

Stockton Fire Department



Occupancy: **DABNEY, DAVID A**
Occupancy ID: **59846**
Address: **535 W Flora ST**
Stockton CA 95203

Inspection Type: **R2 INSPECTION**

Inspection Date: **8/10/2022** By: **Scott, Kevin R (19237)**

Time In: **18:35** Time Out: **18:35**

Authorized Date: **08/10/2022** By: **Scott, Kevin R (19237)**

Form: SFD GENERAL
INSPECTION

Inspection Topics:

Additional Time Spent on Inspection:

Category	Start Date / Time	End Date / Time
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Notes: No Additional time recorded

Total Additional Time: 0 minutes

Inspection Time: 0 minutes

Total Time: 0 minutes

Summary:

Overall Result: Approved

Inspector Notes:

Closing Notes:

By order of the Fire Chief and Fire Marshal. All non-compliant issues shall be completed within the noted re-inspection date. Additional charges shall incur after the first re-inspection at the prevailing hourly rate, in increments of one hour. Approval as the result of this inspection shall not be construed to be an approval of a violation of the provisions of this code or of other ordinances of the jurisdiction. STOCKTON FIRE DEPARTMENT - FIRE PREVENTION DIVISION 345 N EL DORADO ST - STOCKTON, CA 95202 - (209)937-8271

Inspector:

Name: Scott, Kevin R
Rank: Engineer
Work Phone(s): 2099378552
Email(s): Kevin.Scott@stocktonca.gov

Signature

Date

Representative Signature:

Signature

Date

Stockton Fire Department



Occupancy: **DABNEY, DAVID A**
Occupancy ID: **59846**
Address: **535 W Flora ST**
Stockton CA 95203

Inspection Type: **R2 INSPECTION**

Inspection Date: **10/14/2021**

By: **Hoskinson, Ryan K (19362)**

Time In: **08:24**

Time Out: **08:30**

Authorized Date: **11/02/2021**

By: **Hoskinson, Ryan K (19362)**

Form: SFD GENERAL
INSPECTION

Inspection Topics:

Additional Time Spent on Inspection:

Category	Start Date / Time	End Date / Time
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Notes: No Additional time recorded

Total Additional Time: 0 minutes

Inspection Time: 6 minutes

Total Time: 6 minutes

Summary:

Overall Result: Approved

Inspector Notes:

Closing Notes:

By order of the Fire Chief and Fire Marshal. All non-compliant issues shall be completed within the noted re-inspection date. Additional charges shall incur after the first re-inspection at the prevailing hourly rate, in increments of one hour. Approval as the result of this inspection shall not be construed to be an approval of a violation of the provisions of this code or of other ordinances of the jurisdiction. STOCKTON FIRE DEPARTMENT - FIRE PREVENTION DIVISION 345 N EL DORADO ST - STOCKTON, CA 95202 - (209)937-8271

Inspector:

Name: Hoskinson, Ryan K
Rank: Fire Captain
Work Phone(s): 2099378552
Hoskinson, Ryan K:

Signed on: 11/02/2021 08:27

Signature

Date

Representative Signature:

Signature

Date

Stockton Fire Department



Occupancy: **DABNEY, DAVID A**
Occupancy ID: **59846**
Address: **535 W Flora ST**
Stockton CA 95203

Inspection Type: **R2 INSPECTION**

Inspection Date: **12/9/2022**

Time In: **12:11**

Authorized Date: **12/09/2022**

By: **McKeegan, Patrick G (19202)**

Time Out: **12:11**

By: **McKeegan, Patrick G (19202)**

Form: SFD GENERAL
INSPECTION

Inspection Topics:

Additional Time Spent on Inspection:

Category	Start Date / Time	End Date / Time
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Notes: No Additional time recorded

Total Additional Time: 0 minutes

Inspection Time: 0 minutes

Total Time: 0 minutes

Summary:

Overall Result: Approved

Inspector Notes:

Closing Notes:

By order of the Fire Chief and Fire Marshal. All non-compliant issues shall be completed within the noted re-inspection date. Additional charges shall incur after the first re-inspection at the prevailing hourly rate, in increments of one hour. Approval as the result of this inspection shall not be construed to be an approval of a violation of the provisions of this code or of other ordinances of the jurisdiction. STOCKTON FIRE DEPARTMENT - FIRE PREVENTION DIVISION 345 N EL DORADO ST - STOCKTON, CA 95202 - (209)937-8271

Inspector:

Name: McKeegan, Patrick G
Rank: Fire Captain
Work Phone(s): 2099378024
Email(s): Patrick.McKeegan@stocktonca.gov
McKeegan, Patrick G:

Signed on: 12/09/2022 12:11

Signature

Date

Representative Signature:

Signature

Date



CITY OF STOCKTON
 COMMUNITY DEVELOPMENT DEPARTMENT
 BUILDING DIVISION, CITY HALL
 STOCKTON, CALIFORNIA 95202

PHONE: (209) 937-8561
24 Hr. Inspection Request
937-8560
 Application Number
 02 00001648

PERMIT

LICENSED CONTRACTORS DECLARATION

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

CONTRACTOR _____
 LICENSE NO. _____
 LICENSE TYPE _____ DATE _____
 STOCKTON BUS. LIC. NO. _____

Job Address _____
 535 W FLORA ST

Issue Date _____
 3/26/02

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec.7031.5 Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 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 the work, and the structure is not intended or offered for sale (Sec. 7044). Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such 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 he did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to any owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law.)

I am exempt under Sec. _____, B & P.C. for this reason _____
 Date _____ Owner _____

Permit Type . . : GENERAL PLUMBING PERMIT-----2L
 Subdivision . . :
 Parcel Nbr . . : 137 163 13
 Geo Code . . : 0400 07 07 09 0
 Owner Name . . : SANCHEZ MARCELLA A TR
 Address . . . : 3329 MISSION RD
 STOCKTON CA 95204
 Appl Type . . : ELECTRICAL, PLUMBING, MECHANICAL-RESIDENTIAL
 Desc of Work . : RESIDENTIAL
 REPAIR
 PLUMBING WORK ONLY
 Valuation . . : 4,400
 Square ftg . . : 0 Zoning . . . : R1
 Occup Group . : Const Type . . :

Special Notes and Conditions

CNTR: DRAIN PATROL
 ST LIC# 422136 EX 5/31/02
 INS W/C EX 10/01/02
 BUS LIC#31841 EX 12/02
 PROJ: REPAIR DRAIN LINES IN BASEMENT

RETURN CHECK POLICY: I AM AWARE IF MY CHECK IS RETURNED TO THE CITY, THIS PERMIT IS REVOKED. I AM ALSO AWARE, IF ANY WORK HAS BEEN STARTED, THE CITY WILL IMPOSE AN INVESTIGATION FEE, (PER SMC 13-304(C)) PLUS ANY OTHER REQUIRED FEES.

NOTE: To protest the imposition of any development fee, dedication, reservation or other exaction imposed on your project, you must file written notice with the City Clerk's office within 90 days after approval of the project or imposition of the fees, dedications, reservations or other exactions stating that the required payment is tendered or will be tendered when due, or that any conditions which have been imposed are provided for or satisfied, under protest, along with a statement of the actual elements of the dispute and the legal theory forming the basis for the protest.

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec.3800, Lab. C.) Policy No. _____

Company _____

Certified copy is hereby furnished. Expires _____
 Certified copy is filed with the city building inspection department.

Date 3/26/02, Applicant Scott Stevens

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

This section need not be completed if the permit is for one hundred dollars (\$100) or less.

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.

