

Appeal No. G055075

In the California Court of Appeal
Fourth Appellate District, Division Three

Adam Bereki
Respondent Below and Appellant

v

Karen and Gary Humphreys
Petitioners Below and Respondents

Appeal from the Superior Court County of Orange
Case No. 30-2015-00805807
Hon. David Chaffee


**APPELLANTS REQUEST FOR PERMISSION FOR
LATE TRANSMITTAL OF TRIAL EXHIBITS**

Adam Bereki
In Propria Persona
818 Spirit
Costa Mesa, California
949.241.6693
abereki@gmail.com

Appellant Adam Bereki respectfully requests permission for the transmission of trial exhibits in the appeal of this matter after the period specified for such transmittal as set forth in California Rule of Court 8.224(c) which provides: "After the periods specified in (a) have expired, a party may apply to the reviewing court for permission to send an exhibit to that court." This request is made on the further ground that the Court's late receipt of the exhibits sought to be transmitted (annexed hereto) will not prejudice any party and is necessary to provide a complete record on this appeal.

It should also be considered Appellant believes he may have already transmitted the EXHIBITS in his Motion To Augment The Record dated 1/26/18, however this may have not been the most proper procedure within the Rules of Court. He is resubmitting the EXHIBITS as part of this transmission out of prudence and respect for the Court's procedure.

Dated March 8, 2018



Adam Bereki

APPELLANTS EXHIBITS

Spartan v Humphreys– G055075

<u>EXHIBIT No.</u>	<u>DESCRIPTION</u>
18	INVOICES FOR RESPONDENTS PROJECT (emails removed as not referenced)
30-1	SPARTAN CONSTRUCTION SIGN ON BUILDING
31	SPARTAN INTERIOR AND EXTERIOR DESIGN PRESENTATION
32	EXTRACT OF COMPENSATION PAID CHECK AND WIRE TRANSFERS
33	MISC. CONTRACTS FOR RESPONDENTS PROJECT THE SPARTAN ASSOCIATES, INC.
34	PERMITS, THE SPARTAN ASSOCIATES, INC.
35	WORKERS COMP/PAYROLL THE SPARTAN ASSOC. INC.
38	NOTICE OF CESSATION OF LABOR- THE SPARTAN ASSOC. INC.
39	SPARTAN INVOICES PREVIOUS PROJECTS
303	INITIAL EMAILS

Extract of Checks/Wire Transfers from Humphreys to Bereki/Spartan

Check#/Wire Transfer	Date	Amount	Payee	Running Total
1. 1077	Apr. 13, 2012	✓ \$15,000 ✓	Adam Bereki	\$15,000 <i>AB</i>
2. 101	May 17, 2012	✓ \$15,000 ✓	Adam Bereki	\$30,000 <i>AB</i>
3. Wells WT	June 8, 2012	✓ \$40,000 ✓	Adam Bereki	\$70,000 <i>AB</i>
4. Wells WT	June 22, 2012	✓ \$30,000 ✓	Adam Bereki	\$100,000 <i>AB</i>
5. Wells WT	July 19, 2012	✓ \$45,000 ✓	Spartan Const.	\$145,000
6. 3815	Aug. 31, 2012	✓ \$30,000 ✓	Spartan Const.	\$175,000
7. 140	Nov. 15, 2012	✓ \$50,000 ✓	Spartan Const.	\$225,000
8. 3853	Dec. 8, 2012	✓ \$30,000 ✓	Adam Bereki	\$255,000 <i>ST</i>
9. 3856	Dec. 14, 2012	✓ \$30,000 ✓	Adam Bereki	\$285,000 <i>ST</i>
10. 3860	Dec. 31, 2012	✓ \$28,000 ✓	Adam Bereki	\$313,000 <i>ST</i>
11. 16657	Jan. 21, 2013	✓ \$80,000 ✓	Spartan Associates	\$393,000
12. 16693	Feb. 14, 2013	✓ \$60,000 ✓	Spartan Associates	\$453,000
13. 16747	Mar. 18, 2013	✓ \$75,000 ✓	Spartan Associates	\$528,000
14. 16784	Apr. 15, 2013	✓ \$95,000 ✓	Spartan Associates	\$623,000
15. 16819	May 24, 2013	✓ \$95,000 ✓	Spartan Associates	\$718,000
16. 3942	June 8, 2013	✓ \$40,000 ✓	Spartan	\$758,000
17. 16904	July 31, 2013	✓ \$90,000 ✓	Spartan Associates	\$848,000



Adam Bereki <abereki@gmail.com>

\$

Karen Humphreys <kmoehumphreys@yahoo.com>
To: Adam Bereki <abereki@gmail.com>

Thu, Jul 19, 2012 at 1:59 PM

Hi Adam,
I just got back from wiring \$45K to the Spartan Construction account. It should go out today. Also, I have a question. Did we discuss what kind of vanity to put in the new bathroom? I recall talking about the fixtures and sink but not the vanity.
Thanks,
Karen

PS Do you think it would be ok for us to swing by the project next Wednesday afternoon?

Adam Bereki <abereki@gmail.com>
To: Karen Humphreys <kmoehumphreys@yahoo.com>

Thu, Jul 19, 2012 at 3:28 PM

Karen,

Thank you!

So, we haven't discussed the vanities yet. Can u give me some features you would like to have so I can include them in the design?

Absolutely, please stop by. Give me a call and I can meet you there. Be forewarned though it's bare studs and a really creaky uneven floor.

A
[Quoted text hidden]

Karen Moe Humphreys <kmoehumphreys@yahoo.com>
To: Adam Bereki <abereki@gmail.com>

Fri, Jul 20, 2012 at 9:38 AM

I think the main thing is that I do not want a white vanity in the master bath because of using makeup products in there. We don't have any unusual needs for space or anything. 34" inch height (+ counter) is best and undermount sink(s). We might want to do a vessel sink in the half bath.

Karen
[Quoted text hidden]

Adam <abereki@gmail.com>
To: Adam Bereki <abereki@gmail.com>

Wed, Feb 1, 2017 at 4:01 PM

[Quoted text hidden]

View Check Copy

Check Number	Date Posted	Check Amount	Account Number
101	05/21/12	\$15,000.00	PMA PRIME CHECKING ACCOUNT XXXXXX1518

Karen M. Humphreys
 Karen M. Humphreys
 801-425-1310
 11-425-1310

101
 May 17, 2012
 Date

Pay to Adam Berek
 Fifteen thousand and 00/100
 \$15,000

Wells Fargo
 11-425-1310
 11-425-1310

For LDO remodel
 Karen M. Humphreys

000135

32-4

[View Check Copy](#)

Check Number	Date Posted	Check Amount	Account Number
140	11/19/12	\$50,000.00	PMA PRIME CHECKING ACCOUNT XXXXXX1518

Mary. Mae Humphreys
 Mary E. Humphreys
 H.H. Legado, Jr.
 Memphis, Tenn. 38104-2011

11-42070-415
 40001010

140

4/15/12

Pay to Spanton Construction \$ 50,000.00
 Fifty thousand and 00/100 Dollars

PNC Bank, N.A.
 Federal Reserve Bank, N.A.
 1234 Main Street
 Memphis, TN 38104

Lido

Karen M. Humphreys

Tel: 0976-283333 Fax: 0976-283333

CREDITED TO ACCOUNT OF
WITHIN NAMED PAYEE
FOR DEPOSIT ONLY
JP Morgan Chase Bank, N.A.

