No: 714166

## **PROJECT PERMIT**

Permit Issued 10 (Insert Employer's Name, Address and	Telephone No.)	Š.			
	CA 95035	No.  Date  Region  District	11/22/19 1 2 (510) 794-2521		
(408) 942-8200		Tel.			
Type of Permit SINGLE PROJE	ECT D3-DEMOLITION		· · · · · · · · · · · · · · · · · · ·		
Pursuant to Labor Code Sections 6500 and	6502, this Permit is issued to the	above-named employe	er for the projects describe	d below.	
State Contractor's License Number	399163	Permit Valid throug	gh 2/28/2	2/28/20	
Description of Project	Location Address	No.		ed Dates	
Demolition of 4-story steel framed and concrete building approximately 50 feet high.	10123 N. Wolfe Rd.	City Cupertino County Santa Clar		2/28/20	
This Permit is issued upon the form.  1. That the work is performed by the snotified, in writing, of dates and location.  2. The employer will comply with all oprojects, and any other lawful orders.  3. That if any unforeseen condition can be seen as a second to the same and th	same employer. If this is an anion of job site prior to commend coupational safety and health sof the Division.	ement. tandards or orders a	applicable to the above		
Form the employer will notify the Divide 4. Any variation from the specification be cause to revoke the permit.	and assertions of the Permit A			may	
5. This permit shall be posted at or not Received From RECEIVED Ken Sullivan Aniceto M	BY Investig	<u> </u>	Safety Engineer	11 22 10 Date	
	Date Approv 11/22/19	ed by	District Manager	<u>u/22/19</u> Date	

No: 2019-908295

## **ANNUAL PERMIT**

그리는 그 소리를 하고 있는 그는 이 눈이 적으로 해 되었습니다. 이 사람들이 되었습니다. 그 사람들이 되었습니다.		lministrator's Name,	, Address		No.			
and Telephone No.)  Ferma Corporation  Attn: Safety Mgr or Avery Brown			Date	7/12/2019				
				Region	1			
6639 Smith						<u> </u>		
Newark CA 94560-4219				3. 1 3. 1	District _	4 (510) (22 201 (		
(650) 961-2742				1	Tel	(510) 622-2916		
Type of Permit <u>D3-A</u>	NNUAL D	EMOLITION	Strain to the state of the stat			ings Souther Homeson constants subjectives		
Pursuant to Labor Code Se	ctions 6500 a	nd 6502, this Permit is	issued to the	e above-nai	ned employe	r for the projects des	cribed below.	
State Contractor's License	State Contractor's License Number 236337		3 <b>7</b>	Permi	t Valid throug	2, 2020		
Description of P	Per and personal and	Location	Location Address	City o	nd County	Anticipate	C.A. (1987)	
	4	Logation	Varia 92	City a	na County	Starting	Completion	
Various Conditions of Issuance:		Statev	ride			Jul 12, 2019	Jul 12, 2020	
This Permit is issued  1. That the work is performiting, of dates and loc  2. The employer will conther lawful orders of the	ormed by the cation of job mply with all	same employer. If site prior to commen	this is an ar ocement.					
<ul><li>3. That if any unforesee employer will notify the</li><li>4. Any variation from the to revoke the permit.</li><li>5. This permit shall be permit to the control of the control of</li></ul>	Division imm	nediately. on and assertions of	the Permit /	Application	ı Form or vic	plation of safety orc		
Received From	Received		Investi	gated by				
Avery Brown		it Unit				Safety Engineer	Date	
Cash Check 71552	\$100.00	Date 7/12/19	Appro	ved by	Distric	V/\ t Manager/Permit Un	7/12/2019 it Date	

STATE OF CALIFORNIA
DEPARTMENT OF INDUSTRIAL RELATIONS
DIVISION OF OCCUPATIONAL SAFETY AND HEALTH

No: **2019-907897** 

## **ANNUAL PERMIT**

		ANNU	4L FERIMII			1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1
Permit Issued To  (Insert Contractor/Project Administrator's Name, Adam Telephone No.)  Silverado Contractors Inc  Attn: Safety Mgr or Amber Martinez  2855 Mandela Pkwy 2nd Floor  Oakland CA 94608-4011  (510) 658-9960  Type of Permit D3-ANNUAL DEMOLITION  Pursuant to Labor Code Sections 6500 and 6502, this Permit is iss		Inc mber Martinez 2nd Floor 011		No:  Date  Region  District  Tel:	6/26/2019  1  4  (510) 622-2916	
State Contractor's License Nu	ımber	782547	Permi	t Valid throug	ough June 26, 2020	
Description of Project	at .	Location Addr	ess City a	nd County	Anticipate Starting	ed Dates Completion
Various Conditions of Issuance:		Statewide			Jun 26, 2019	Jun 26, 2020
This Permit is issued up  1. That the work is perform writing, of dates and location	ed by the on of jab s	same employer. If this i ite prior to commenceme	ent			
2. The employer will complete the fawful orders of the D 3. That if any unforeseen comployer will notify the Div 4. Any variation from the set to revoke the permit.  5. This permit shall be post Received From	ivision ondition c ision immo pecification	auses deviation from the ediately n and assertions of the F ear each place of emplo	plans or statem Permit Application	ents contair n Førm ör vi	ed in the Permit Ap	oplication Form the
Amber Martinez	Permi		Investigated by	2	Safety Engineer	Date 6/26/2019
니브 Casir	00.00	6/26/19	Approved by	Distric	t Manager/Permit Un	