Date _____ Applicant _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

SIGNED Scott Stevens ADDRESS _____
 JOB ADDRESS _____

APPLICATION APPROVAL

THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

SIGNATURE _____

----- FEES -----	
PERMIT FEE	17.00
A20-GPHI (.001*VAL)----KK	4.40
A15 SHIP-(OLD USAGE) *N9	.50
A35-LAND UPDATE-----NN	2.50
A30-PERMIT TRACKING----NH	10.00
PERMIT TOTAL	34.40

Handwritten signatures and initials: CH, 3/26/02



CITY OF STOCKTON
 COMMUNITY DEVELOPMENT DEPARTMENT
 BUILDING DIVISION, CITY HALL
 STOCKTON, CALIFORNIA 95202

PHONE: (209) 937-8561
24 Hr. Inspection Request
209-937-8560
 Permit No: BP16-06230

Description of Work:
 Need temp power for 535 W. Flora. Need gas test for 537 and 539 W. Flora ONLY. (NOT 537 1/2)

Issue Date
Permit Type Residential
Category Single Family
Sub Category Repair
Permit Address 535 W FLORA ST
Parcel No. 13716313

Owner DABNEY, DAVID A & NONA J
 PO BOX 42
 STOCKTON CA, 95201

Applicant 141 E ACACIA ST STE C
 STOCKTON, CA 95202

Contractor 942893
 NEW START CONSTRUCTION INC
 141 E ACACIA ST STE C
 STOCKTON CA, 95202
 2092422317

Valuation \$300.00

Fee Items	Amount
Capital Preservation Fee	0.30
Community Rating System Admin Fee - Building	4.50
Development Oversight Commission	0.08
GPML - Planning Fee	0.45
Green Building Standards Fee	1.00
Permit Fee	75.00
Strong Motion Instrument Program (RES)	0.50
Technology Fee - Building	5.63
Total	87.46

Special Notes and Conditions

LICENSED CONTRACTOR'S DECLARATION

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

License Type: _____ License Number: **942893** Date: _____
 Contractor: _____ Stockton Bus. Lic. No: _____

OWNER-BUILDER DECLARATIONS

_____ I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5 Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he/she is licensed pursuant to the provisions of Contractor's License Law (Chapter 9 commencing with Sec.7000) of Division 3 of the Business and Professions Code) or that he/she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to 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 the work, and the structure is not intended or offered for sale (Sec. 7044) Business and Professions Code: The Contractor's License Law. does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such 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 he did not build or improve for the purpose of sale.)

_____ I, as owner of the property, am exclusively contracting with licensed contractor(s) to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law)

_____ I am exempt under Sec. _____ B & P. C. for this reason _____

Date: _____ Owner: _____

NOTE: To protest the imposition of any development fee, dedication, reservation or other exaction imposed on your project, you must file written notice with the City Clerk's office within 90 days after approval of the project or imposition of the fees, dedications, reservations or other exactions stating that the required payment is tendered or will be tendered when due, or that any conditions which have been imposed are provided for or satisfied, under protest, along with a statement of the actual elements of the dispute and the legal theory forming the basis for the protest.

WORKERS COMPENSATION DECLARATION

_____ I hereby affirm that I have a certificate of consent to self-insure, or a Certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec 3800, Lab. C.).

Policy Number: _____ Company: _____
 _____ Certified copy is hereby furnished. Expires: _____
 _____ Certified copy is filed with the city building inspection department.
 Date: 9/22/16 Applicant:

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE
 This section need not be completed if the permit is for one hundred dollars (\$100) or less.

_____ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.

Date: _____ Applicant: _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

_____ I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to construction. I hereby authorize representatives of the city of enter upon the above mentioned property for inspection purposes.

SIGNED: PRINT NAME: ANGEL ESZLINGER

APPLICATION APPROVAL
 THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

Signature:



CITY OF STOCKTON
 COMMUNITY DEVELOPMENT DEPARTMENT
 BUILDING DIVISION, CITY HALL
 STOCKTON, CALIFORNIA 95202

PHONE: (209) 937-8561
24 Hr. Inspection Request
209-937-8560
 Permit No: BP16-07708

Description of Work:

Fire damage repair. reframe kitchen ceiling like for like. Bring electrical and gas up to code. Replace plumbing in bathrooms and kitchens. Four units 535 (1,2,3 &4) and Common Area meter 537. Replacement of 4 wall furnaces and 4 units electrical meter and house meter.

Issue Date 11/29/2016
Permit Type Residential
Category Single Family
Sub Category Repair
Permit Address 535 W FLORA ST
Parcel No. 13716313

Owner DABNEY, DAVID A & NONA J
 PO BOX 42
 STOCKTON CA, 95201

Applicant DABNEY, DAVID A & NONA J
 PO BOX 42
 STOCKTON, CA 95201

Contractor

Valuation \$72,000.00

Fee Items	Amount
Capital Preservation Fee	60.00
Community Rating System Admin Fee - Building	52.56
Development Oversight Commission	15.00
GPMI - Planning Fee	90.00
Green Building Standards Fee	3.00
Permit Fee	876.00
Strong Motion Instrument Program (RES)	7.80
Technology Fee - Building	65.70
Total	1,170.06

Special Notes and Conditions

LICENSED CONTRACTOR'S DECLARATION

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License Type: _____ License Number: _____ Date: _____
 Contractor: _____ Stockton Bus. Lic. No: _____

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____ I, as owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044) Business and Professions Code: The Contractor's License Law. does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such 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 he did not build or improve for the purpose of sale.)

____ I, as owner of the property, am exclusively contracting with licensed contractor(s) to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law)

____ I am exempt under Sec. _____ B & P. C. for this reason _____

Date: _____ Owner: _____

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____ I hereby affirm that I have a certificate of consent to self-insure, or a Certificate of Worker's Compensation Insurance, or a certified copy thereof (Sec 3800, Lab. C.).

Policy Number: _____ Company: _____
 _____ Certified copy is hereby furnished. Expires: _____
 _____ Certified copy is filed with the city building inspection department.

Date: _____ Applicant: _____

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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____ I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.

Date: _____ Applicant: _____

NOTICE TO APPLICANT: If, after making this Certificate of Exemption you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

____ I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to construction. I hereby authorize representatives of the city of enter upon the above mentioned property for inspection purposes.

SIGNED: NOT AVAILABLE FOR SIGNATURE PRINT NAME: _____

APPLICATION APPROVAL

THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

Signature: [Signature]

APPLICATION FOR BUILDING PERMIT
AND/OR CERTIFICATE OF OCCUPANCY
CITY OF STOCKTON, CALIFORNIA
BUILDING DEPARTMENT

Date APR - 8 1954

Remodel Dwelling - Siding
(Description of work)

Address 535 W. Flora Owner C. Blazakis

Lot 4 Block 54 Subdivision W.

Estimated Cost \$ 1400.⁰⁰ Fee Chargeable \$ 6.⁰⁰

Occupancy: Group I Division _____ Fire Zone 3-A

Construction: Type V Exterior Asbestos Siding
State _____

Contractor Federal Home Insulation License No. _____

Address _____ State _____

Architect _____ License No. _____

Address _____ State _____

Engineer _____ License No. _____

Address _____

Remarks: OK'd by Bell

Receipt No. _____ Plan Checking Receipt No. _____ Use Permit No. _____

For residential buildings state No. Families planned for _____ Store therewith. Yes _____ No. _____	For alterations state families accomodated before _____ families accomodated after _____
--	---

I have read the above application and know the contents thereof: the same is true and correct. I further state that I am familiar with the laws governing building within the City of Stockton and the State of California, and the amendments thereto, and that the above building and/or structure will be built in conformity therewith.

Signed Federal Home Insulation
Ray J. Evans
(Applicant)

Plans Approved By _____	Permit Issued By <u>[Signature]</u>	Classification as to Occupancy <u>24</u> \$ <u>1,400⁰⁰</u>	Building Permit No. <u>38600</u>
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5318

INSPECTION DEPARTMENT — CITY OF STOCKTON
 APPLICATION FOR BUILDING, ELECTRICAL, PLUMBING PERMITS
 AND/OR CERTIFICATE OF OCCUPANCY

No. 3497

Date 7-25-58 ORIGINAL

Address 535-9 W. Flora St Fire Zone _____

Work to be done 9 outlets - 4 plugs - 3 lights

Name Owner F. Barcom Address _____ Ph. _____

Legal Description: Lot _____ Block _____ Tract _____

Contractor Home Wiring Co Address _____ License _____

Engineer _____ Address _____ License _____

Architect _____ Address _____ License _____

Occupancy _____ Group _____ Division _____ Est. Cost _____ Code 24

TYPE PERMIT			
New Const. _____	Zone _____ Use _____	Bldg. Perm. Fee _____	
Alteration _____	Use Permit No. _____	Plumb. Perm. Fee _____	
Plumbing <input checked="" type="checkbox"/>		Remarks: _____	Elect. Perm. Fee <u>2.75</u>
Electr. _____	Plan Ch. Fee _____		
Moving _____	Plans App'd By _____		
Wrecking _____			
Sign _____			
Plans App'd By _____	<u>Credit 105</u>		

I have read the above application and know the contents thereof: the same is true and correct. I further state that I am familiar with the laws governing building, electrical work and/or plumbing within the City of Stockton and the State of California, and the amendments thereof, and that the above building and/or structure will be built in conformity therewith.