၆၆၆၆၆၆

32-5

[View Check Copy](#)


Check Number	Date Posted	Check Amount	Account Number
3815	09/18/12	\$30,000.00	WELLS FARGO GOLD PACKAGE CHECKING XXXXXX1323

Garret C. Humphreys
505 Niagara Drive 525-376-1425
Birmingham, CA 94556

3815

31 August 2012

Paid to the order of Spartan Construction \$ 39,000.00
Thirty thousand and 00/100 dollars

 Wells Fargo Bank, N.A.
Cashier's check
Waterproof paper

for Lido Thom Humphreys

100-443886-100

uuuio7

32-0

View Check Copy

Check Number	Date Posted	Check Amount	Account Number
3853	12/14/12	\$30,000.00	WELLS FARGO GOLD PACKAGE CHECKING XXXXXX1323

3853
12/14/2012 4410
07/20/12

3853
December 2012
\$ 30,000.00

Pay to the order of Adam Berchi
Thirty Thousand and 00/100

Wells Fargo Bank, N.A.
San Francisco, CA 94105

Wells Fargo Bank, N.A.
San Francisco, CA 94105

Wells Fargo Bank, N.A.
San Francisco, CA 94105

000158

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View Check Copy

Check Number	Date Posted	Check Amount	Account Number
3856	12/29/12	\$30,000.00	WELLS FARGO GOLD PACKAGE CHECKING XXXXXX1323

3856
12/29/12

Pay to the order of Alison Bercker \$ 30,000.00
Theresa Thompson Dollars

For Auto Loan Theresa Thompson

14 December 2012

3856
12/29/12

32-8

000139

32-8

View Check Copy

Check Number	Date Posted	Check Amount	Account Number
3860	01/14/13	\$28,000.00	WELLS FARGO GOLD PACKAGE CHECKING XXXXXX1323

Gary C. Humphreys
308 Augusta Drive 925-376-4445
Menlo Park, CA 94025

3860

31 December, 2012

Pay to the order of *Adam B. ...*

Gary C. Humphreys

[Redacted]

Microprint area with vertical lines and text.

000140

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Wire Transfer Services Outgoing Wire Transfer Request



A customer or team member, with the customer present, completes this form when requesting to send a wire. Outgoing wires can only be sent for Wells Fargo customers. Retain the original copy and provide a copy to the customer ensuring you give the customer the Agreement for Outgoing Wire Transfer Request (page 2 when form is accessed on-line & preprinted on the back of printed forms). Note: Wells Fargo Wire Transfer Services will route wires based on correspondent banking relationships. See back (page 2) for explanations of the Mexican CLABE account, the SWIFT BIC, the International Routing Code (IRC) and the International Bank Account Number (IBAN). *Required Information is noted with an asterisk.

*Today's Date June 22, 2007 *Send Date (If next day submit wire after 4:30 CT, Store must hold if other than today or next day date.) June 22, 2007

1. Originator's Information

*Customer's Name Adam B. Borelli *Phone Number 485 374 1400
*Customer's Physical Address, City, State, Zip Code 525 Augusta Dr. MD. 20604
*Transfer from Wells Fargo Checking account or 10-digit command account 30,000 *U.S. Dollar Wire Amount
International Wire Only: When sending in foreign currency, please ensure the beneficiary's account accepts the designated currency.
Funds to be sent in foreign currency ☐ Yes ☒ No Foreign Currency Type/Name (SVI/SVP will default to FX unless specified otherwise) *Currency Code (if known) *Foreign Currency Amount

2. Beneficiary/Recipient Information (This is the ultimate recipient of the wire transfer funds.)

*Beneficiary/Recipient Name ADAM BORELLI
*Beneficiary Account Number [REDACTED] (IBAN where applicable)
Beneficiary's Physical Address [REDACTED] (for international wires)
Information for the Beneficiary (Invoice number, purchase order number, etc.) [REDACTED] Beneficiary Phone Number [REDACTED]

3. Beneficiary Bank Information (This is the financial institution where the beneficiary maintains their account.)

*Beneficiary Bank RTN or SWIFT Bank Identifier Code (SWIFT BIC) JP MORGAN CHASE BANK NA *International Routing Code (IRC)
*Beneficiary Bank Name JP MORGAN CHASE BANK NA
Beneficiary Bank Address, City, State, Zip Code & Country (optional information)
Information for Beneficiary Bank (wires to Mexican banks require the CLABE account number in the Beneficiary instructions to ensure correct payment.)

4. Intermediary Bank Information (This is a financial institution that the wire must pass through before reaching the final beneficiary bank.) This section is optional and not required for all wires. Please note that routing may be altered depending on Wells Fargo Bank's correspondent relationships.

Optional: *Intermediary Beneficiary Bank RTN or SWIFT BIC [REDACTED] International Routing Code (IRC)
*Intermediary Bank Name [REDACTED] *Intermediary Bank Account No.
Intermediary Bank Address, City, State, Zip, Country (optional information)
Information for Intermediary Bank

5. Wire Fee & Customer Signature (Additional fees from intermediary and beneficiary banks may be charged to international transactions - see Fee Section on page 2 of this form.)

