

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0205809**  
**Insp Area: 2**  
**Thos Bros: 337 H3**

**Site Address: 103 CREEKSIDE CR SAC**  
**Parcel No: 119-0460-002**

**Sub-Type: NSFR**  
**Housing (Y/N): N**

**CONTRACTOR**  
RHEMA CONSTRUCTION  
PO BOX 340-143  
SAC CA 95834

**OWNER**  
LAM DUONG  
183 CREEKSIDE CIR  
SACT CA 95823

**ARCHITECT**

**Nature of Work: NSFD 1843 SQ FT + 484 GARAGE/FLOOD ELEVATION REQUIRED**

**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 \_\_\_\_\_ License Number 791801 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 3 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 09-12-02 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 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 09-12-02 Applicant/Agent 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 STATE COMPENSATION FUND Policy Number 1656206-02 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 09-12-02 Applicant 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.**

**INSULATION CERTIFICATE**

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH THE CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATION CODE, TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

SITE ADDRESS: 103 Creekside Circle Sacramento California  
STREET CITY STATE

**CELLULOSE:**

BLOWN: MANUFACTURER \_\_\_\_\_ THICKNESS \_\_\_\_\_ R-VALUE \_\_\_\_\_  
SQUARE FEET \_\_\_\_\_ # BAGS/LBS PER BAG

BATTS: MANUFACTURER Knaf THICKNESS 12.00" R-VALUE R-38  
Knaf 10.25" R-38 H.D.

**EXTERIOR WALLS:**

MANUFACTURER Knaf THICKNESS 3.50" R-VALUE R-13

**FLOOR INSULATION:**

MANUFACTURER Knaf THICKNESS 6.25" R-VALUE R-19

**AIR INFILTRATION: (TITLE 24)**

YES XXX NO \_\_\_\_\_

**OTHER:**

GENERAL CONTRACTOR: \_\_\_\_\_ LICENSE # \_\_\_\_\_

BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Insulation Contractor: Insulate Insulation LICENSE # 786893

By: Dean Sager TITLE Owner DATE 06/04/2003

**\*INSPECTOR SHOULD GET ORIGINAL COPY OF FINAL ELEVATION CERTIFICATE**

FEDERAL EMERGENCY MANAGEMENT AGENCY  
 NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077  
 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

|   |  |                            |
|---|--|----------------------------|
| <b>SECTION A - PROPERTY OWNER INFORMATION</b>   |  | For Insurance Company Use: |
| BUILDING OWNER'S NAME<br>THOA THI PHAM (LAM DUONG)  |  | Policy Number              |
| BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.<br>103 CREEKSIDE CIRCLE |  | Company NAIC Number        |

|  |   |          |
|--|---|----------|
| CITY<br>SACRAMENTO   | STATE<br>CA   | ZIP CODE |
| PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)<br>LOT 51, APN 119-0460-002 |   |          |
| BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if n<br>RESIDENTIAL |   |          |
| LATITUDE/LONGITUDE (OPTIONAL)<br>(###-##-##.## or ###.###)   | HORIZONTAL DATUM: SC<br><input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983 |          |

**\*INSPECTOR NEEDS TO CHECK:**

- WATER HEATER
- AC UNIT
- ELECT. BOX

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) IN**

|   |                               |
|---|-------------------------------|
| B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER<br>CITY OF SACRAMENTO 060265 | B2. COUNTY NAME<br>SACRAMENTO |
|---|-------------------------------|

|   |                 |                                   |   |                               |
|---|-----------------|-----------------------------------|---|-------------------------------|
| B4. MAP AND PANEL NUMBER<br>060265-0030 | B5. SUFFIX<br>F | B6. FIRM INDEX DATE<br>JULY 6, 98 | B7. FIRM PANEL EFFECTIVE/REVISED DATE<br>JULY 6, 98 | ELEVATION(S) (ft of flooding) |
|---|-----------------|-----------------------------------|---|-------------------------------|

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.  
 FIS Profile  FIRM  Community Determined  Other (Describe)

B11. Indicate the elevation datum used for the BFE in B9:  NGVD 1929  NAVD 1988

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)?