Signed _____

PERMIT No. 3497

Issued By [Signature]

Total Fees 2.75



INSPECTION DEPARTMENT — CITY OF STOCKTON
 APPLICATION FOR BUILDING, ELECTRICAL, PLUMBING PERMITS
 AND/OR CERTIFICATE OF OCCUPANCY

No 6462

Date JAN -2 1959

ORIGINAL

Address 535 W. Flora St Fire Zone 3-A

Work to be done Repair & Rebuild Front & Rear Stairways

Name Owner Mrs. Bascomb Address 535 W. Flora Ph. _____

Legal Description: Lot 4 Block 54 Tract West of Center

Contractor E. J. Buonocorsi Address _____ License _____

Engineer _____ Address _____ License _____

Architect _____ Address _____ License _____

Occupancy _____ Group I Division _____ Est. Cost 250.00 Code 24

TYPE PERMIT	Zone _____ Use _____	Bldg. Perm. Fee <u>2.00</u>
New Const. _____	Use Permit No. _____	Plumb. Perm. Fee _____
Alteration <input checked="" type="checkbox"/>	Remarks: <u>To Comply With Health Dept. Letter</u>	Elect. Perm. Fee _____
Plumbing _____		Plan Ch. Fee _____
Electr. _____		
Moving _____		
Wrecking _____		
Sign _____		
Plans App'd By <u>None</u>		

I have read the above application and know the contents thereof; the same is true and correct. I further state that I am familiar with the laws governing building, electrical work and/or plumbing within the City of Stockton and the State of California, and the amendments thereof, and that the above building and/or structure will be built in conformity therewith.

Signed E. J. Buonocorsi

Issued By R. F. Ruggaga PERMIT No 6462

Total Fees 2.00

INSPECTION DEPARTMENT
 CITY OF STOCKTON
 K. S. NELSON
 X ✓

APPLICATION DATE 8/9/90		ISSUE DATE 8/9/90		<input type="checkbox"/> CONSTRUCTION PERMIT <input type="checkbox"/> BUILDING PERMIT		<input type="checkbox"/> ELECTRICAL PERMIT <input checked="" type="checkbox"/> PLUMBING PERMIT		<input type="checkbox"/> MECHANICAL PERMIT <input type="checkbox"/> WRECKING PERMIT		Permit No. A 400 07 07 09			
WORK DESCRIPTION NEW GAS LINE INSTALLATION								CENSUS TRACT Aug 99082783	BLK ZONE	BLOCK	PARCEL		
JOB ADDRESS 535 WEST FLORA STREET						ASSESSOR PARCEL NO. 137-16313		OTHER FEES					
LEGAL DESCRIPTION						SUBDIVISION		SCHOOL FEE 84-0211-					
OWNER MRS. JOHN SANCHEZ								TREE & SIGN FEES 15-0610-002					
OWNER ADDRESS 535 WEST FLORA STREET						STOCKTON, CA		PHONE 463-8864		PARK LAND 15-0610-003			
CONTRACTOR OWNER						ADDRESS		PHONE		PLAN CHECK 10-0424-000			
ARCHITECT/ENGINEER						ADDRESS		LICENSE NO		PHONE			
ZONING		CONSTR CODE 43		NO OF BEDROOMS		PERMIT ISSUANCE APP VD BY R. BIRD		VALUATION \$20700		MICRO FEE 10-0619-003			
OCCUP GROUP		NO OF HOUSING UNITS		REMARKS PERMIT ISSUED TO RICK TASH WITH RICK'S OLD TIME PLUMBING WITH OWNER AUTHORIZATION check #.1013.				TRAFFIC SIGNAL FEE		SMIP FEE 84-0251-013 .50			
TYPE CONSTR		CONTR. CREDIT NO						ZONE 15-0633-00		CITY WIDE 15-0633-005		CERT. OF OCC. 10-0424-000	
OCCUP LOAD		SPRINKLERS										WATER CONN IN CITY 24-0645-001	
NO OF STORIES		BASEMENT										SEWER CONN IN CITY 72-0645-001	
TOTAL FLOOR AREA		USE PERMIT NO										TOTAL FEES 20.50	

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

CONTRACTOR _____
 LICENSE NO. _____
 LICENSE TYPE _____ DATE _____
 STOCKTON BUS. LIC. NO. _____

OWNER-BUILDER DECLARATION
 I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 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 the work, and the structure is not intended or offered for sale (Sec. 7044), Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such 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 he did not build or improve for the purpose of sale.)

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I am exempt under Sec. _____, B. & P.C. for this reason _____
 Date _____ Owner _____

CONSTRUCTION LENDING AGENCY
 I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____
 Lender's Address _____

DIMENSIONS	PARKING	VALIDATION
PARCEL FRONTAGE	EXIST _____ NEW _____	AUG 9 90 82783
LOT AREA	PLANS RECEIVED BY _____	
1st FLOOR AREA	PLANS CHECKED BY _____	
2nd FLOOR AREA	PERMIT ISSUED BY FLG	
RESIDENTIAL	ESTIMATED VALUE _____	
GARAGE PORCH		

WORKERS' COMPENSATION DECLARATION
 I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.) Policy No. _____
 Company _____
 Certified copy is hereby furnished. Expires _____
 Certified copy is filed with the city building inspection department.

Date _____ Applicant _____
CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE
 This section need not be completed if the permit is for one hundred dollars (\$100) or less.
 I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.

Date _____ Applicant _____
NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.
 I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

SIGNED *[Signature]*
 ADDRESS
 535 WEST FLORA STREET
 JOB ADDRESS

PLAN RECORD DATA	
NO. _____	DATE REC'D. _____
ARCHIT. PLANS _____	
STRUCT. PLANS _____	
ELECT. PLANS _____	
MECH. PLANS _____	
SPECIFICATIONS _____	
CALCULATIONS _____	
SOILS REPORT _____	
ENERGY _____	
NOISE _____	
PLOT PLAN _____	
APPROVALS	
ENVR IMPACT REPORT _____	HISTORIC _____
PUBLIC WORKS _____	BOARD OF APPEALS _____
RENEWAL _____	

APPLICATION DATE 8/21/90	ISSUE DATE		<input type="checkbox"/> CONSTRUCTION PERMIT	<input type="checkbox"/> ELECTRICAL PERMIT	<input type="checkbox"/> MECHANICAL PERMIT	
			<input type="checkbox"/> BUILDING PERMIT	<input type="checkbox"/> PLUMBING PERMIT	<input type="checkbox"/> WRECKING PERMIT	
WORK DESCRIPTION Replacing venting and water heater (3)			CENSUS TRACT 4.00	TR ZONE 07	BLOCK 190807	
JOB ADDRESS 535 W. Flora Street			ASSESSOR'S PARCEL NO. 137-163-13	PARCEL 09		
LEGAL DESCRIPTION			SUBDIVISION		OTHER FEES	
OWNER John Sanchez			OWNER ADDRESS 3329 Mission Rd. Stockton, CA 95204		SCHOOL FEE 84-0211-	
OWNER ADDRESS 535 W. Flora Street Stockton CA 95204			PHONE 463-8804		TREE & SIGN FEES 15-0610-002	
CONTRACTOR Owner			ADDRESS same as above		PARK LAND 15-0610-003	
ARCHITECT/ENGINEER			LICENSE NO.		PLAN CHECK 10-0424-000	
ZONING	CONSTR CODE 43	NO OF BEDROOMS	PERMIT ISSUANCE APP'VD BY	VALUATION \$2,700		
OCCUP GROUP	NO OF HOUSING UNITS	REMARKS CK # 1035		TRAFFIC SIGNAL FEE		
TYPE CONSTR	CONTR CREDIT NO			ZONE 15-0633-00	SMIP FEE 84-0251-013 .50	
OCCUP LOAD	SPRINKLERS			CITY WIDE 15-0633-005	CERT. OF OCC. 10-0424-000	
NO OF STORIES	BASEMENT				WATER CONN IN CITY 24-0645-001	
TOTAL FLOOR AREA	USE PERMIT NO				SEWER CONN IN CITY 72-0645-001	
					TOTAL FEES \$35.50	

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

CONTRACTOR _____
 LICENSE NO. _____
 LICENSE TYPE _____ DATE _____
 STOCKTON BUS. LIC. NO. _____

OWNER-BUILDER DECLARATION
 I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 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 the work, and the structure is not intended or offered for sale (Sec. 7044), Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such 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 he did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law.)