Wire Fee Amount (The Transfer From Account will be charged the fee.) The region that houses the account being debited determines the fee amount. Use the fee information available through Teamworks and/or the Banker's Guide. Do not use SVT/SVP for fee when the account is not in your region. Additional fees may apply (see page 2 of this form). Contact WBR Store Support for questions regarding Command Fees.
*AU where the Originator's account is located 30.00 *Fee Amount
My signature here indicates agreement to all of the information on this Outgoing Wire Transfer Request and to the terms and conditions on the second page of this request. Wells Fargo is authorized to rely on the information on this Request in making the requested funds transfer.
*X [Signature] *Date June 22, 2007

6. Wells Fargo Use Only - Wells Fargo Approval - Following MUST be completed for ALL outgoing wires.

International Wire Foreign Currency Information
Rate [REDACTED] Contract No. (Required when \$100,000 or more U.S. \$) [REDACTED] FX Trader Contact [REDACTED]
*Wire Transaction/FAS Number 174-569967 *Name on ID used by customer [REDACTED] Method used to verify business acct transaction authority [REDACTED]
*1st ID type, number, issued by State/Country & Expiration Date [REDACTED] *2nd ID type, number, issued by State/Country & Expiration Date [REDACTED]
*Initiated by and AUB [REDACTED] *First Approval [REDACTED] Second Approval, if applicable [REDACTED]
*X [Signature] *X

7. Wires in Process (WIP)

*When Customer's account is not debited, the WIP Account is funded by:
☐ Paid by Check ☐ Paid Cash ☐ Paid through account other than checking, savings, MRA, TRS or Hogan. Reference Acct #: [REDACTED]
Tax ID Type-Type & No. are required when customer's account is not debited. Tax ID No. (If non-citizen provide Alien ID #, Passport # & Country)
☐ Social Security ☐ TIN ☐ Non-U.S. Citizen without TIN ☐ Employer ID

8. Customer Not Present

Verification of Originator (Telephone, Fax, or written request)
Reason customer cannot come into Wells Fargo [REDACTED] Caller's location [REDACTED] Caller's immediate phone number [REDACTED]
Confirmation of Request (Team member other than the Initiator calls customer for confirmation)
Phone # to call to verify request [REDACTED] Time of call to customer [REDACTED] Source used [REDACTED] Taken verified? [REDACTED]
☐ Wells Fargo Records ☐ Telephone Directory ☐ Other: [REDACTED]
Name of person placing call [REDACTED] Customer Contact Name [REDACTED] Customer [REDACTED]
Telephone, Fax, or Written Request (Approval obtained by Private Banking Mgr., Business Banking Mgr., Retail - next level of authority above Store Management)
Approver's Printed Name [REDACTED] Approver's Signature [REDACTED] Date 060141
*X

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Wire Transfer Services

Outgoing Wire Transfer Request



A customer or team member, with the customer present, completes this form when requesting to send a wire. Outgoing wires can only be sent for Wells Fargo customers. Retain the original copy and provide a copy to the customer ensuring you give the customer the Agreement for Outgoing Wire Transfer Request (page 2 when form is accessed on-line & preprinted on the back of printed forms). Note: Wells Fargo Wire Transfer Services will route wires based on correspondent banking relationships. See back (page 2) for explanations of the Mexican CLABE account, the SWIFT BIC, the International Routing Code (IRC) and the International Bank Account Number (IBAN). *Required information is noted with an asterisk.

*Today's Date

*Send Date (if next day submit wire after 4:30 CT. Store must hold if other than today or next day date.)

1. Originator's Information

*Customer's Name

*Customer's Physical Address, City, State, Zip Code

*Phone Number

*Transfer from (Savings, market rate, wholesale checking account or 10-digit command account)

*U.S. Dollar Wire Amount

International Funds to be sent in foreign currency. Please ensure the beneficiary's account accepts the designated currency.

☐ Yes ☐ No

Foreign Currency Type/Name (SVT/SVP will default to FX unless specified otherwise)

*Currency Code (if known)

*Foreign Currency Amount

2. Beneficiary/Recipient Information (This is the ultimate recipient of the wire transfer funds.)

*Beneficiary/Recipient Name

*Beneficiary Account Number (IBAN) where applicable:

Beneficiary's Physical Address (required for foreign wires.)

Information for the Beneficiary (invoice number, purchase order number, etc.)

Beneficiary Phone Number

3. Beneficiary Bank Information (This is the financial institution where the beneficiary maintains their account.)

*Beneficiary Bank Name

BIC

*International Routing Code (IRC)

*Beneficiary Bank Address, City, State, Zip Code & Country (optional information)

Information for Beneficiary Bank (wires to Mexican banks require the CLABE account number in the Beneficiary Instructions to ensure correct payment.)

4. Intermediary Bank Information (This is a financial institution that the wire must pass through before reaching the final beneficiary bank.) This section is optional and not required for all wires. Please note that routing may be altered depending on Wells Fargo Bank's correspondent relationships.

Optional: *Intermediary Beneficiary Bank RTN or SWIFT BIC

International Routing Code (IRC)

*Intermediary Bank Name

*Intermediary Bank Account No.

Intermediary Bank Address, City, State, Zip, Country (optional information)

Information for Intermediary Bank

5. Wire Fee & Customer Signature (Additional fees from intermediary and beneficiary banks may be charged to international transactions - see fees Section on page 2 of this form.)

Wire Fee Amount (the Transfer From Account will be charged the fee.) The region that houses the account being debited determines the fee amount. Use the fee information available through Teamworks and/or the Banker's Guide. Do not use SVT/SVP for fee when the account is not in your region. Additional fees may apply (see page 2 of this form). Contact WBR Store Support for questions regarding Command Fees.

*AU where the Originator's account is located

*Fee Amount

My signature here indicates agreement to all of the information on this Outgoing Wire Transfer Request and to the terms and conditions on the second page of this request. Wells Fargo is authorized to rely on the information on this Request in making the requested funds transfer.

*Date

6. Wells Fargo Use Only - Wells Fargo Approval - Following MUST be completed for ALL outgoing wires.

International Wire Foreign Currency Information

Rate

Contract No. (required when \$100,000 or more U.S.)

FX Trader Contact

*Wire Transaction/FAS Number

*Name on ID used by customer

Method used to verify business acct. transaction authority

*1st ID type, number, issued by State/Country & Expiration Date

*2nd ID type, number, issued by State/Country & Expiration Date

*Initial by and AU#

*First Approval

Second Approval, if applicable

☒ X

☒ X

☒ X

7. Wires in Process (WIP)

*When Customer's account is not debited, the WIP Account is funded by:

☐ Paid by Check ☐ Paid Cash ☐ Paid through account other than checking, savings, MRA, TFS or Hogan. Reference Acct. #:

Tax ID Type - Type & No. are required when customer's account is not debited.

Tax ID No. (if non-citizen provide Alien ID #, Passport # & Country)

☐ Social Security

☐ TIN

☐ Non-U.S. Citizen without TIN

☐ Employer ID

8. Customer Not Present

Verification of Originator (Telephone, fax, or written request)

Reason customer cannot come into Wells Fargo

Caller's location

☐ Company ☐ Home ☐ Other:

Caller's Immediate phone number

Confirmation of Request (Team member other than the initiator calls customer for confirmation)

Phone # to call to verify request

Time of call to customer

Source used

☐ Wells Fargo Records

☐ Telephone Directory

☐ Other:

Token verified?