**TO BE AT SAME LEVEL AS FINISHED FLOOR.**

**ALSO CHECK VENT OPENINGS FOR TOTAL SF/SQ. IN.**

**SECTION C - BUILDING ELEVATION INFORMATION (SURV)**

C1. Building elevations are based on:  Construction Drawings  Building Under Construction  Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

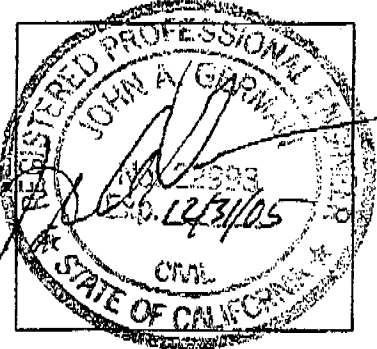
C2. Building Diagram Number 4 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE(AH, A (with BFE), VE, V1-V30, V (with BFE), AR, ARA, AR/AE, ARA1-A30, ARAH, AR/AO  
 Complete items C3-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section D, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum NGVD 1929 Conversion/Comments AC COMPRESSOR PAD

Elevation reference mark used 18.63 Does the elevation reference mark used appear on the FIRM?  Yes  No

- a) Top of bottom floor (Including basement or enclosure) 18.90 ft.(m)
- b) Top of next higher floor     ft.(m)
- c) Bottom of lowest horizontal structural member (V zones only)     ft.(m)
- d) Attached garage (top of slab) 16.06 ft.(m)
- e) **\* Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area)** 16.76 ft.(m) **needs to be, at least 18' or above**
- f) Lowest adjacent (finished) grade (LAG) 15.3 ft.(m)
- g) Highest adjacent (finished) grade (HAG) 15.6 ft.(m)
- h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 4 **NEEDS TO BE MIN. OF**
- i) **\* Total area of all permanent openings (flood vents) in C3.h 448 sq. in. (sq. cm) **3,365 SF/484 SQ. IN.****



**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.  
 I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.  
 I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME JOHN A. GERMAN LICENSE NUMBER RCE22993

|                                    |                                 |                           |                   |
|------------------------------------|---------------------------------|---------------------------|-------------------|
| TITLE CIVIL ENGINEER               | COMPANY NAME GERMAN ENGINEERING |                           |                   |
| ADDRESS<br>3000 FRANKLIN BLVD      | CITY<br>SACRAMENTO              | STATE<br>CA               | ZIP CODE<br>95818 |
| SIGNATURE<br><i>John A. German</i> | DATE<br>9/25/03                 | TELEPHONE<br>916-455-3000 |                   |

427201  
 COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT  
**SEWER IMPACT FEE**  
 PERMIT AND CALCULATION SHEET

APPLICATION NO: \_\_\_\_\_ BLDG PERMIT NO. SDP 2001-00607

GENERAL INFORMATION  
 City of Sac

THIS PERMIT GOOD ONLY WHEN  
 VALIDATED BY THE CASHIER  
 PAID 274345  
 AUG 10 2001  
 # 3200107613

**RECEIPT ONLY**

FEE CALCULATION

|                  |   |
|------------------|---|
| INSPECTION       | <input checked="" type="checkbox"/>         |
| CSD-1            | 100% CT <input checked="" type="checkbox"/> |
| SRCSD            | 2404  |
| CONSTRUCTION     |   |
| IN-LIEU          |   |
| <b>TOTAL FEE</b> | <b>\$ 2404</b>                              |

BUILDING USE

|                |  |                             |
|----------------|--|-----------------------------|
| RESIDENTIAL    | SF <input checked="" type="checkbox"/> | MF <input type="checkbox"/> |
| COMMERCIAL USE |  | UNITS                       |
|                | SFD                                    |                             |

APN: 119-0460-002

DESCRIPTION/SUBDIVISION: CREEKSIDE PARK LOT: 5

PROPERTY ADDRESS: 103 CREEKSIDE CIR

OWNER: THOA PHAM

MAILING ADDRESS: 104 CREEKSIDE CIR

CITY-STATE-ZIP: SAC, CA 95823 PHONE: \_\_\_\_\_

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT

APPLICANT SIGNATURE: \_\_\_\_\_

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT \_\_\_\_\_ INPUT \_\_\_\_\_ START \_\_\_\_\_

*Customer* RECEIPT



**Sacramento Regional  
 County Sanitation  
 District**

10545 Armstrong Avenue  
 Suite 101  
 Mather, California  
 95655  
 Office: (916) 878-8100  
 Fax: (916) 878-8101  
 www.srccd.com

Customer Service:  
 Sewer Fees,  
 Permitting Information,  
 Sewer Service Locations

RECEIVED  
 AUG 10 2001  
 10300-1000

# Certification of Compliance

## School District Development Fees

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

**PART I To be completed by the APPLICANT (MUST BE FILLED OUT COMPLETELY)**

OWNER'S NAME THOA T. PHAM  
 OWNER'S ADDRESS 104 Creekside circle sacramento CA 95823  
 PROJECT ADDRESS 103 Creekside circle. sacramento, CA 95823  
 PARCEL NUMBER 119-0460-002 LOT NO. 51  
 SUBDIVISION NAME \_\_\_\_\_  
 NUMBER OF UNITS 1

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 [Signature]  
 TITLE OF APPLICANT owner  
 DATE 7-25-2002 PHONE NUMBER 719-8044

