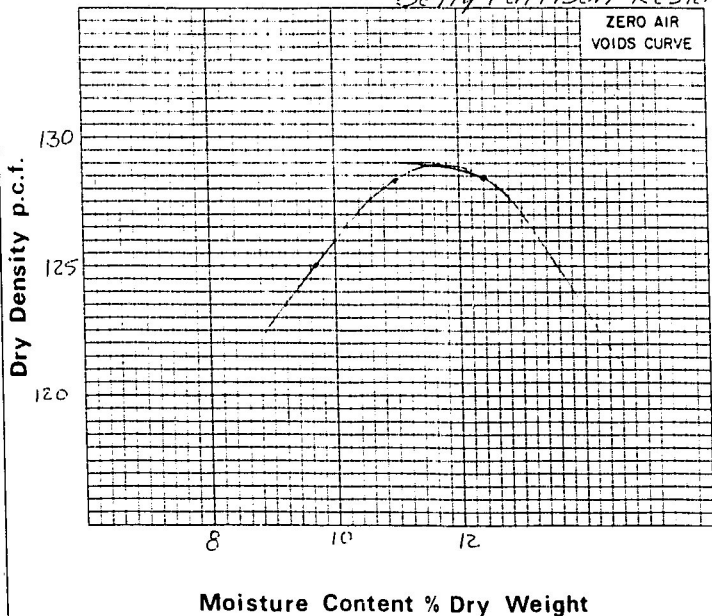
Special Dist. _____

TOTAL FEES _____

Plans Approved By _____ Date _____ Fee _____ P.C Fee _____ Rec No _____

COMPACTION TEST

Betty Pattison Residence



| | |
|------------------------------|--|
| Sample No. | 1 |
| Sample Depth | 0-1 ft |
| Sample Description | 1/2 in. to 1/4 in. Red brown Sandy, Clayey SILT |
| Specific Gravity | |
| Test Designation | ASTM D1570-78 |
| Maximum Dry Density (p.c.f.) | 128.9 |
| Optimum Moisture Content (%) | 11.8 |

YOUNGDAHL & ASSOCIATES INC.
REGISTERED PROFESSIONAL ENGINEERS & ARCHITECTS

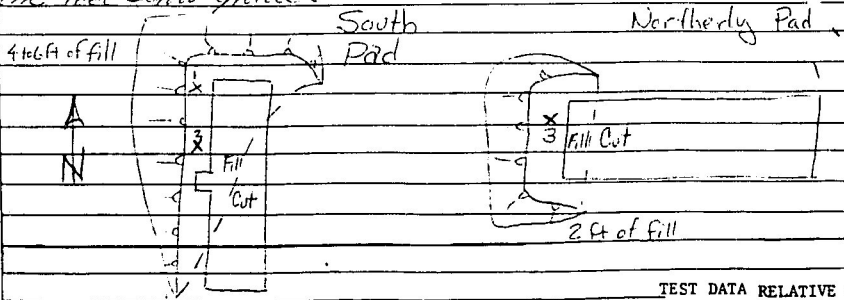
Figure No.

DAHL FIELD RECORD

JOB NO. _____ JOB NAME: Betty Pattison Residence DATE: 1/4/85 SHEET # _____
 JOB LOCATION: 1351 Kanaka Rd CLIENT: Betty Pattison GAUGE NO. Standard 3985
 11486 Counts 674
 CONTRACTOR: _____

The following was noted: The pad had been previously constructed and the mobil homes were in place. Testing indicates adequate compaction has been achieved. The soil type at both pads would have in excess of 1000#/ft³ allowable bearing at the surface and in excess of 2500#/ft² at one foot below grade.

Curve # 1 PCF: _____ %: 12.9 12
 Material Desc. Sandy Dark Red brown Clay SILT
 Curve # 2 PCF: _____ %: _____
 Approx. 2 W145 W6
 Material D: _____