☐ Yes ☐ No

Name of person placing call

Customer Contact Name

Customer

☐ Approved the transfer

☐ Denied the transfer

Telephone, Fax, or Written Request (Approval obtained by Private Banking Mgr., Business Banking Mgr., Retail - next level of authority above Store Management)

Approver's Printed Name

Approver's Signature

Date

☒ X

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Image

HUMPHREYS & ASSOCIATES, INC. 9910 RESEARCH DRIVE IRVINE, CA 92618 PH. 714-685-1730		Wells Fargo Bank, N.A. California 16-24-1220	16904 <small>By Order of the Board</small>
PAY	*NINETY THOUSAND AND XX / 100		
	DATE	CHECK AMOUNT	
	07/31/2013	\$90,000.00	
TO THE ORDER OF	The Spartan Associates, Inc.		
	HUMPHREYS & ASSOCIATES, INC. GENERAL ACCOUNT <i>Chris Humphreys</i> AUTHORIZED SIGNATURE		Security features. Details on back.

Item Details

Amount: 90,000.00

Check #: 16904

Posting Date: 08/01/2013

As of Date: 08/01/2013

Account Name: HUMPHREYS & ASSOCIATES, I

Account Number: [REDACTED]

Routing Number: [REDACTED]

Description: CHECK PAID

Item Sequence Number: 8818376142


Additional Item Details: 0000002 +000000055928248

CHECK

000143

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Image

HUMPHREYS & ASSOCIATES, INC. 9910 RESEARCH DRIVE IRVINE, CA 92618 PH: 714-685-1730		Wells Fargo Bank, N.A. California 16-24-1220	16819 <small>Wells Fargo Bank, N.A. Member FDIC</small>
PAY	*NINETY-FIVE THOUSAND AND XX / 100.		DATE
			05/24/2013
		CHECK AMOUNT	\$95,000.00
TO THE ORDER OF	SPARTAN ASSOCIATES, INC.		
	HUMPHREYS & ASSOCIATES, INC. GENERAL ACCOUNT  AUTHORIZED SIGNATURE		Securely hold this check. Details on back.

Back of check showing MICR line and signature.

Item Details

Amount: 95,000.00

Check #: 16819

Posting Date: 05/28/2013

As of Date: 05/28/2013

Additional Item Details: 0000001 +000000067322889

CHECK

Account Name: HUMPHREYS & ASSOCIATES, I

Account Number: [REDACTED]

Routing Number: [REDACTED]

Type Code/Description: 475/CHECK PAID


Item Sequence Number: 8210608271

000124

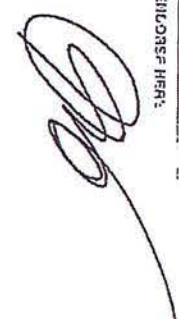
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Image

HUMPHREYS & ASSOCIATES, INC. 8910 RESEARCH DRIVE IRVINE, CA 92618 PH: 714-885-1730		Wells Fargo Bank, N.A. California 16-24-1220	16747
PAY	*SEVENTY-FIVE THOUSAND AND XX / 100		
TO THE ORDER OF	THE SPARTAN ASSOCIATES, INC.	DATE 03/18/2013	CHECK AMOUNT \$75,000.00
		HUMPHREYS & ASSOCIATES, INC.  AUTHORIZED SIGNATURE	

ENDORSE HERE



Item Details

Amount: 75,000.00

Check #: 16747

Posting Date: 03/19/2013

As of Date: 03/19/2013

Account Name: HUMPHREYS & ASSOCIATES, I

Account Number: [REDACTED]

Routing Number: [REDACTED]

Type Code/Description: 475/CHECK PAID

Item Sequence Number: 8513640107

000145

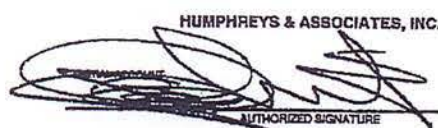
Additional Item Details: 0000001 +00000008073720

CHECK

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Image

HUMPHREYS & ASSOCIATES, INC. 9910 RESEARCH DRIVE IRVINE, CA 92618 PH. 714-535-1730		Wells Fargo Bank, N.A. California 16-24-1220		16784
PAY	*NINETY-FIVE THOUSAND AND XX / 100		DATE 04/15/2013	CHECK AMOUNT \$95,000.00
TO THE ORDER OF	THE SPARTAN ASSOCIATES, INC.		HUMPHREYS & ASSOCIATES, INC.  AUTHORIZED SIGNATURE	

Security features. Details on back.

JPMorganChaseBank 041502 121469 954090035970

Item Details

Amount: 95,000.00

Check #: 16784

Posting Date: 04/15/2013

As of Date: 04/15/2013

Account Name: HUMPHREYS & ASSOCIATES, I

Account Number

Routing Number

Type Code/Description: 475/CHECK PAID

Item Sequence Number: 8716884980

Additional Item Details: 0000002 +000000111603574

CHECK

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Image

HUMPHREYS & ASSOCIATES, INC. 9910 RESEARCH DRIVE IRVINE, CA 92618 PH. 714-885-1790		Wells Fargo Bank, N.A. California 16-24-1220		16693
PAY	*SIXTY THOUSAND AND XX / 100		DATE 02/14/2013	CHECK AMOUNT \$60,000.00
TO THE ORDER OF	Spartan Associates, Inc		HUMPHREYS & ASSOCIATES, INC.	
		GENERAL ACCOUNT		<i>[Signature]</i> AUTHORIZED SIGNATURE

JF Jordan Chase Bank 021501 121469 954090041913

Item Details

Amount: 60,000.00

Check #: 16693

Posting Date: 02/15/2013

As of Date: 02/15/2013

Additional Item Details: 0000002 +000000028103912

CHECK

Account Name: HUMPHREYS & ASSOCIATES, I

Account Number

Routing Number

Type Code/Description: 475/CHECK PAID

Item Sequence Number: 8416825747


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32-16

() ENDORSE HERE

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE



DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE

650148

32-17

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Russell's Crane Service, Inc.1645 W. Orangewood Avenue
Orange, CA 92868

Phone: 714-771-8522

Fax: 714-771-7083

Work Order

Date	Work Order #
1/11/2013	39758

Bill To: Spartan Construction 818 Spirit Costa Mesa, CA 92626	Job Location: Friday, 10:30 AM Humphries Residence Pg. 888 J-7 436 Via Lido Nord (xst: Via Jucar) Newport Beach, CA 92663
---	---

P.O. #	Originating Office	Terms	Time Required	Ordered By
	Orange	C.O.D.	2-3 hrs.	Adam