**PART II To be completed by BUILDING DEPARTMENT**

PLAN IDENTIFICATION NUMBER 020 5809  
 BUILDING TYPE  
 RESIDENTIAL (X) APARTMENT/CONDOMINIUM ( ) COMMERCIAL/INDUSTRIAL ( )  
 SQUARE FEET OF CHARGEABLE BUILDING AREA 1843 \$  
 SIGNATURE [Signature]  
 TITLE Sup Bldg Inspector DATE 5-3-02

**PART III To be completed by SCHOOL DISTRICT**

SCHOOL DISTRICT EGUSD  
 DISTRICT CERTIFICATION NO. 32398  
 EXEMPT \_\_\_\_\_ COMMENTS plan chgs. increase refer to #10198 8/6/90  

|                             |            |            |             |      |               |
|-----------------------------|------------|------------|-------------|------|---------------|
| RESIDENTIAL/APT/CONDO       | <u>280</u> | SQ FT X \$ | <u>2.14</u> | = \$ | <u>599.20</u> |
| COMMERCIAL/INDUSTRIAL       |            | SQ FT X \$ | <u>1.23</u> | = \$ | <u>344.40</u> |
| OTHER FEE TYPE              |            | SQ FT X \$ |             | = \$ |               |
| <b>TOTAL FEES COLLECTED</b> |            |            | <u>3.37</u> | = \$ | <u>943.60</u> |

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 [Signature]  
 TITLE \_\_\_\_\_ DATE 5/17/02

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

Department of Planning and Development  
Building Inspection Division

Grading and Erosion Control Questionnaire

To be completed for all residential new construction and additions

**PART I** (To be completed by applicant)

Site Address 103 Creekside Circle A.P.N. 119-0460-002

Applicant Information

Name THOA T. PHAM  
Address 104 Creekside Circle  
SACRAMENTO, CA 95823  
Phone 719-8044

Project Information (Check One)

Single Family Dwelling  ✓  
Duplex   
Triplex   
Deep Lot Development

**PART II** (To be completed by the applicant when the project is not a part of a larger subdivision)

Are there existing structures on site?  Y  N  
Does the site front on a paved road?  Y  N \*  
Is the site higher than the crown of adjacent road?  Y  N \*  
Is the proposed building site higher than the back of the sidewalk or curb?  Y  N \*

Describe existing frontage improvements along road.

Ditch \*  Curb and Gutter  Curb, Gutter, and Sidewalk

The direction of drainage on this site is:

Front to Rear \*  Rear to Front  Side to Side \*

Does an adjacent site drain across this parcel?  Y \*  N

Does this site have an existing low area or drainage swale?  Y \*  N

Will construction require cut or fill on site? (\* >50FT3 or >2FT)  Y  N

- How much cut? \_\_\_\_\_ Yards Depth  
- How much fill? \_\_\_\_\_ Yards Depth

Has building site been previously been filled?  Y \*  N

Will existing drainage be re-routed?  Y \*  N

Do you plan to construct or modify culverts or drainage ditches?  Y \*  N

Print Name THOA T. PHAM Title Owner

Signature Thoa T. Pham Date 5-3-02  
Owner or Contractor

**PART III** (To be completed by staff)

What is the acreage of the parcel to be built on? .20 Acres.

If greater than 1/2 acre has an approved erosion and sediment control plan been provided?  Y  N

If greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP?  Y  N

Is the parcel to be built on part of a larger subdivision?  Y  N

Subdivision Name: N/A

If yes has an approved erosion and sediment control plan been provided?  Y  N

If the original subdivision is greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP?  Y  N

Is grading and drainage approval required prior to permit issuance?  Y  N

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Building permit #: \_\_\_\_\_

White Copy - Permit Jacket  
Yellow - Utilities  
Pink - Bldg. Div.

PLANNING AND ZONING REVIEW

..... to be filled out by Planning staff .....

ADDRESS: to be assigned (Creekside Circle)

APN: 119-0460-002 ZONING: R-1A

DESIGN REVIEW AREA: none

PREVIOUS FILES RELATED TO SITE: Z01-175 & P88-212

EXISTING LAND USE: vacant residential

PROPOSED USE: new S.F.R.

COMMENTS: subject to previous Special Permit approval (P88-212) and subsequent Minor Mod. approval (Z01-175), 9/25/01

DATE: \_\_\_\_\_ BY: \_\_\_\_\_

DOES IT APPEAR THAT THE PROJECT WILL REQUIRE A PLANNING APPLICATION?

YES      NO      (If yes, circle applications needed below)

.....Staff..... ZA.....Planning Commission.....Design Review.....Preservation Review.....

CONCLUSION: may submit plans for subsequent lots, but must confirm that Z01-175 included approval for all lots (not just the one already issued; bldg permit # 0113055); must comply w/all conditions

DATE: 5/3/02 BY: PHIL REED