I am exempt under Sec. _____, B. & P.C. for this reason _____
 Date _____ Owner _____

CONSTRUCTION LENDING AGENCY
 I hereby affirm that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.).

Lender's Name _____
 Lender's Address _____

DIMENSIONS	PARKING		VALIDATION
PARCEL FRONTAGE	EXIST	NEW	Aug 21 1990 8 29 92
LOT AREA	PLANS RECEIVED BY		
1st FLOOR AREA	PLANS CHECKED BY		
2nd FLOOR AREA	PERMIT ISSUED BY		
RESIDENTIAL	ESTIMATED VALUE		
GARAGE			
PORCH			

WORKERS' COMPENSATION DECLARATION
 I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.) Policy No. _____
 Company _____
 Certified copy is hereby furnished. Expires _____
 Certified copy is filed with the city building inspection department.

Date _____ Applicant _____
CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE
 This section need not be completed if the permit is for one hundred dollars (\$100) or less.)

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.

Date _____ Applicant *[Signature]*
NOTICE TO APPLICANT: If, after making this Certificate of Exemption, you should become subject to the Workers' Compensation provisions of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

SIGNED *[Signature]* ADDRESS _____
 JOB ADDRESS _____

NO.	DATE REC'D.
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

APPROVALS	
ENVR IMPACT REPORT	HISTORIC
PUBLIC WORKS	BOARD OF APPEALS
RENEWAL	



CITY OF STOCKTON
COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING DIVISION, CITY HALL
STOCKTON, CALIFORNIA 95202

PHONE: (209) 937-8561
24 Hr. Inspection Request
937-8560

PERMIT

LICENSED CONTRACTORS DECLARATION

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

CONTRACTOR _____
LICENSE NO. _____
LICENSE TYPE _____ DATE _____
STOCKTON BUS. LIC. NO. _____

Application Number
97 00005722

Job Address
535 W FLORA ST

Issue Date
12/24/97

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason (Sec. 7031.5 Business and Professions Code: Any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he is licensed pursuant to the provisions of the Contractor's License Law (Chapter 9 commencing with Section 7000) of Division 3 of the Business and Professions Code) or that he is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 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 the work, and the structure is not intended or offered for sale (Sec. 7044). Business and Professions Code: The Contractor's License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or through his own employees, provided that such 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 he did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractor's License Law does not apply to any owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor's License Law.)

I am exempt under Sec. _____, B & P.C. for this reason _____
Date _____ Owner _____

RETURN CHECK POLICY: I AM AWARE IF MY CHECK IS RETURNED TO THE CITY, THIS PERMIT IS REVOKED. I AM ALSO AWARE, IF ANY WORK HAS BEEN STARTED, THE CITY WILL IMPOSE AN INVESTIGATION FEE, (PER SMC 13-304(C)) PLUS ANY OTHER REQUIRED FEES.

NOTE: To protest the imposition of any development fee, dedication, reservation or other exaction imposed on your project, you must file written notice with the City Clerk's office within 90 days after approval of the project or imposition of the fees, dedications, reservations or other exactions stating that the required payment is tendered or will be tendered when due, or that any conditions which have been imposed are provided for or satisfied, under protest, along with a statement of the actual elements of the dispute and the legal theory forming the basis for the protest.

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C.)
Policy No. _____

Company _____
 Certified copy is hereby furnished. Expires _____
 Certified copy is filed with the city building inspection department.

Date 12-24-97 Applicant Bob Douglas

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

This section need not be completed if the permit is for one hundred dollars (\$100) or less.

I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the Workers' Compensation Laws of California.

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SIGNED _____ ADDRESS _____
JOB ADDRESS _____

APPLICATION APPROVAL

THIS PERMIT DOES NOT BECOME VALID UNTIL SIGNED BY THE BUILDING OFFICIAL OR HIS DEPUTY AND FEES ARE PAID.

SIGNATURE: [Signature]

Permit Type . . : REROOFING PERMIT-----2L
Parcel Nbr . . : 137 163 13
Geo Code . . . : 0400 07 07 09 0
Owner Name . . :
Address . . . :

App'l Type . . : REROOFING (SINGLE FAMILY DWELLINGS & DUPLEXS)
Desc of Work : RESIDENTIAL
REROOF, GENERAL
Valuation . . : 6450
Square ftg . . : 0 Zoning . . . : R1
Occup Group . : Const Type . :

Special Notes and Conditions

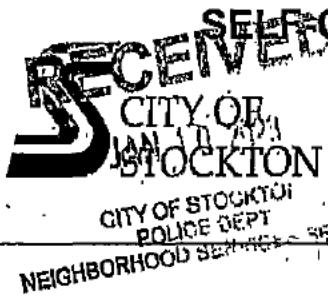
HU SHAKE DOUG HEATH ROOFING
ST LIC# 420175 EXP 04/30/98
W/C EXP 01/01/98
CITY BUS LIC# 32398
REROOF: TEAR OFF; RESHEATH; ROOF 17SQS
WITH COMP

	----- FEES -----
PERMIT FEE	40.00
A20-GPHI (.001*VAL)----KK	6.45
A15-SHIP-STRONG MOTION-H9	.60
A35-LAND UPDATE-----HN	2.50
A30-PERMIT TRACKING----HH	10.00
A25-SPAS (.0005*VAL)---LL	3.23

PERMIT TOTAL	62.78

PK

PK 23181



SELF-CERTIFICATION PROGRAM AFFIDAVIT

CITY OF STOCKTON (209) 937-8813
rentalprogram@stocktonca.gov

FOR INSPECTION YEAR: 2023

Office Use Only

Approved by: [Signature]

Date: 01/11/2023

APT-4

This executed affidavit shall be returned to the City at the address below by: 02/01/2023

Affidavits received after this date may be charged a case processing fee or rejected. If rejected this property will not be eligible to participate in the Self-Certification Program for five years.

Rental Unit(s) located at: 535 W Flora St CASE #: 22 00193347

Owner of record: Nona Dalmeida APN #: 13716313

Total number of units: 4 Number of exempt units: 0

Please complete the following information and mark whom this form is being completed by:

<input checked="" type="checkbox"/> OWNER	<input type="checkbox"/> MANAGEMENT ENTITY
OWNER NAME <u>Nona Dalmeida</u>	MANAGEMENT ENTITY NAME
ADDRESS <u>PO Box 42</u>	ADDRESS
CITY, STATE, ZIP CODE <u>Stockton CA 95201</u>	CITY, STATE, ZIP CODE
PHONE NUMBER	PHONE NUMBER
EMAIL ADDRESS <u>ndalmeida@stocktonca.gov</u>	EMAIL ADDRESS

Welcome

012239-0041 Erika E. 01/12/2023 04:41PM

MISCELLANEOUS
RENTAL SELF CERT APP FEE (HX)
2023 Item: HX
1 @ 336.00
RENTAL SELF CERT APP FEE (HX) 336.00

Subtotal 336.00
Total 336.00

CHECK
Check Number [Redacted] 0.00

Change due

Comments: 22-00193347
137-163-13

I am submitting a self-certification. I certify that I have inspected the residential rental units, building exterior, and common area location(s) above and they meet or exceed the minimum requirements of the Stockton Self-Certification Program. I am returning this completed checklist, and applicable fee.

OR

I request City Inspection. I am returning this form to the City.

PRINT NAME: Nona Dalmeida

I certify under penalty of perjury that the foregoing is true and correct.

X [Signature]
Signature of Owner/Management Entity or Responsible Party

***All Self-Certified properties are subject to the 10% audit inspection.

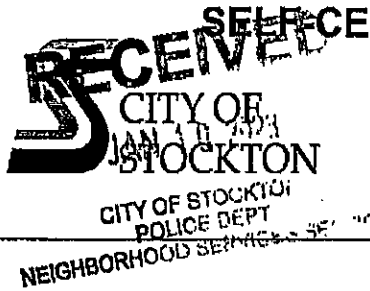
NOTE: Any change of Owner voids this Affidavit. A new Affidavit must be submitted.