Equipment	Description of Work	Amount
T-30	Lift 5 each beams up, 1,000#, 22' up, 60' back	24 1000#
<p><i>Hand by (check) 1080</i></p> <p>RELEASE OF LEGAL LIABILITY - READ CAREFULLY. The undersigned hereby releases and further agrees to indemnify and hold harmless Russell's Crane Service Inc., its owners, agents & employees from all liability or claims resulting from damages or injury to persons or personal property resulting from any action or failure to act by R.C.S. Inc., its equipment and/or personnel on or near the site of the requested work, including but not limited to all underground utilities, installations or obstructions. This release applies to all possible claims or litigation except those arising through the sole negligence or willful misconduct of R.C.S. Inc., except those waived, and R.C.S. Inc. is not responsible for damages occurring from rigging, loading or damages to sidewalks, lawns, driveways or other real/ personal property adjacent thereto.</p> <p>Returned checks for any reason are subject to a \$25 service charge.</p> <p>Signature at Start of Job: _____</p> <p>Signature at Job Completion: _____</p> <p>Date: 1-11-13</p>		
110 - \$130 per hr., 2 hr. minimum. All time charged port to port.		Total \$325.00

Harrington
Geotechnical
Engineering, Inc.

July 25, 2013

Mr. Adam Bereki
SPARTAN CONSTRUCTION
818 Spirit
Costa Mesa, CA 92626

Subject: Preliminary Geotechnical Investigation for Remodel and Addition to Existing Two-Story Residential Structure at 436 Via Lido Nord, Newport Beach, CA

HGEI Project No. 13-01-3181

Dear Mr. Bereki:

This report presents the results of a geotechnical investigation of the subject site. The investigation was conducted in accordance with generally accepted geotechnical engineering practice in this area.

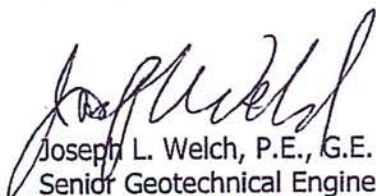
Preliminary plans and information furnished to this office were used in outlining the scope of the investigation.

Based on analysis and evaluation of the data obtained it has been concluded that construction of the subject improvements are feasible from a geotechnical engineering standpoint provided the recommendations presented herein are incorporated into the design and construction.

Thank you for this opportunity to be of service. If you have any questions concerning this report or if we can be of further assistance, please call at your convenience.

Very truly yours,

HARRINGTON GEOTECHNICAL ENGINEERING, INC.


Joseph L. Welch, P.E., G.E.
Senior Geotechnical Engineer



Distribution: (1) file 3181 Prelim Rpt.docx
(5) US Mail

1590 N. Brian Street, Orange, CA 92867-3406 FAX (714) 637-3096 PHONE (714) 637-3093
Please visit our website at www.harringtongeotechnical.com



2915 Red Hill Avenue, Bldg. D-100
Costa Mesa, California 92626
Phone: (714) 434-3800
Contractor's Lic #508502

INVOICE

Date:	March 26, 2013
CGW Control #:	20130098
P.O. #:	Sparten-Humphreys Downstairs
Salesperson:	Jeff Conkle
Mfg/Shipper #:	"Milgard" #1391541
Mfg/Shipper #:	
Mfg/Shipper #:	

SOLD TO: Spartan Construction ATT: Adam Bereski 818 Spirit Costa Mesa, CA 92626 (949)241-6693	JOB ADDRESS IF DIFFERENT: Manufacturers projected delivery date to the job-site is 4/24/13. 436 Via Lido Nord Newport Beach, CA 92663
--	---

Contract Description

Contract for 8 windows and 1 door by "Milgard" all being dual pane, espresso color vinyl exterior and white color vinyl interior with options as listed. These units have SunCoat glass with accessory package and glass breakage warranty.

Style Line Series nail-on double vent above 3 picture windows

1- 89 1/8 X 71 XOX/O-O-O with bottom being tempered

Style Line Series nail-on single hung window

1- 23 1/2 X 38 3/4 with matelux obscure glass, bottom being tempered

Style Line Series nail-on double vent sliding windows

1- 100 1/2 X 26 XOX

1-100 1/2 X 39 XOX

Style Line Series nail-on horizontal sliding windows

1- 34 1/2 X 25 XO with tempered matelux obscure glass

1- 71 1/2 X 26 OX

1- 44 1/4 X 23 3/4 XO

Style Line Series nail-on awning window

1- 28 3/4 X 26 with tempered matelux obscure glass

Tuscany Series nail-on sliding patio door

1- RO 72 X 80 OX with a keyed lock

X - sliding panel as viewed from the exterior of the home

\$6,067.44	Total Amount of Contract
\$6,067.44	Payment With Order Pd Ck #1129
	Payment Due At:
	Payment Due At:
\$0.00	Paid In Full:

I acknowledge the satisfactory completion of the above described work :



THE SPARTAN ASSOCIATES, INC.

Employee Name:

MEI

Week	Log In	Log Out	Log In	Log Out	Hrs Worked
3-8-12					
Monday 12-3	8:00	12:30	12:30	4:30	8.0
Tuesday 12-4	8:00	12:00	12:30	4:30	8.0
Wednesday 12-5	8:00	12:00	12:30	4:30	8.0
Thursday 12-6	8:00	12:00	12:30	4:30	8.0
Friday 12-7	8:00	12:00	12:30	2:00	5.5 6.0
Saturday					
Sunday					
Week 12-10 - 12-14					
Monday 12-10	8:00	12:00	12:30	4:30	8.0
Tuesday 12-11	8:00	12:00	12:30	4:30	8.0
Wednesday 12-12	8:00	12:30	1:00	4:30	8.0
Thursday 12-13	8:00	12:00	12:30	4:30	8.0
Friday 12-14	8:00	12:15	12:45	4:30	8.0
Saturday					
Friday					
Total: 78.0 ✓					

38.0

40.0

h-46

Anaheim Heating & Air Conditioning

With an Eye on Excellence

est. 1962

1418 South Central Park Avenue
Anaheim, California 92802
(714) 772-9699 Ph
(714) 772-0668 Fx
www.AnaheimHtgClg.com
License: #784141

PROPOSAL NUMBER

5566

Submitted To:	SPARTAN CONSTRUCTION = ADAM	Date:	3/27/2013
Street:	818 SPIRIT	Job Name:	KAREN & GARY HUMPHREYS
City, ST Zip:	COSTA MESA CA 92626	Job Location:	436 VIA LIDO NORD #B NEWPORT BCH.
Phone:	949-241-6693 FAX: N/A	Job Phone:	

We hereby submit specifications and estimates for:

INSTALLATION OF CENTRAL GAS FORCED AIR HEATING. INSTALLED EQUIPMENT & SCOPE OF WRK. AS FOLLOWS;

_ TRANE XB90, TUC1B060A9361A (60K BTU / 92% AFUE / SINGLE STG. HTG.) CONDENSING GAS FURNACE
_ WHITE RODGERS 1F80-261 ELECTRONIC / PROGRAMABLE THERMOSTAT.

