

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0107437

Insp Area: 1

Thos Bros: 297C5

Site Address: 623 T ST SAC

Parcel No: 009-0062-015 & 625 T ST

Sub-Type: NDUP

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

GUTIEREZ
617 T ST
SAC CA 95814

Nature of Work: 2-STRY DUPLEX - FIRST FLR UNIT = 1365 SF LVNG, 138 SF CVRD PRCH, 146 SF CVRD PATIO; SECOND FLR UNIT = 1472 SF LVNG(67 1ST, 1405 2ND), 50 SF CVRD PRCH @ 1ST FLR. 131 SF 2ND FLR BALCONY, 138 SF DECK.

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, Civ. 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 B License Number 374968 Date _____ Contractor Signature [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 & PC for this reason: _____

Date _____ Owner Signature _____

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 improvements 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 10-5-01 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 10-5-01 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.

Certification of Compliance School District Development Fees

(Print or Type) If Printing, press hard for four copies

PART I To be completed by APPLICANT (MUST BE COMPLETED FIRST)

OWNER'S NAME Helen C. Suter
 OWNER'S ADDRESS _____
 PROJECT ADDRESS 673/525 T ST
 PARCEL NUMBER 000-0062-015 LOT NO. _____
 SUBDIVISION NAME _____
 NUMBER OF UNITS 2

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE Helen C. Suter
 TITLE OF APPLICANT _____
 DATE 10-3-01 PHONE NUMBER 443-6267

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 010#427
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL ()
 SQUARE FEET OF CHARGEABLE BUILDING AREA 2750
 SIGNATURE [Signature]
 TITLE [Title] DATE 1-25-01

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT _____
 DISTRICT CERTIFICATION NO. _____
 EXEMPT _____ COMMENTS _____

RESIDENTIAL/APT/CONDO _____	SQ FT X \$ _____	= \$ _____
COMMERCIAL/INDUSTRIAL _____	SQ FT X \$ _____	= \$ _____
OTHER FEE _____ TYPE _____	SQ FT X \$ _____	= \$ _____
TOTAL FEES COLLECTED _____		= \$ 6076.76

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL

SIGNATURE _____
 TITLE _____ DATE 10/8/01

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Applicant

COUNTY SANITATION DISTRICT NO. 1
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

SEWER IMPACT FEE
PERMIT AND CALCULATION

*10/3/01
um*

APPLICATION NO:		BLDG PERMIT NO. SND2001-00689	
GENERAL INFORMATION		THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER	
CITY OF SACRAMENTO Jurisdiction		THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE	
1.25 Economic Devel Bank ESDs			
Approved July 31, 2001			
FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL <input checked="" type="checkbox"/> MF <input type="checkbox"/>	
CSD-1		COMMERCIAL USE	
SRCSD @ \$923	1,154	DUPLEX + DETACHED	
CONSTRUCTION		3-CAR GARAGE @	
IN-LIEU		APARTMENT UNIT	
TOTAL FEE	1,154		
APN: 009-0062-015			
DESCRIPTION/ SUBDIVISION		LOT:	
PROPERTY ADDRESS 623 T ST			
OWNER HELEN GUTIERREZ			
MAILING ADDRESS 617 T ST			
CITY-STATE-ZIP Sacto CA 95814		PHONE 448-6267	
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.			
APPLICANT SIGNATURE <i>Helen C Gutierrez</i>			
CONSOLIDATED UTILITY BILLING USE ONLY			
ACCT _____	INPUT _____	START _____	

PAID
um



Sacramento County Regional Sanitation District
10545 Armstrong Ave Suite 101
Mather, California
95655

OCTOBER 3, 2001
RECEIVING FAX: 441-4685
SENDING FAX: 916-876-6161

TO: HELEN & ALREDO GUTIERREZ

FROM: LYNN WYNN
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

RE: SEWER FACILITY IMPACT FEES
621, 623, 625 "T" St.

APN: 009-0062-015
SWD2001-00689

AWARD OF SEWER "BANK" CREDITS

SRCS D sewer credits of 1.25 have been approved. The adjusted Sewer Facility Impact Fees due for the proposed duplex and detached 3-car garage with apartment unit on the parcel at 621, 623, 625 "T" St. are \$1,154.

Please take sewer impact fee permit along with this form to the County Building Inspection Division, 827-7th Street, Window 11, Sacramento, California. Fees must be paid at this location. Make check payable to County of Sacramento.

If you have any questions regarding the above, please feel free to call me at 876-6081.

Cc: Lucinda Wilcox, City of Sacramento Planning
Barbara Larsen, City of Sacramento Permits

This fee is also subject to adjustment if the data supplied is changed.

www.srcsd.com

e-mail: wynn1@SacCounty.NET