TEST DATA RELATIVE COMPACTION

| Test No. | Location | Mode Depth | D.F.G. | Density Count | Density Count Ratio | Wet Density pcf | Moisture Count | Moisture Count Ratio | Mois. Content pcf | Mois. Con. % | Dry Density pcf | Rel. Comp. % | Soil Type | Remarks |
|----------|---------------------------|------------|--------|---------------|---------------------|-----------------|----------------|----------------------|-------------------|--------------|-----------------|--------------|-----------|---------|
| 1 | N.W. Corner of South Pad | | FG | 1704 | | 131.4 | 235 | | 16.7 | 14.5 | 114.9 | 89 | (1) | |
| 2 | West Side of South Pad | | FG | 1531 | | 135.5 | 250 | | 18.0 | 15.3 | 117.5 | 91 | (1) | |
| 3 | West End of Northerly Pad | | FG | 1025 | | 151.5 | 197 | | 12.4 | 8.9 | 139.4 | 96 | (2) | |
| 4 | | | | | | | | | | | | | | |

SUMMARY OF HOURS CHARGED: Arrive: 8:00 AM Travel 1/2
 Depart: 9:00 AM Worked 1/2
 Total 1/2

FIELD REPRESENTATIVE(S) D. J. [Signature] DATE 4 Jan 85

WHITE: Main File
 YELLOW: Field File
 PINK: Payroll
 GOLD: Job Site



EL DORADO COUNTY BUILDING DEPARTMENT
APPLICATION FOR INSTALLATION OF A MOBILE HOME

Name Richard Getty Mobile Home Installer Wono
Address 7315 DAMBACHER Address _____
City ROSEVILLE State CA City _____ State _____
Zip Code 95678 Telephone 7917066 Zip Code _____ Telephone _____
Assessment Parcel No. 102-04-12 Contractors License No. _____
Construction Permit No. _____
Location/Road 1375 KAWAKA VALLEY RD
1557

SITE UTILITY SERVICE

NOTE: (a) Utility connections shall be located outside the rear 1/3 of the Mobile Home within 4' of the left wall.

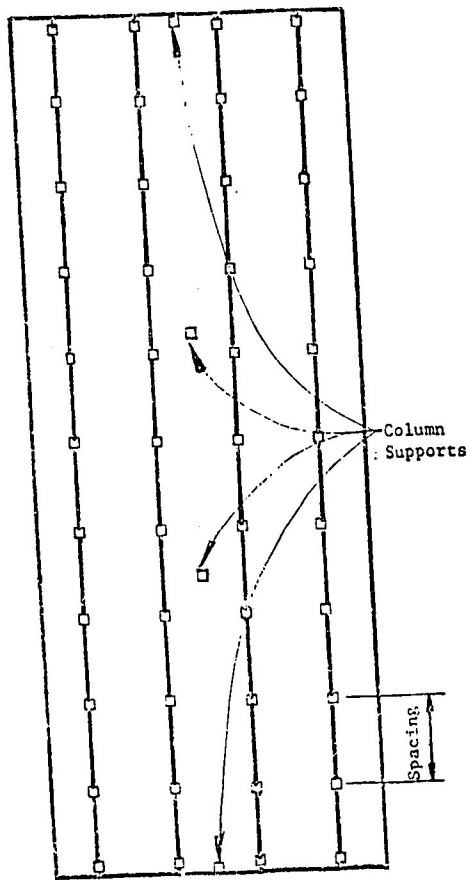
(b) All utilities must be installed prior to placing the Mobile Home on the site.

1. Gas Riser Size 3/4"
2. Drain Inlet Size 3"
3. Elect. Recept. Rating _____
4. Power Supply Connect. Rating 100
5. Service Equip. Rating _____

MOBILE HOME DATA

1. Size: Length 66 Width 14
2. Elect: Cord Amp. _____
Power Assem. Amps. _____
3. Gas: Size Inlet 3/4
4. Water Conn. Material 1" PVC
5. Drain Conn. Material 3 ABS
6. Manufacturer FLEETWOOD
Model 84 Ser. # X Unit _____
Ser. # U Unit _____
Statq. Insig. No. _____
Roof Live Load _____ P.S.F.
Wind Load _____ P.S.F.

Application Approved By _____ Plans Approved By _____ Date _____



LOAD BEARING
SUPPORTS

ADDITIONAL COMMENTS

Drain Connector, Describe _____

Water Connector, Describe _____

LOAD BEARING SUPPORT AND FOOTING INFORMATION

Pier Spacing Used _____

Maximum Pier Load _____

Maximum Column Load (multi-units only) _____

Soil Bearing Capacity _____

Footing Dimension Used _____

TYPE OF PIER USED

Steel _____ Concrete _____ Concrete Block _____

Other _____

TYPE OF FOOTING MATERIAL USED

Pressure Treated Wood _____

Concrete _____

Raw wood (Grade) _____

Other Approved Type _____

DEED RESTRICTION CERTIFICATE


County of El Dorado

The undersigned declares that he has read and understands the deed restrictions and that the improvement herein applied for does not violate any private deed restrictions. I also certify that I have submitted plans to my local homeowner's association; where applicable.