Mail to:
City of Stockton Self-Certification Program
22 E. Weber Avenue Room, #350
Stockton, CA 95202

Make
City of

Thank you for your payment

CUSTOMER COPY



SELF-CERTIFICATION PROGRAM AFFIDAVIT

CITY OF STOCKTON (209) 937-8813
rentalprogram@stocktonca.gov

Office Use Only
Approved by: <u>[Signature]</u>
Date: <u>01/11/2023</u>

FOR INSPECTION YEAR: 2023

AP-4

This executed affidavit shall be returned to the City at the address below by: 02/01/2023

Affidavits received after this date may be charged a case processing fee or rejected. If rejected this property will not be eligible to participate in the Self-Certification Program for five years.

Rental Unit(s) located at: 535 W Flora St CASE #: 22 00193347

Owner of record: Nona Daloney APN #: 13716313

Total number of units: 4 Number of exempt units: 0

Please complete the following information and mark whom this form is being completed by:

<input checked="" type="checkbox"/> OWNER	<input type="checkbox"/> MANAGEMENT ENTITY
OWNER NAME <u>Nona Daloney</u>	MANAGEMENT NAME
ADDRESS: <u>PO Box 42</u>	ADDRESS:
CITY, STATE, ZIP CODE <u>Stockton CA 95201</u>	CITY, STATE, ZIP CODE
PHONE NUMBER	PHONE NUMBER
EMAIL ADDRESS: <u>ndaloney@shccglobal.net</u>	EMAIL ADDRESS:

I am submitting a self-certification. I certify that the Owner/Management Entity has inspected the residential rental units, building exterior, and common areas at the location(s) above and they meet or exceed the minimum criteria established by the City of Stockton Self-Certification Program. I am returning this completed form, the completed checklist, and applicable fee.

OR

I request City inspection. I am returning this form with the applicable fee.

PRINT NAME: Nona Daloney

I certify under penalty of perjury that the forgoing is true and correct.

X [Signature] 1-6-23
Signature of Owner/Management Entity or Responsible Party Date

All Self-Certified properties are subject to the 10% audit inspection as required by the ordinance.

NOTE: Any change of Owner voids this Affidavit. A new Affidavit must be completed by the new owner.

Mail to:
City of Stockton Self- Certification Program
22 E. Weber Avenue Room, #350
Stockton, CA 95202

Make Checks/Money Orders payable to:
City of Stockton



POLICE DEPARTMENT
NEIGHBORHOOD SERVICES SECTION
22 EAST WEBER AVENUE, ROOM 350
STOCKTON, CA 95202
(209) 937-8813
rentalprogram@stocktonca.gov

FEE SCHEDULE

FEES AS SET FORTH BY THE CITY COUNCIL FOR THE RESIDENTIAL RENTAL INSPECTION AND MAINTENANCE PROGRAM

Property owners with non-exempt rental properties have two options to comply with the inspection requirement. You can either utilize the Self-Certification method, where you conduct the inspections and certify that the property is in compliance or you can utilize the City Inspectors to conduct the inspections once every five (5) years.

If you choose to self-certify your rental property, you will need to submit the Residential Rental Inspection Maintenance Standards Checklist and Self-Certification Affidavit along with the appropriate **Self-Certification Application and Inspection Fee** noted below. The Self-Certification Application and Inspection Fee covers a five (5)-year period. Paperwork submitted without payment in full will not be accepted into the self-certification program.

Self-Certification Application and Inspection Fees:

Condominium	\$194.50
Self-Certification per Unit (i.e. Single Family)	\$202.75
Self-Certification per 2 Units (i.e. Duplex)	\$228.75
Self-Certification per 3 Units (i.e. Triplex)	\$255.00
Multifamily (4+) base fee \$232.00 plus	\$ 26.00 (per unit)

If the City of Stockton conducts the residential rental property inspection, the appropriate **City of Stockton Residential Rental Inspection Fee** noted below will be charged. The City of Stockton Residential Rental Inspection Fee also covers a five (5)-year period and must be paid in full, along with any other incidental fees, prior to receiving your final inspection.

City of Stockton Residential Rental Inspection Fees:

Condominium	\$203.00
Inspection Fee per Unit (i.e. Single Family)	\$232.00
Inspection Fee per 2 Units (i.e. Duplex)	\$339.00
Inspection Fee per 3 Units (i.e. Triplex)	\$446.00
Multifamily (4+) base fee \$232.00 plus	\$108.00 (per unit)

Please note that you should pay only one fee noted above – either the **Self-Certification Application and Inspection Fee** or the **City of Stockton Residential Rental Inspection Fee**. Should you require additional information regarding the fees, please contact the Neighborhood Services Section at (209) 937-8813.

The Self-Certification Maintenance Standards Checklist is designed to assist owners in determining whether their properties will qualify to participate in the Self-Certification Program. Each item on the checklist must be verified as being in compliance or marked as "Not applicable." Use the "Comments" section to explain actions taken if you were unable to obtain access to the unit or to relay other information about items checked. This Self-Certification Maintenance Standards Checklist is for all units at the address listed.

Owners should recognize that this Maintenance Standards Checklist is NOT all inclusive. In addition to the items listed below, owners are responsible for ensuring that their units are in compliance with applicable provisions of the Stockton Municipal Code, including the California Model Codes, the Uniform Housing Code, and the Uniform Code for the Abatement of Dangerous Buildings.

ADDRESS OF UNITS INSPECTED: 535 W Flora St DATE INSPECTED: _____

UNIT #'S INSPECTED: 4

EXTERIOR INSPECTION: VERIFY COMPLIANCE	PASS	N/A	COMMENTS
1. <u>Legible and Visible Address Numbers and Unit Identification:</u> Address numbers are a minimum of 4" high, are of a contrasting color and clearly visible from the curb.	X		
2. <u>Foundations and Walkways</u> appear to be in functional condition. Any vent screens and/or crawl spaces are covered. Walkways are clear, safe, and are free of trip hazards.	X		
3. <u>Exterior walls</u> are free of major cracks and erosion, are weather and water tight, and paint is showing no signs of damage or deterioration.	X		
4. <u>Roofs & Gutters:</u> Roof (on each unit) appears to be in good repair and is water tight. Gutters and downspouts are properly maintained.	X		
5. <u>Exterior lighting</u> is in good working order. Light globes are in place covering exposed bulbs	X		
6. Any <u>Exterior stairs, guardrails, landings, decks, balconies, treads, risers, and balusters</u> are in good condition and free from visible structural defects or deterioration.	X		
7. <u>Chimneys</u> are in good condition and have spark arrestors (if required).		X	
8. <u>Exterior doors</u> open and shut properly, have proper weatherization, and locking mechanisms. Solid core doors between garage and dwelling are maintained and self closing.	X		
9. <u>Window guards:</u> All exterior window guards open and have approved lock and release mechanisms for <u>emergency exit</u> .		X	
10. <u>Antennas, vents and similar projections or building accessories</u> are in good condition and, when applicable, are properly secured to an exterior wall or roof.		X	
11. <u>Accessory structures</u> are in good condition.		X	
12. <u>Peenholes</u> are installed on entry doors when visitor is not visible from a window.			
13. <u>Driveways, Parking Areas, Carports, and Garages</u> are in good condition.	X		
14. <u>Landscaping</u> is properly maintained and is free of garbage, junk, debris, and animal feces.	X		
15. <u>Garbage service</u> must be maintained. Adequate refuse containers must be provided on site, stored out of public view, and kept in proper enclosures by the tenant or property owner.	X		
16. <u>Fences and gates</u> are properly maintained and are in working condition.	X		
17. <u>Swimming pool</u> water appears clear and clean. Pool gates and enclosures are in compliance.		X	
18. <u>Windows</u> can be opened and are equipped with working locking devices that are accessible from the interior. Windowpanes must be intact, unbroken, and not cracked. All windows in bedrooms or sliding glass doors must be operable and open completely for emergency exit. Windows have proper weatherization.	X		
19. <u>Window screens</u> , if installed, are in good condition	X		
20. <u>Hot/Cold Running Water:</u> Unit must have hot and cold running water.	X		