_ CITY BUILDING PERMITS, FURNACE CLOSET CONSTRUCTION AND ASBESTOS DUCT WRK. ABATEMENT BY OTHERS. WILL REMOVE AND DISPOSE OF OLD EQUIPMENT & ALL WRK. RELATED TRASH. WILL FABRICATE & INSTALL STATIONARY SUPPLY PLENUM & TRANSITION SLEEVE. INSTALL NEW FURNACE ON AFTER MARKET FILTER BASE W/ THROW AWAY FILTER. REPLACE GAS SHUT-OFF VALVE, GAS CONNECTOR AND LINE CORD. INSTALL CONDENSATE PUMP WITH COPPER DRAIN LINE TO APPROVED DRAIN SITE. INSTALL FURNACE VENT PIPE AND WALL TERMINATION KIT (PRE-DETERMINED LOCATION). ENLARGE (3) REGISTER BOX OUTLETS. RE-DUCT SYSTEM FOR PROPER AIR-FLO USING JPL , R-4.2 RATED TYPE FLEXIBLE DUCT, RELATED METAL FITTINGS & CONNECTORS. INSTALL AJUSTABLE BAR STYLE REGISTERS THRU-OUT HM. / BAR STYLE RETURN AIR GRILLES. INSTALL THERMOSTAT (FAU CLOSET WALL) SYSTEM COMPLETELY INSTALLED AND READY TO OPERATE WITH 1 YR. PARTS AND LABOR WARRANTY. TRANE WARRANTY OF 5 YRS. FUNCTIONAL SMALL PARTS, LIMITED LIFE-TIME HEAT EXCHANGER.

We propose to furnish material and labor, complete in accordance as specified above for the sum of: **\$4,638.00**Payment to be made as follows: **100% On Completion**

All material is guaranteed to be as specified. All work is to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from specifications in involving extra costs will be executed only upon written orders, and will become and extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. The owner to carry fire, tornado and other necessary insurance. Our workers are fully covered by Workman's Compensation Insurance. This proposal may be withdrawn by us if not accepted in 30 days.

Authorized Signature: *Scott Steep*

NOTICE TO OWNER: Contractors are required by law to be licensed and regulated by the contractor's state license board. Any questions concerning a contractor may be referred to the registrar of the board whose address is:
Contractors' State License Board, 3132 Bradshaw Road, Sacramento, CA 95827.

Acceptance of Proposal: The above prices are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above. Any changes or alterations to the above will be an "Extra" to this contract, and no further work will be performed until a "Change Order" has been signed. You the buyer, may cancel this transaction at any time prior to the third business day after the date of this transaction.

Authorized Signature: _____ Date of Acceptance: _____

NOTICE TO OWNER: (Section 7019 Contractors License Law) Under the Mechanics' Lien Law, any contractor, subcontractor, laborer, materialman or other person who helps to improve your property and is not paid for his labor, services, or material, has a right to enforce his claim against your property. Under the law, you may protect yourself against such claims by filing, before commencing such work of improvement, and original contract for the work of improvement of a modification hereof, in the office of the county recorder of this county where the property is situated and requiring that a contractor's payment bond be recorded in such office. Such bond shall be in an amount not less than fifty percent (50%) of the contract price and shall, in addition to any conditions for the performance of the contract, be conditioned for the payment in full of the claims of all persons furnishing labor, services, equipment or materials for the work described in said contract.

CALIFORNIA PRELIMINARY NOTICE: Section 1193(c) California Code of Civil Procedure requires us to notify you "that if bills are not paid in full for Labor, Services, Equipment or Materials furnished, or to be furnished, the improved property (which is described hereon) may be subject to mechanics' liens."

INSURED

BONDED

1131 North Citrus Street, Orange, Ca 92867 888.3.PRO.COAT 714.639.7403 ph. 714.639.7405 fax

Waterproof Deck Coatings Below Grade Waterproofing Concrete Repair and Resurfacing Concrete Coatings, Sealing, Staining, and Polishing

Bid #: _____

Date: 03/22/13

Submitted to: Spartan Construction

Address: 818 Spirit

City: Costa Mesa State: CA Zip: 92626

Contact: Adam Bereki Office Phone: _____ Fax: _____

Email Address: adam@thespartanassociates.com Mobile Phone: (949) 241-6693

Job Name: Humphreys Residence

Job Address: 436 Via Lido Nord

City: Newport Beach State: CA Zip: _____

Superintendent: Lyman Emmer Mobile Phone: (714) 749-5400 Job Phone: _____

For California Preliminary 20-Day Notice (See Civil Code Section 3097 & 3098)

Owner Name: _____

Owner's Address: _____

City: _____ State: CA Zip: _____

Mobile Phone: _____ Office Phone: _____ Fax: _____

Standard Notations:

When proposals are made from plans, field measurement of application shall prevail and contract pricing will be adjusted accordingly.

Any alteration or deviation from the signed contract will become an extra charge over and above the contract price. Any item such as sloping, drains, crickets, or other items not directly contained in the specific specification is additional unless outlined in this contract.

Specifications are available for any contract proposal. It is the General Contractor's and homeowner responsibility to request, read and understand these specifications (especially note items regarding sloping, flashing details, railing impediments and plywood gapping).

Pro Coat will not be responsible for any damage or cracking that may occur due to structural inadequacies, abuse, deterioration, or leakage due to contiguous material failure.

Because of seismic activity, unknown soil conditions, and methods used in installing original surfaces, Pro Coat cannot warrant crack repairs and cannot be held responsible should cracks reappear, although every effort is made by Pro Coat to make said repairs permanent.

Pro Coat requires periodic inspection and, if necessary, repairs and/or reseal to maintain specified warranty.

Proposal is subject to an approved credit check that is hereby authorized. Prices, specifications & conditions of this proposal set forth in the attached "Description of Work To Be Performed" are satisfactory & hereby accepted. Pro Coat is authorized to do the work specified. Payment terms are satisfactory. Prices are subject to change SIXTY (60) DAYS after bid date. Proposal prices are subject to revision 1-year after the contract is awarded; or upon notification of a material price increase of 10% or more from a Pro Coat vendor or manufacturer; or as a result of a 5% or more increase in Pro Coat's insurance or labor costs.

Shoreline Fabricators, Inc.