Dated: 12-5-84

Richard Gettey
Print owner's name

/S/


owner's signature

Revised 8-14-84

SPECIAL USE PERMIT

S84 79

PLANNING COMMISSION
and/or ZONING ADMINISTRATOR
El Dorado County, California

No. 84-79

Application is hereby made to the Planning Commission and/or Zoning Administrator for a Special Use Permit for the property and use described below and accompanied by four (4) copies of the site plan:

LOCATION (Street, nearest intersection & town): East side of Kanaka Valley Rd.,

Rescue Area

Assessment Parcel Number: 1J2-04-12

Property Area: 10,001 acres/sq-ft. Zoning RE-10

Requested Use: Hardship mobilehome for applicant

NAME OF APPLICANT: Betty Pattison record owner or authorized agent

Address: P.O. Box 2187, Roseville, CA 95746 Telephone: (916) 791-7769

Date: 10/31/84 SIGNATURE OF APPLICANT: Betty Pattison

\$225 Fee in cash/check received by Sam Gillion Date: 10/31/84

ZONING ADMINISTRATOR
ACTION BY THE PLANNING COMMISSION

Legal Notices Mailed: 10/19/84 Public Hearing Held: 10/31/84

Approved/Disapproved: 10/31/84 Conditions/Reasons: See Below

1. The mobilehome location is to be in conformity with the approved site plan.
2. The applicant shall secure necessary permits from the El Dorado County Building and Environmental Health Divisions prior to the installation of the mobilehome on the site.
3. The special use permit shall be revoked and the mobilehome removed when the specific road, as identified by the physician, no longer exists.
4. The mobilehome is to be installed on the property within one (1) year from the date of approval of this permit or the permit will be void.
5. The mobilehome shall not be placed upon a permanent foundation. It is considered a temporary use and therefore cannot be a permanent structure.
6. The Planning staff will review this permit annually.

Sam Gillion
Executive Secretary/Zoning Administrator

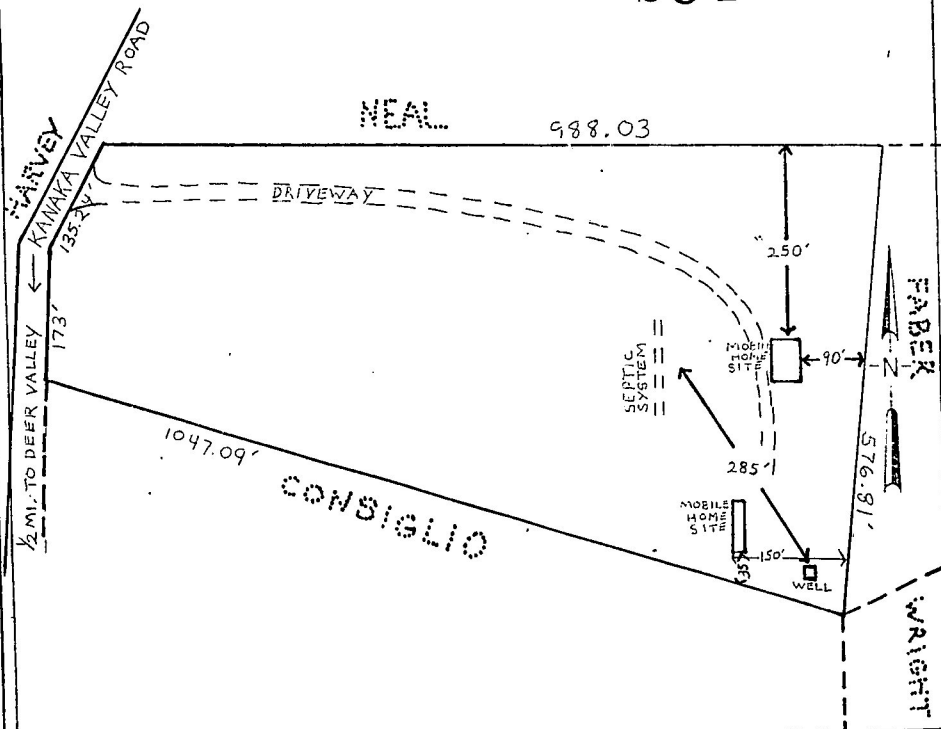
Approval does not constitute a Building Permit. Building Department may not issue a permit until 10 days following the date of approval. The use must be carried on or the construction commenced and diligently pursued within one year of the granting of the Special Use Permit or it becomes null and void.