GENERAL & INTERIOR REQUIREMENTS: VERIFY COMPLIANCE	PASS	N/A	COMMENTS
21. <u>Sewage System</u> is functioning and clear of any surfacing sewage indoors or outdoors. Exterior cleanout lines are unobstructed and in good condition.	X		
22. <u>Electrical Power</u> : Unit(s) must have electrical power. All electrical outlets are functional and have cover plates. All overhead lighting is operational, in good repair, and secure. There are no exposed, spliced, or bare live wires. Use of extension cords or electrical adapters are not excessive.	X		
23. <u>Electrical Panel</u> : All breakers must be properly labeled and identified, no open slots or exposed wires. Electrical service panels, meters and enclosures must be properly maintained and weatherized.	X		
24. Any required <u>GFCI's</u> in kitchens and bathrooms must be installed properly and in working condition.	X		
25. <u>Smoke Alarms</u> must be working and properly installed in each room used for sleeping, hallways leading to rooms used for sleeping, and in all levels including basements.	X		
26. <u>Carbon Monoxide Alarms</u> must be in good working condition, and properly installed at every level including basements.	X		
27. <u>Heat</u> : Unit must have a functioning adequate heating source. This excludes portable heating units. Electrical or gas heaters must function properly. Wood/gas fireplace must be properly vented and maintained. The vent pipes that serve gas heating appliances are properly installed and terminated above the roofline with vent caps (Direct vent heaters are exempt).	X		
28. <u>Water heater</u> works properly, supplies water at a minimum of 120 degrees F, and has a working pressure relief valve and approved drain line on the pressure relief valve. The water heater is properly strapped or secured.	X		
29. <u>Infestations</u> : Property is free of infestations that may cause health and safety issues or, if there is an infestation, it is being actively addressed in a timely manner.	X		
30. <u>Mechanical</u> : All mechanical equipment in the unit(s) must properly function including: appliances, venting systems, thermostats, and air conditioning unit (if provided).	X		
31. <u>Plumbing</u> : Unit(s) must have proper plumbing throughout the unit. Any sinks, toilets, bathtubs, or showers are free of leaks, and drain freely.	X		
32. <u>Floors</u> must not be in a defective or deteriorating condition that could cause a trip or fall hazard or impact sub-flooring. Sub-flooring must be in good condition without buckling or sagging which suggest structural defects. Floor coverings are free of trip hazards.	X		
33. <u>Gas</u> : Gas appliances (if furnished) are free of gaseous odors. Immediately report gas leaks or odors to PG&E 800-743- 5000. All gas lines must have shut off valves at the appliance connection. All service gas lines are free of leaks.	X		
34. <u>Sinks, bathtubs, toilets, and/or shower surrounds</u> are in good condition, drain properly, and are free of faucet or other types of leaks. Toilets sit secure, as well as any installed towel bars or accessories. Sinks, bathtubs, and/or shower surrounds are in good condition.	X		
35. No visible <u>mold</u> in the unit /dwelling	X		
IN ADDITION TO THE ABOVE			
BELOW ITEMS ARE REQUIRED FOR TRIPLEXES AND APARTMENTS ONLY	PASS	N/A	COMMENTS
36. <u>Fire Extinguishers</u> must be properly serviced, labeled, stored, and installed according to the State Fire and Safety Codes.	X		
37. Existing <u>Fire Lanes</u> must be clearly marked with signage or paint or both.		X	
38. All " <u>EXIT</u> " signs and exit lighting is in working order (if applicable). ALL exits are clear, including corridors & stairs, unobstructed all the way to public right of way.	X		
39. If applicable: If <u>high-pressure gas boiler system</u> (not water heater) is used, the boiler heating system is maintained and works properly.		X	
40. <u>Storm drains</u> are clear of debris and in good condition.		X	
41. <u>Doors</u> : Fire doors are operable and maintained to meet fire code requirements. Swinging entry doors are equipped with deadbolt locks and passage door locks with deadlocking latches. All locks work. (If applicable). Exterior solid core doors are maintained and self closing (if required).		X	
42. <u>Business License</u> : In accordance with SMC 5.08.030(22), a business license is required if having 3 or more rental units and/or properties.	X		

CIM

12/9/2022

JONATHAN ALEGRIA
NEW CASE INFO

Case #: 22-00200120
Case Type: A - PUBLIC NUISANCE
Address: 535 W FLORA ST
Suite/Apt #: UNIT #1

APN: 137 163 13
Origination: CITIZEN COMPLAINT
Police District: 119 CS
City Limits: STOCKTON
Ask Stockton Case #:

Complaint Information:

ELECTRICAL ISSUES - UNABLE TO
USE APPLIANCES

Ownership Information Change:

Current Property Owner Information:

DABNEY DAVID A & NONA
PO BOX 42

STOCKTON, CA 95201

Recorded

Date Recorded _____

1/10/2022

JONATHAN ALEGRIA
NEW CASE INFO

Case #: 22-00186042
Case Type: A - PUBLIC NUISANCE
Address: 535 W FLORA ST 1
Suite/Apt #:



APN: 137 163 13
Origination: CITIZEN COMPLAINT
Police District: 119 CS
City Limits: STOCKTON
Ask Stockton Case #:

Complaint Information:

electrical issues- no fridge
will show other issues upon
arrival

Ownership Information Change:



Current Property Owner Information:

DABNEY DAVID A & NONA
PO BOX 42

STOCKTON, CA 95201

Recorded

Date Recorded _____

Property Detail Report

For Property Located At :
535 W FLORA ST, STOCKTON, CA 95203-2413



Owner Information			
Owner Name:	DABNEY DAVID A/DABNEY NONA J		
Mailing Address:	PO BOX 42, STOCKTON CA 95201-0042 B001		
Vesting Codes:	HW // JT		
Location Information			
Legal Description:	WEST/CENTER STREET BLK 54 LOT 4		
County:	SAN JOAQUIN, CA	APN:	137-163-13
Census Tract / Block:	4.01 / 2	Alternate APN:	
Township-Range-Sect:		Subdivision:	
Legal Book/Page:	137-16	Map Reference:	137-16 /
Legal Lot:	4	Tract #:	
Legal Block:	54	School District:	STOCKTON
Market Area:		School District Name:	STOCKTON
Neighbor Code:	028	Munic/Township:	
Owner Transfer Information			
Recording/Sale Date:	/	Deed Type:	
Sale Price:		1st Mtg Document #:	
Document #:			
Last Market Sale Information			
Recording/Sale Date:	05/27/2003 / 06/16/2003	1st Mtg Amount/Type:	\$156,000 / CONV
Sale Price:	\$195,000	1st Mtg Int. Rate/Type:	/ FIXED
Sale Type:	FULL	1st Mtg Document #:	113042
Document #:	113041	2nd Mtg Amount/Type:	/
Deed Type:	GRANT DEED	2nd Mtg Int. Rate/Type:	/
Transfer Document #:		Price Per SqFt:	\$77.75
New Construction:		Multi/Spilt Sale:	
Title Company:	FINANCIAL TITLE		
Lender:	WELLS FARGO HM MTS INC		
Seller Name:	SANCHEZ M A 1989 TRUST		
Prior Sale Information			
Prior Rec/Sale Date:	10/27/1988 /	Prior Lender:	
Prior Sale Price:		Prior 1st Mtg Amt/Type:	/
Prior Doc Number:	8169	Prior 1st Mtg Rate/Type:	/
Prior Deed Type:	DEED (REG)		
Property Characteristics			
Gross Area:	2,508	Parking Type:	GARAGE
Living Area:	2,508	Garage Area:	
Tot Adj Area:		Garage Capacity:	2
Above Grade:		Parking Spaces:	
Total Rooms:		Basement Area:	
Bedrooms:	5	Finish Bsmnt Area:	
Bath(F/H):	4 /	Basement Type:	
Year Built / Eff:	1900 /	Roof Type:	
Fireplace:	/	Foundation:	
# of Stories:	2	Roof Material:	
Other Improvements:	Building Permit		
Site Information			
Zoning:	>	Acres:	>0.11
Lot Area:	>5,000	Lot Width/Depth:	> x
Land Use:	>QUADRUPLEX	Res/Comm Units:	> /
Site Influence:	>	County Use:	>FOURPLEX (034)
		State Use:	>
		Water Type:	>
		Sewer Type:	>
Tax Information			
Total Value:	\$260,901	Assessed Year:	2021
Land Value:	\$77,601	Improved %:	70%
Improvement Value:	\$183,300	Tax Year:	2021
Total Taxable Value:	\$260,901	Property Tax:	\$3,225.08
		Tax Area:	003344
		Tax Exemption:	