5267 Warner Ave., Suite #137
Huntington Beach, Ca. 92649
Ph. 562 424-4744, Fax 562 424-4997
Contractors License # 641234

Invoice

DATE	INVOICE #
4/19/2013	9395

BILL TO
Spartan Construction 818 Spirit Costa Mesa, Ca. 92626 Attn: Lyman Emmer

PROJECT
436 Via Lido Nord Newport Beach, Ca.

P.O. NO.	PROJECT

ITEM	AMOUNT
To fabricate and install one 10' long deck gutter. Gutter to be made from 24 Ga. stainless steel with two 3" long no-hub thunderbird drains at each end.	1,025.00
Please remit to above address.	Total \$1,025.00

Please Pay By Invoice.

1.5% per month interest will be charged on all past due accounts. Buyer agrees that in the event collection becomes necessary, Buyer shall pay all collection costs including court cost and reasonable attorney fees.

HELIX Environmental Planning, Inc.
7578 El Cajon Boulevard
Suite 200
La Mesa, CA 91942
619.462.1515 tel
619.462.0552 fax
www.helixepi.com



January 16, 2013

Adam Bereki
Spartan Construction
818 Spirit
Costa Mesa, CA 92626

**Subject: Letter Proposal/Agreement to Provide Environmental Consulting Services
for the Residential Remodel in Newport Beach**

Dear Mr. Bereki:

HELIX Environmental Planning, Inc. (HELIX) is pleased to submit this letter proposal/
agreement (Agreement) to Adam Bereki (Client) to provide acoustical consulting services for the
remodel of a multi-family residence (Project).

PROJECT UNDERSTANDING

HELIX understands that the Project involves the remodel of a single building with stacked
separate family residences sharing a common floor/ceiling. The Project site is located at 436 Via
Lido Nord in Newport Beach, California.

SCOPE OF SERVICES

Task 1:

- Conduct a telephone consultation on floor/ceiling design methods (completed)
- Conduct a field inspection of the residential unit to look at the floor/ceiling assembly,
which has the upper floor deck removed.
- Discuss methods for controlling noise impacts from the upper unit to the lower unit
with the final installation of a hard surface flooring assembly in the upper unit.
Included in the discussion will be maintaining the assembly effectiveness with the
installation of "canned lighting" and air conditioning duct drops in the downstairs
ceiling.

34



City of Newport Beach - Building Division

Inspection Card

3300 Newport Blvd
Inspection Requests Telephone (949) 644-3255

Date : 11-14-2012

Permit # : **X2012-2116**
Job Address: **436 VIA LIDO NORD NB**
Owner : **HUMPHREYS GARY**
Contractor : **SPARTAN ASSOCIATES INC THE**
Description : **800 SF INTERIOR REMODEL, 188SF DEMO TO COMBINE**

Plan Check # : 1552-2012

MFP / ELEC

MECH / PLUM

TYPE	ITEM#	DESCRIPTION	DATE	SIGNATURE
COMB	2200	Pre-Grade Meeting		
COMB	2210	Soil Pipe		
COMB	2220	Sewer		
COMB	2230	Water Pipe Underground		
COMB	2240	Gas Pipe Underground		
COMB	2250	Underslab/Floor Mechanical		
COMB	2260	Offer Ground		
COMB	2270	Underground Electrical		
COMB	2280	Rough Grade Approval		
COMB	2290	WQ-Best Management Practices		
COMB	2300	Erection Pads		
COMB	2310	Foundation/ Setbacks/ Footings		
COMB	2320	Slab on Grade		
COMB	2340	Area Drains		
DO NOT COVER/POUR CONCRETE UNTIL ABOVE IS SIGNED OFF				
ROUGH				
COMB	2360	Masonry Pre-Cast/Wall Steel		
COMB	2370	Slab on Deck		
COMB	2380	Rough Plumbing		
COMB	2390	Gas Pipe		
COMB	2400	Rough HVAC		
COMB	2410	Hood		
COMB	2420	Fireplace Throat		
COMB	2430	Under Floor Plumbing		
COMB	2440	Under Floor Electrical		
COMB	2450	Rough Electric Residential		
COMB	2460	Rough Conduit Walls - Commercial		
COMB	2470	Rough Wiring Ceilings - Commercial		
COMB	2480	Rough Electrical Service		
COMB	2490	Floor Framing & Sheathing		
COMB	2500	Rough Wall Framing - Commercial		
COMB	2510	Roof Framing, Sheathing & Building Ht		
COMB	3000	Exterior Shear & Hold Downs		
COMB	2520	COMPLETE FRAMING		
DO NOT COVER WORK UNTIL ABOVE SIGNED OFF				
INTERIOR & EXTERIOR				
COMB	2540	Insulation/Densglass		
COMB	2550	Drywall		
COMB	2560	Suspended Ceiling		
COMB	2570	Shower Lath		
COMB	2580	Exterior Lath		
COMB	2590	Plaster-Scratch		
COMB	2530	Other Electrical		
COMB	2350	Other Plumbing		
COMB	2425	Other Mechanical		
COMB	2600	Other Building		
COMB	2610	Gas Pressure Test		
COMB	2617	Grading / Drainage Final		
COMB	3000	Electrical Final		
COMB	3001	Mechanical Final		
COMB	3002	Plumbing Final		
COMB	3004	Fire Dept Final 949/644-3105		
COMB	2620	FINAL BUILDING		
DO NOT OCCUPY UNTIL FINAL INSPECTIONS ARE SIGNED OFF				

call the inspection request line at
949/644-3255 or visit the City website at
<http://www.newportbeachca.gov> and
select Online Services
Inspections (only for permits in approved
status) must be requested before 5:00 A.M.
the day of the inspection

Please use the following list of permit code
when calling for an inspection

PRESS:

- '0' for combination / X permit
- '1' for building / B permit
- '3' for electrical / E permit
- '4' for mechanical / M permit
- '5' for grading / G permit
- '6' for harbor / H permit
- '7' for pool and spa / S permit
- '8' for fire / F permit

7/12/13 PARTIAL FOOTINGS
SEE PLANS BW

Inspector Notes are located on the reverse
side.



City of Newport Beach

Building Division

PO Box 1768 Newport Beach, California 92658-8915 Permit Counter Telephone (949)644-3288

COMB Permit No: **X2012-2116**PROJECT NUMBER: **1552-2012**

Inspection Requests/Telephone (949)644-3255

Combination Type - MFP/ ELEC/ MECH/ PLUM/

Job Address: 436 VIA LIDO NORD NB

Description: 800 SF INTERIOR REMODEL, 188SF DEMO TO COMBINE 2ND FLOOR UNITS (B & C) TO CREATE 1, REROOF THE ENTIRE HOUSE "WORK IN PROGRESS"

Inspector Area: 1
TOGETHER

Legal Desc.: P M 105-43 PAR 1 UNIT 3 OF PROJECT LOCATED ON AP 423-191-08

Owner: HUMPHREYS GARY
Address: 505 AUGUSTA DR
MORAGA CA 94556
Phone:Contractor: SPARTAN ASSOCIATES INC THE
Address: 436 VIA LIDO NORD #B
NEWPORT BEACH CA 92663
Phone: 949-241-6693Architect: OVERLEY RICK
Address: 13221 SAFFORD ST
GARDEN GROVE CA 92843
Phone: 714-537-2132 State Lic: 9858Applicant: BEREKI ADAM
Address: 436 VIA LIDO NORD #B
NEWPORT BEACH CA 92663
Phone: 949-241-6693Con State Lic: 927244
Lic Expire: 01/31/2013
Bus Lic: BT50039538
Lic Exp Date: 06/30/2013Engineer: WONG ARIV NATHANIEL
Address: 180 S PROSPECT AVE #140
TUSTIN CA 92780
Phone: 714-368-9895 State Lic: C-055045Code Edit: 2010
Type of Construction: V - B
Occupancy Group: B
Added / New sq. ft. Bldg: -188
Add / New sq. ft. Garage: 0
No. of Stories: 2
No. Units: 2
Bldg Height: 0
Bldg Sprinklers: N
Flood Zone:**CANCELLED**
EXPIREDDesigner: ☐ 80% or ☐ 100% refund
Address:

Special Conditions: C2012-0142 INSTALL OR VERIFY SMOKE AND CARBON MONOXIDE DETECTORS ARE EXISTING PER CCCR 314.1 & 315.2

Issued Date: 11/14/2012

Use Zone:
Parking Spaces: 0 Fire Hazard Zone: N

Construction Valuation: \$400,000.00

Building Permit Fee: \$2,806.00
Plan Check Fee: \$2,020.32
Overtime Plan Ck: \$0.00
Investigation Fee: \$2,806.00
Record Management: \$240.00
Energy Compliance: \$240.00
CA Seismic Safety: \$0.00
Disabled Access: \$0.00
Fee Increase Fee: \$0.00
Additional Fee: \$0.00
Hazardous Mat: \$0.00
Building Green Fee: \$16.00

TOTAL FEE: \$9,394.21

Solar System PC
Excise Tax:

(work started)

Grading Permit Fee: \$0.00

Note: PC Fee: \$0.00

XQC Insp. Fee: \$0.00

Electricity %: \$392.84

Mechanical %: \$280.60

Plumbing %: \$561.20

Planning Department

Plan check Fee: \$0.00

Fair Share: \$0.00

SJH Trans: \$0.00

In-lieu Housing Fee: \$0.00

Public Works Department

Park Dedication: \$0.00

P/W Plan Check: \$0.00

San Dist: \$0.00

NMUSD Fee: \$0.00

Fire Department

Fire Inspection: \$0.00

Fire Plan Rev: \$0.00

Demolition Fee: \$0.00

Building Dept Adm

General Service

Refund Deposit

Insp. initials: *CS*

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

\$0.00

PROCESSED BY: *ld*ZONING APPROVAL: *Bm2*

GRADING APPROVAL:

PUBLIC WORKS APPROVAL:

PLAN CHECK BY: *AN*APPROVAL TO ISSUE: *AN*

PERMITS EXPIRE 180 DAYS AFTER ISSUANCE OR LAST VALID INSPECTION.

INSPECTOR

34-2

R 34145



City of Newport Beach

Building Division

PLUMBING Permit No: P2013-0

PO Box 1768 Newport Beach, California 92658-8915

Permit Counter Telephone (949)644-3288

Inspection Requests/Telephone (949)644-3255

LTL ON SPREADSHEET 4/11/13

INSPECTOR

Address: 436 VIA LIDO NORD Bldg: 1 Floor: Suite:

Description of Work: PLUM - SEWER LINE RPR
X2012-2116

Inspector Area: 1 Code Edit 2010

Legal Description: P M 105-43 PAR 1 UNIT 3 OF PROJECT LOCATED ON AP 423-191-08

GETHER

Owner: HUMPHREYS GARY
Address: 505 AUGUSTA DR
MORAGA CA 94556Contractor: SPARTAN ASSOCIATES INC THE
Address: 818 SPIRIT
COSTA MESA CA 92626Worker's Compensation Insurance -
Carrier: NORGUARD INS
Policy No: SPWC359950
Expire: 07/05/2013Phone: 949-241-8693
Contract State Lic: 927244
Lic Expire: 01/31/2015
Bus Lic: BT30039638
Lic Exp Date: 06/30/2013

Issued Date: 04/11/2013

Processed By:

Bathroom Fixtures			Kitchen Fixtures			Misc.			Misc.			Other		
toilet:	0	\$0.00	Kitchen Sink:	0	\$0.00	Water Piping:	0	\$0.00	Roof Drain:	0	\$0.00		\$0.00	
bidet:	0	\$0.00	Garbage Disp:	0	\$0.00	Water Softener:	0	\$0.00	Grease Trap:	0	\$0.00		\$0.00	
Urinal:	0	\$0.00	Bar Sink:	0	\$0.00	Water Heater:	0	\$0.00	Grease Interceptor:	0	\$0.00			
bathtub:	0	\$0.00	Vegetable Sink:	0	\$0.00	Gas up to 4 outlets:	0	\$0.00	P-Trap:	0	\$0.00	Record Mgmt Fee:	\$1.00	
Shower Stall:	0	\$0.00	Ice Maker:	0	\$0.00	Gas over 4 outlets:	0	\$0.00	Sewer:	0	\$0.00	Investigation:	\$0.00	
Wash Basin:	0	\$0.00	Dishwasher:	0	\$0.00	Backflow up to 2":	0	\$0.00	Sewer Alter/Repair:	1	\$32.00	Plan Check:	\$0.00	
Hydro-Mass Tub:	0	\$0.00	Lint/Trap:	0	\$0.00	Backflow over 2":	0	\$0.00	Sewer Abandon:	0	\$0.00	Issuance:	\$0.00	
Floor Sink:	0	\$0.00	Regulator:	0	\$0.00	Hose Bibb:	0	\$0.00				Supplemental Fee:	\$9.00	
Floor Drain:	0	\$0.00	Lawn Sprinkler:	0	\$0.00	Drinking Fountain:	0	\$0.00						

TOTAL: \$42.00

Plan Check Fee: \$0.00

Fee Due at Permit Issuance: \$42.00

PERMITS EXPIRE 180 DAYS AFTER ISSUANCE OR LAST VALID INSPECTION