White: Office ~~Yellow~~: Building Pink: Applicant Goldenrod: Env. Health

PD-SUPB

SITE PLAN

S84 79



| | |
|-----------|--------------------|
| APPLICANT | Betty Pattison |
| PARCEL NO | 102-0412 |
| ZONING | RE-10 |
| LOT AREA | 10.001 Acres |
| SEC. | 8 TWN. 10N RGE 9E. |
| SCALE | 1" = 150' |
| DATE | 9-24-84 |

APPROVED
 EL DORADO COUNTY
 ZONING ADMINISTRATOR
 DATE 10/31/84
 BY Richard N. Hoel
 (Signature)

County of El Dorado

BUILDING DEPARTMENT



360 Fair Lane — Placerville, CA 95667

Phone (916) 626-2511

1359 Johnson Blvd. - P. O. Box 14506

So. Lake Tahoe, Ca. 95702

Phone: 544-1564

OWNER-BUILDER VERIFICATION

ATTENTION: PROPERTY OWNER

PLAN CHECK # _____

An "owner-builder" building permit has been applied for in your name and bearing your signature.

Please complete and return this information at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed property improvement (yes or no) yes.
2. I (have/have not) have signed an application for a building permit for the proposed work.
3. I have contracted with the following person (firm) to provide the proposed construction:

Name _____

Address _____ City _____

Phone _____ Contr. Lic. No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise, and provide the major work:

Name _____

Address _____ City _____

Phone _____ Contr. Lic. No. _____

5. I will provide some of the work but I have contracted (hired) the following persons to provide the work indicated:

| Name | Address | Phone | Type of Work |
|------|---------|-------|--------------|
|------|---------|-------|--------------|

| | | | |
|--------------------|--|-----------------|---------------|
| <u>Mike T. ...</u> | <u>Box 407 Bellock Hills, CA 95611</u> | <u>544-3111</u> | <u>SECT 1</u> |
|--------------------|--|-----------------|---------------|

Property Owner's Signature _____

Social Security number: 56-868-8375 Date: 12-1-84

San. Exp. 7-1-84

STORAGE OF UNOCCUPIED MOBILEHOMES
Section 15.60.050DATE: Oct 3, 1984NAME: Richard GettyADDRESS: P.O. Box 2187 Roseville 95746LOCATION OF MOBILEHOME: 1351 Kanaka Valley RdMAKE: FleetwoodSIZE: 14 x 66

LICENSE #(s):

RC Getty
SIGNATURE OF OWNER

(A) The provisions of this Chapter shall not be construed to prohibit the storage of any unoccupied mobilehome pursuant to applicable zoning laws upon land with the consent of the owner of such land; provided, however, that such mobilehome may not be connected to any electrical, fuel gas, water or sewage disposal system; and further provided that the floor area of the mobilehome included with the area of all existing buildings and structures on the parcel of land does not exceed the maximum percentage of lot coverage permitted in the zoning regulations for that particular parcel of land, and provided further that the placement of such mobilehome complies with the setback requirements as provided in said zoning regulations.

(B) Mobilehomes placed in dead storage as provided in subsection (A) shall not be set up or installed as required for occupied mobilehomes and shall remain in a condition as required for moving on a public road, except that stabilization devices may be used to prevent damage.

(C) Except when stored for resale by a licensed mobilehome dealer, every person, firm or corporation placing a mobilehome in dead storage as provided in subsection (A) shall file a notice with the Building Official within ten (10) days of such placement. Such notice shall be on such form as is prescribed by the Building Official and no fee shall be charged relating to such notice. To assist in enforcement of this section, the Department of Public Works shall notify the Building Official within ten (10) days of the issuance of any permit relating to the transportation of mobilehomes on highways subject to its jurisdiction.

You have one year in which to reactivate the mobilehome permit after putting the mobilehome in dead storage. After one year, you must apply for a Special Use Permit and new mobilehome permits in order to hook up the mobilehome again.