

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0102517
Insp Area: 1

Site Address: 2228 24TH ST SAC
Parcel No: 010-0165-016

Sub-Type: REM
Housing (Y/N): N

CONTRACTOR
PACIFIC BUILDERS
10701 ATWOOD DR
RANCHO CORDOVA 95670

OWNER
PRASAD RAMESHWAR JASU W
7645 MANDY DR
SACRAMENTO CA 95823

ARCHITECT

Nature of Work: REMODEL 4PLEX , NEW ELECTRICAL, NEW PLUMBING,CABINETS,NEW HVAC, NEW WINDOWS.DRY ROT REPAIR

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

Lender's Name _____ Lender's Address _____

LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury 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 Class _____ License Number _____ Date _____ Contractor Signature _____

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors 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 or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or 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 a civil penalty of not more than five hundred dollars (\$500.00).

I, as a 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 Professional Code). The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his/her 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/she 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 Contractors 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 Contractors License Law.

I am exempt under Sec. _____ B & P for this reason _____
Date 04/16/01 Owner Signature [Signature] **NEIGHBORHOODS, PLANNING & DEVELOPMENT SERVICES**

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed does not violate any law or private agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

I certify that I have read this application and state that all information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 04/16/01 Applicant/Agent Signature [Signature]

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier _____ Policy Number _____ Exp Date _____

(This section need not be completed if the permit is for \$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 and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 04/16/01 Applicant Signature [Signature]

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0102517	Insp. Area 16
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2228 24TH ST Suite _____
 PARCEL # _____

<p style="text-align: center;">CONTACT</p> <p>Name _____</p> <p>Street Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ FAX _____</p> <p>E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # 758265</p> <p>Name PACIFIC BUILDERS</p> <p>Address 10701 ATWOOD DRIVE</p> <p>City/State/Zip RANCHO CERRITOS C.A. 95670</p> <p>Phone (916) 635-6133 FAX _____</p> <p>E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name _____</p> <p>Address _____</p> <p>City/State/Zip _____</p> <p>Phone _____ FAX _____</p> <p>E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name JASU & RAMESH PRASAD</p> <p>Address 8523 FULLISTER WAY</p> <p>City/State/Zip ELK GROVE C.A. 95624</p> <p>Phone (916) 685-4173 FAX _____</p> <p>E-mail: _____</p>

→ Will permittee have any employees on the jobsite? No Yes → **INSURANCE CO:** _____
 → **WORKER'S COMPENSATION POLICY #** _____ **EXPIRATION DATE:** _____

NATURE OF WORK IN DETAIL: 4 PLEX REMODEL REFINISH WALLS & CEILING, NEW WIRING & PLUMBING, NEW CABINETS, WINDOWS, FLOORS DOORS, ELECTRICAL SUB PANELS, EXT STAKES 3 FT HIGH.

OCCUPANT/TENANT: _____ **VALUATION:** \$ 40,000

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM <input checked="" type="checkbox"/>	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	<input checked="" type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	SITE		FIRE	
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File	
				RI	VN	SPR	ALARM	03	[H]	[Quad]
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input checked="" type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	F	S		<input checked="" type="checkbox"/> D	PW	UTIL

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No **HEALTH DEPARTMENT?** Yes No
WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

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

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

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) _____
2. I (~~have~~/have not) _____ signed an application for A building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name PACIFIC BLDRS Address 10701 ATWOOD DR

City RANCHO CORDOVA Telephone 635-0133

- Contractors License No. 758265

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

Name _____ Address _____

City _____ Telephone _____

Contractors License No. _____

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

Name	Address	Phone	Type of work

X Signed J. Kasad

Job Address 2228 24th ST

Permit No: 0102517

Date of Request: _____

By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 2228 24th St

Assessor's Parcel Number: 010-0165-016

Previous Use: 4-plex

Description of Request/Proposed Use: interior & exterior repairs.

Exterior includes changing out wood trim single-hung windows to vinyl single-hung windows and dry rot repairs

Is This a Change of Use? no

Zoning Designation: R1B

Prior Applications for Project Site(P#, Z#, DRPB#): none

Comments: Needs Design Review approval, may need application submittal. Applicant advised to take photos and make appointment with Ellen Schmidt. May 2/27/01

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

see above.

Planning Review by/Date: _____

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

PS. this property is in the Central City Design Review Area; It is not a listed structure.

MICROFILM AFTER FINAL

DESIGN REVIEW APPROVAL
PROVIDED BY ELLEN SCHMIDT
PAUL REED 4/16/01