POLICE DEPARTMENT
 NEIGHBORHOOD SERVICES SECTION
 22 EAST WEBER AVENUE, ROOM 350
 STOCKTON, CA 95202
 OFFICE HOURS M-F/ 8-12 & 1-5

PHONE: (209) 937-8813
 FAX: (209) 937-7264

NOTICE OF VIOLATION

Notice of Intent to Record this Notice of Violation

Violation Warning Notice Administrative Citation / Fine \$ **NSS#JA011122-535**

() Initial Inspection Fee \$ () Case Processing Fee \$ () Hotel/Motel Reinspection \$
 () Reinspection Fee \$ () Notice & Posting Fee \$

Violation Address: **535 W FLORA ST** Parcel #: **13716313**

Person Cited: Property Owner () Tenant () Other

Name: **DABNEY, DAVID A and NONA J**

Mailing Address: **PO BOX 42 STOCKTON CA 9520142**

SMC Section Violated	Violation/Correction Required
<input checked="" type="checkbox"/> 8.36.040 A, F, G, H	Remove accumulation of garbage, junk, and/or debris.
<input checked="" type="checkbox"/> 8.04.030	Require adequate garbage service to apartment complex. (i.e., more containers)
<input checked="" type="checkbox"/> UHC 701.2	In unit 1 remove all extension cords that are being used as permanent source of electricity for refrigerator. Ensure kitchen outlet for refrigerator is operating efficiently. If necessary, obtain a license electrician for an assessment.
<input type="checkbox"/>	
<input type="checkbox"/>	

() NOTE: PLEASE REFER TO PAGE TWO (ATTACHED) FOR OTHER NOTED VIOLATIONS OR ADDITIONAL COMMENTS.

(X) Violations must be corrected no later than 01/21/22. In order to avoid additional citations or other actions, including recording of this Notice, the violation(s) must be corrected or a possible fine and/or fee may be charged.

NOTICE OF INTENT TO ABATE

(X) If the violation(s) are not corrected by 01/21/22, the City of Stockton intends to **abate** the violation(s). The City will hire contractors to correct the violation(s) and the cost of the corrections as well as administrative fees will be charged to the responsible party. The City will record the cost of the abatement, if violations are not corrected by the above date.

Issuing Officer signature: Jonathan A Print Name Jonathan A

Phone: (209)937-8207 Date: 1/11/2022 Time: 3:10 PM Case #: 22-00186042

Signature of Person Cited: N/A Phone #: N/A

Signing the Citation only acknowledges receipt, it is not an admission of guilt. The Citation is valid without a signature.

CC: _____

NOTICE OF VIOLATION

City of Stockton Municipal Code, Chapter 1, provides for the reimbursement of costs associated with obtaining compliance with the ordinances. In an effort to recover these costs, the Initial Inspection Fees, Case Processing Fees, Reinspection Fees, Notice of Preparation Fees, Posting Fees, and Lien Processing Fees are charged. In addition, there is a provision for the issuance of Notice of Violation with a fine of **\$200** and/or **\$500**. Each section violated is a separate offense and may carry an independent fine. Likewise, each day any violation exists is a separate offense.

Rights of Appeal

Cost reimbursement items (Inspection Fees, Case Processing Fees, Notice and Posting Fees etc.) **are not** subject to appeal. The Notice of Intent to Abate, \$200 or \$500 Administrative Fine & Notice of Intent to Record may be appealed by filing the proper appeal form **within ten (10) business days** from the date the Notice was issued. If the Notice was mailed, the appeal must be made **within ten (10) business days** from the date the Notice was mailed. An appeal must be made in writing, on the proper "Administrative Hearing Request Form", to the City of Stockton, Neighborhood Services Section, 22 East Weber Avenue, Room 350, Stockton, CA 95202. **There is a non-refundable Administrative Hearing Fee which must accompany the appeal form.**

Failure of any person to properly file a written appeal and remit the required amount within ten (10) business days shall constitute a waiver of his/her right to an Administrative Hearing; an adjudication of the Notice of Violation or any part of it, and the total amount of the fine. Filing an appeal does not prevent subsequent code enforcement actions; however, all subsequent actions will be addressed at the hearing and do not require filing additional appeal forms.

Payment

The amount of the fine/fee is indicated on the front of this Notice of Violation. **Cash payments must be made in person at the Administrative Services Department, City Hall, 425 North El Dorado Street or the Neighborhood Services Section, 22 East Weber Avenue, Room 350, Stockton, CA 95202. Check, credit card or money order payments may be mailed to the Neighborhood Services Section address above.** An invoice will be mailed out with a due date for payment.

Consequences of Failure to Pay

Violation fines not paid within **60 days** will be charged a **penalty of 10%, along with a 1% monthly interest fee**. All other fees not paid within **25 days** will be charged a **1% monthly interest fee**. Property owners failing to pay the amount due by the due date are subject to liens and/or assessments to the property tax along with additional costs for administrative processing. The City of Stockton has the authority to collect all costs associated with the filing of such actions. Alternatively, the City may collect the fine in a civil or small claims court action.

Consequences of Failure to Correct Violations

There are numerous enforcement options that can be used to encourage the correction of violations. These options include, but are not limited to: civil penalties, abatement, criminal prosecution, civil litigation, recording the violation with the County Recorder, and forfeiture of certain State tax benefits for substandard residential rental property. These options authorize the City to collect fines in excess of **\$100,000** per year, demolish structures, make necessary repairs at the owner's expense, and incarcerate violators. Any of these options or others may be used if the Notice of Violation(s) do not achieve compliance.

Your maintenance of substandard housing may subject you to loss of deductions for interest, taxes, depreciation and amortization pursuant to the Revenue & Taxation Code of the State of California, Sections 17274 and 24436.5

City of Stockton
Police Department
Neighborhood Services
22 E Weber Av, Ste 300
Stockton, CA 95202



9314 8699 0430 0090 6142 80
RETURN RECEIPT (ELECTRONIC)



Total Postage: \$6.13

22-186042 JA011122-535
DABNEY, DAVID A & NONA J
PO BOX 42
STOCKTON, CA 95201

Reference Number: 535 W FLORA ST

CASE TYPE: Assessor's Parcel Number
 ADDRESS: B - HOUSING CODE APARTMENT
 137 163 13
 535 W FLORA ST
 STOCKTON CA 95203

DATE ESTABLISHED: 8/25/22
 INSPECTOR: RENTAL INSPECTOR 1
 TENANT NAME: TENANT NBR: 1/11/23
 STATUS: ACTIVE SELF CERT

CASE DATA:
 COMPLAINT INFORMATION
 COMPLAINT INFORMATION
 COMPLAINT INFORMATION
 INSIDE/OUTSIDE CITY LIMITS
 REPORTING/POLICE DISTRICT
 AR ACCOUNT NUMBER
 USE CODE DESCRIPTION
 OWNER INFORMATION CHANGE-DEED
 OWNER INFORMATION CHANGE-DATE
 OWNER INFORMATION CHANGE
 ASK STOCKTON CASE NUMBER

STOCKTON
 119 CS
 1104

NOTICE NAMES: DABNEY DAVID A & NONA OWNER

HISTORY:	SCHEDULED ACTION	STATUS	RESULTED	INSPECTOR	TIME
Respond to:	9/13/22 R - RENTAL PACKET MAILED	ISSUED	9/13/22		
Send to:	OWNER				
Mail tracking #:					
Mail tracking #:	DABNEY DAVID A & NONA				
Name/address:	PO BOX 42				
	STOCKTON, CA 95201				

Telephone:
 Fax:
 Email:

2/01/23	R - SELF CERT 30 DAY WINDOW	COMPLETED	1/11/23	RENTAL INSPECTOR 1	
	ROST TEXT: Time Stamp: 09/13/2022 01:23				9/13/22
	RSLT TEXT: Time Stamp: 01/11/2023 10:33				1/11/23
1/11/23	R - SELF CERTIFIED UNITS	COMPLETED	1/11/23		
	NARRATIVE: Time Stamp: 01/11/2023 10:33				1/11/23
	RECEIVED SC PACKET WITH FEES - APPROVED & CHANGING STATUS				1/11/23
	"AS" CHECK #156 \$336.00				1/11/23
1/11/23	R - OWNER INFORMATION	COMPLETED	1/11/23		
	NARRATIVE: Time Stamp: 01/11/2023 10:33				1/11/23
	NONA DABNEY				1/11/23
	PO BOX 42				1/11/23
	STOCKTON CA 95201				1/11/23
	NDABNEY@SBCGLOBAL.NET				1/11/23

TOTAL TIME:

CASE TYPE: PUBLIC NUISANCE
Assessor's Parcel Number: 137 163 13
ADDRESS: 535 W FLORA ST 1 STOCKTON CA 95203

DATE ESTABLISHED: 1/10/22
INSPECTOR: JONATHAN ALEGRIA
STATUS: IN COMPLIANCE
TENANT NAME: [REDACTED]
TENANT NBR: [REDACTED]
STATUS DATE: 1/31/22

CASE DATA: COMPLAINT INFORMATION
COMPLAINT INFORMATION
COMPLAINT INFORMATION
INSIDE/OUTSIDE CITY LIMITS
REPORTING/POLICE DISTRICT
AR ACCOUNT NUMBER
USE CODE DESCRIPTION
OWNER INFORMATION CHANGE-DEED
OWNER INFORMATION CHANGE-DATE
OWNER INFORMATION CHANGE
ASK STOCKTON CASE NUMBER

electrical issues- no fridge
will show other issues upon
arrival
STOCKTON
119 CS
1104

NOTICE NAMES: DABNEY DAVID A & NONA OWNER REPORTING PARTY [REDACTED]

HISTORY: SCHEDULED ACTION
1/10/22 NEW CASE INFO
Respond to: OWNER
Send to: OWNER
Mail tracking #: [REDACTED]
Name/address: DABNEY DAVID A & NONA
PO BOX 42
STOCKTON, CA 95201
Telephone: [REDACTED]
Fax: [REDACTED]
Email: [REDACTED]

1/10/22 C-COMPLAINT COMPLETED 1/10/22
NARRATIVE: Time Stamp: 01/10/2022 10:03 AM EREDINA
electrical issues- no fridge
will show other issues upon arrival
Time Stamp: 03/14/2022 03:19 PM SNORMAN
Time Stamp: 04/04/2022 11:37 AM SNORMAN
1/11/22 C-PRELIMINARY ACTION COMPLETED 1/12/22
ROST TEXT: Time Stamp: 01/10/2022 10:03 AM EREDINA
PSLW TEXT: Time Stamp: 01/12/2022 12:14 PM MEMOS
JONATHAN ALEGRIA
1/11/22 C-TELEPHONE CALL COMPLETED 1/11/22
NARRATIVE: Time Stamp: 01/11/2022 04:26 PM JALBERRIA
GAVE PO NONA A CALL AT 209.639.9237 LEFT VM STAYING THE VIOLATIONS.
1/11/22

CASE HISTORY REPORT
 CASE NUMBER 22-00186042

CASE TYPE: Assessor's Parcel Number
 ADDRESS: 137 163 13
 535 W FLORA ST 1
 STOCKTON CA 95203

DATE ESTABLISHED: 1/10/22
 INSPECTOR: JONATHAN ALGERIA
 TENANT NAME: JONATHAN ALGERIA
 STATUS: IN COMPLIANCE
 TENANT NBR: 1/31/22

HISTORY: SCHEDULED ACTION STATUS RESULTED INSPECTOR TIME

1/11/22 C-VIOLATION WARNING (OWNER) COMPLETED 1/11/22
 NARRATIVE: Time Stamp: 01/12/2022 12:14 PM MLEMS
 VVN NSS JA011122.535 ISSUED TO PO
 MAILED C/R TO PO 9314 8699 0430 0090 6142 80
 JONATHAN ALGERIA

1/24/22 C-INITIAL INSPECTION COMPLETED 1/31/22
 ROST TEXT: Time Stamp: 01/12/2022 12:15 PM MLEMS
 RSLT TEXT: NO GARBAGE ON PROPERTY CLOSING CASE TN CM
 JONATHAN ALGERIA

1/27/22 C-TELEPHONE CALL COMPLETED 1/27/22
 NARRATIVE: Time Stamp: 01/27/2022 09:20 AM JALGERIA
 SPOKE TO PO AT 209.639.9237 SHE STATED SHE NEVER PROVIDED
 FRIDGE FOR TENANT THAT IS NOT HER RESPONSIBILITY. I WILL GO
 BY AND VERY GJD REMOVED AND MONITOR TOTERS. SHE SAID GFCI
 OUTLET WORKS FINE. WILL CALL TENANT.
 Time Stamp: 04/04/2022 11:38 AM SNORMAN

1/27/22 C-TELEPHONE CALL COMPLETED 1/27/22
 NARRATIVE: Time Stamp: 01/27/2022 09:32 AM JALGERIA
 LEFT TENANT A VM STATING I SPOKE TO PO AND SHE HAS FIXED
 GFCI OUTLET. SHE STATED IT TRIPPED. NO NEED FOR EXTENSION.
 GARBAGE IS CLEANED.
 Time Stamp: 03/14/2022 03:22 PM SNORMAN
 Time Stamp: 04/04/2022 11:38 AM SNORMAN

1/31/22 C-CLOSE CE CASE (both sides) COMPLETED 1/31/22
 C-TELEPHONE CALL COMPLETED 3/11/22
 NARRATIVE: Time Stamp: 03/14/2022 03:23 PM SNORMAN
 Call from tenant [REDACTED] stating
 fuse box out the morning of 03-11-22. Wants Jonathan to
 call her. Emailed Jonathan.

TOTAL TIME: 3/14/22
 3/14/22
 3/14/22

CASE TYPE: Assessor's Parcel Number
 ADDRESS: 137 163 13
 535 W FLORA ST
 STOCKTON CA 95203

INSPECTOR: JONATHAN ALEGRIA
 DATE ESTABLISHED: 12/09/22
 TENANT NAME: JONATHAN ALEGRIA
 TENANT NBR: UNIT #1
 STATUS: IN COMPLIANCE
 STATUS DATE: 12/12/22

CASE DATA: COMPLAINT INFORMATION
 COMPLAINT INFORMATION
 COMPLAINT INFORMATION
 INSIDE/OUTSIDE CITY LIMITS
 REPORTING/POLICE DISTRICT
 AR ACCOUNT NUMBER
 USE CODE DESCRIPTION
 OWNER INFORMATION CHANGE-DEED
 OWNER INFORMATION CHANGE-DATE
 OWNER INFORMATION CHANGE
 ASK STOCKTON CASE NUMBER

ELECTRICAL ISSUES - UNABLE TO
 USE APPLIANCES
 STOCKTON
 119 CS
 1104

NOTICE NAMES: DABNEY DAVID A & NONA
 OWNER REPORTING PARTY

HISTORY: SCHEDULED ACTION
 12/09/22 NEW CASE INFO
 Respond to: OWNER
 Send to: OWNER
 Mail tracking #: OWNER
 Name/address: DABNEY DAVID A & NONA
 PO BOX 42
 STOCKTON, CA 95201

STATUS: ISSUED 12/09/22
 Date: 0/00/00

INSPECTOR: JONATHAN ALEGRIA

Telephone:
 Fax:
 Email:

12/09/22 C-COMPLAINT COMPLETED 12/09/22
 NARRATIVE: Time Stamp: 12/09/2022 10:04 AM FREDINA
 ELECTRICAL ISSUES UNABLE TO USE APPLIANCES
 Time Stamp: 12/09/2022 01:45 PM JPRUTCH
 Time Stamp: 12/09/2022 01:46 PM JPRUTCH

12/12/22 C-PRELIMINARY ACTION COMPLETED 12/12/22
 ROST TEXT: Time Stamp: 12/09/2022 10:04 AM FREDINA
 RSLT TEXT: Time Stamp: 12/12/2022 12:46 PM GRAMIREZ
 I spoke with the tenant and she said yesterday, 12/10/2022
 the owner sent an electrician out to replace the plug.
 Closing case in compliance.

JONATHAN ALEGRIA

12/12/22 C-CLOSE CE CASE (both sides) COMPLETED 12/12/22

TOTAL TIME: