

**CITY OF SACRAMENTO**

1231 I Street, Sacramento, CA 95814

Permit No: 0205882

Insp Area: 4

Thos Bros:

Sub-Type: REP

Housing (Y/N): N

Site Address: 1671 WEST EL CAMINO AV SAC

Parcel No: 225-0450-001 UNIT 31 & 32

CONTRACTOR

OWNER

STEADFAST RIVERCOURT LP  
20411 S. W. BIRCH ST K#200  
NEWPORT BEACH, CA 92660

ARCHITECT

Nature of Work: FIRE REPAIR IN UNIT 31 (DWNSTRS) & C/O E WTR HTR & FIRE REPAIR IN UNIT 32 (UPSTRS) & ROOF

**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 \_\_\_\_\_ 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 & PC for this reason: \_\_\_\_\_

Date 5/6/02  Owner Signature MJury agent for owner

**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 5/6/02  Applicant/Agent Signature MJury agent for owner

**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 5/6/02  Applicant Signature MJury agent for owner

**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**

1251 I Street, Rm. 200  
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0205882 Insp. Area 4C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1671 W EL CAMINO Suite 31 & 32  
 PARCEL # 225 0450 . 001

<p align="center"><b>CONTACT</b></p> <p>Name <u>MICHAEL JUAREZ</u>                  Street Address <u>20411 S.W. BIRCH ST #200</u>                  City/State/Zip <u>NEWPORT BCH CA 92660</u>                  Phone <u>711</u> FAX _____                  E-mail: <u>949.852.0700 949852.0143</u></p>	<p align="center"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> <p>Name <u>O/B</u>                  Address _____                  City/State/Zip _____                  Phone _____ FAX _____                  E-mail: _____</p>
<p align="center"><b>ARCHITECT/ENGINEER</b></p> <p>Name <u>M. JUAREZ @ STEADFAST COMPANIES</u>                  Address _____                  City/State/Zip _____                  Phone _____ FAX _____                  E-mail: _____</p>	<p align="center"><b>OWNER</b></p> <p>Name <u>STEADFAST RIVERCT LP</u>                  Address <u>20411 S.W. BIRCH ST #200</u>                  City/State/Zip <u>NEWPORT BCH CA 92660</u>                  Phone _____ FAX _____                  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: FIRE REPAIR - ROOF BEDROOM  
IN #32 SMOKE DAMAGE UNIT 31  
FIRE & SMOKE DAMAGE THROUGHOUT & REPLACE  
ELEC. WTR HTR

OCCUPANT/TENANT: RIVERCOURT APT VALUATION: \$ 25,000.00

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 type="checkbox"/> MECH	<input checked="" type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input type="checkbox"/> SITE	<input type="checkbox"/> FIRE			
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File	
						SPR	ALARM		[H]	[Quad]
<input checked="" type="checkbox"/> R	L	<input checked="" type="checkbox"/> P	M	<input checked="" type="checkbox"/> E	F	S	D	04	PW	UTIL

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

**PLANNING AND ZONING REVIEW**

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

ADDRESS: 1671 W. El Camino

APN: \_\_\_\_\_ ZONING: \_\_\_\_\_

DESIGN REVIEW AREA: Expanded North Area

PREVIOUS FILES RELATED TO SITE: N/A

EXISTING LAND USE: apartment complex

PROPOSED USE: repair of fire damage

COMMENTS: exterior work includes roof repair, siding repair, replace windows & door

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: over-the-counter approval 5/6/02: repairs to exterior to match existing materials and color

DATE: 5/6/02 BY: PHIL REED



0205882

**ELECTRIC INC.**

State Lic. No. 603863

13090 Borden Ave. Sylmar, CA. 91342  
Tel: (818) 362-3911 Fax: (818) 362-4611  
E-mail: l.u@elect@aol.com

**LOAD CALCULATIONS FOR 3 BEDROOMS – APT # 31  
Rivercourt Apartments**

**Job Address:**  
1671 West El Camino Av.  
Sacramento, CA 95833

Unit load as per 1999 NEC 220-30

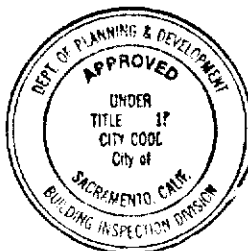
Lighting 3Watts X Sp Ft X 1.176	3.528 V.A.
Small Appliances Circuits (3 circuits)	3.000 V.A.
Laundry Circuit	1.500 V.A.
Garbage Disposal	860 V.A.
Dishwasher	920 V.A.
Water Heater	4.500 V.A.
Range	<u>8.000 V.A.</u>
	22.308 V.A.

First 10,000 watts at 100%	10,000 V.A.
12308 Remainder at 40 %	4,923 V.A.

Air condition / Central Heating at 100%	<u>5,760 V.A.</u>
	20,683 V.A.

**Total 20,683 V.A. / 240V. = 86.1 Amps**

Existing main breaker rated 100Amps  
Feeders # 4 THHN CU rated 100Amps per NEC 310-15 (b)(6)

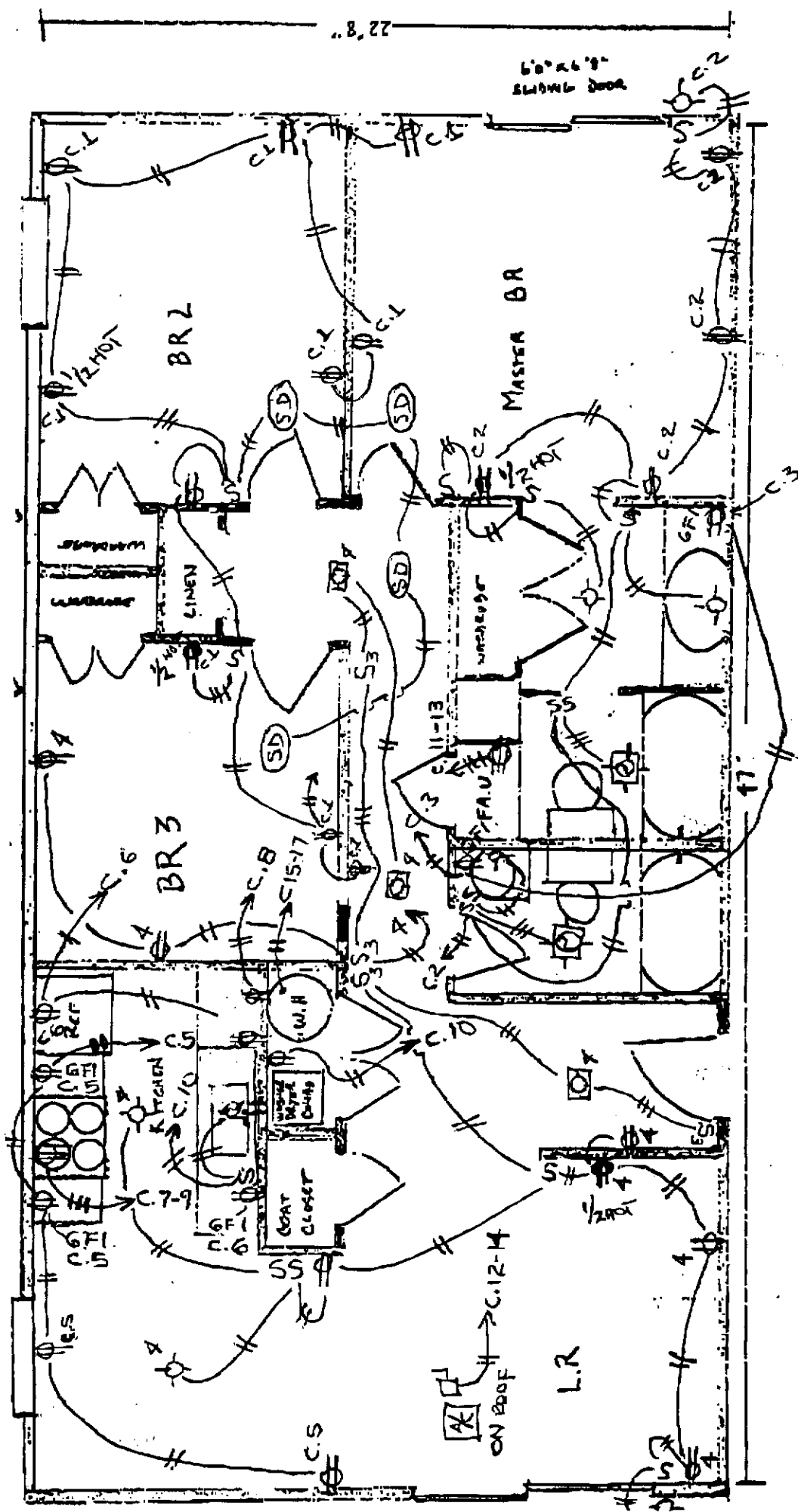


**This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.**

**The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.**

# Rivercourt Apts.

1671 W. El Camino Av - Sacramento, CA 95833



1/4" = 1'

Project: Rivercourt Apartments  
1671 W. El Camino Av.  
Sacramento, CA 95833

**Re-wiring of apartment # \_\_\_\_\_**

Sub-panel rated 100Amps.  
120/ 240Volts 1 phase- 24 spaces  
Feeders: # 4 coppers with Gr. # 8 rated for 100Amps.

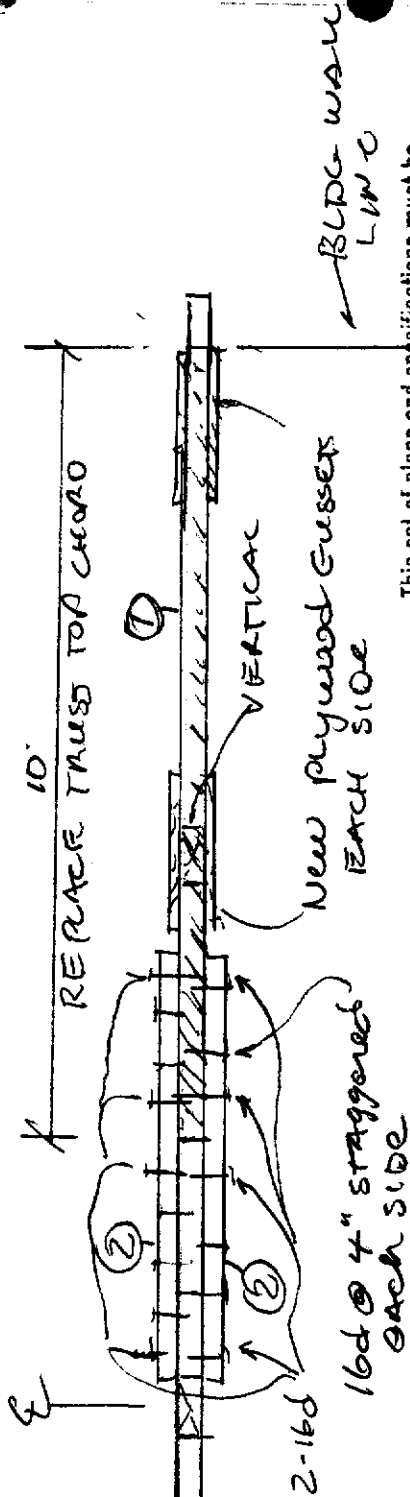
**CIRCUITRY**

C. #	Wire Size Cu.	Amps.
1. G. Lighting	12	20
2. G. Lighting	12	20
3. Baths G.F.I's	12	20
4. G. Lighting	12	20
5. Small Appliances	12	20
6. Small Appliances	12	20
7. Stove	8	40
8. Dish Washer	12	20
9. Stove	8	40
10. Garbage Disposal	12	20
11. F.A.U.	8	40
12. A/C	8	40
13. F.A.U.	8	40
14. A/C	8	40
15. Water Heater	10	30
16.		
17. Water Heater	10	30

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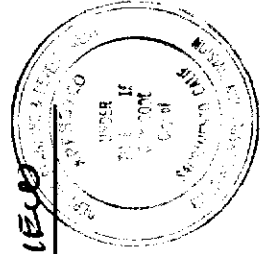
Job # 02-101

PACIFIC CONSULTING ENGINEERS  
2150 BELL AVENUE SUITE 145  
SACRAMENTO, CA 95836



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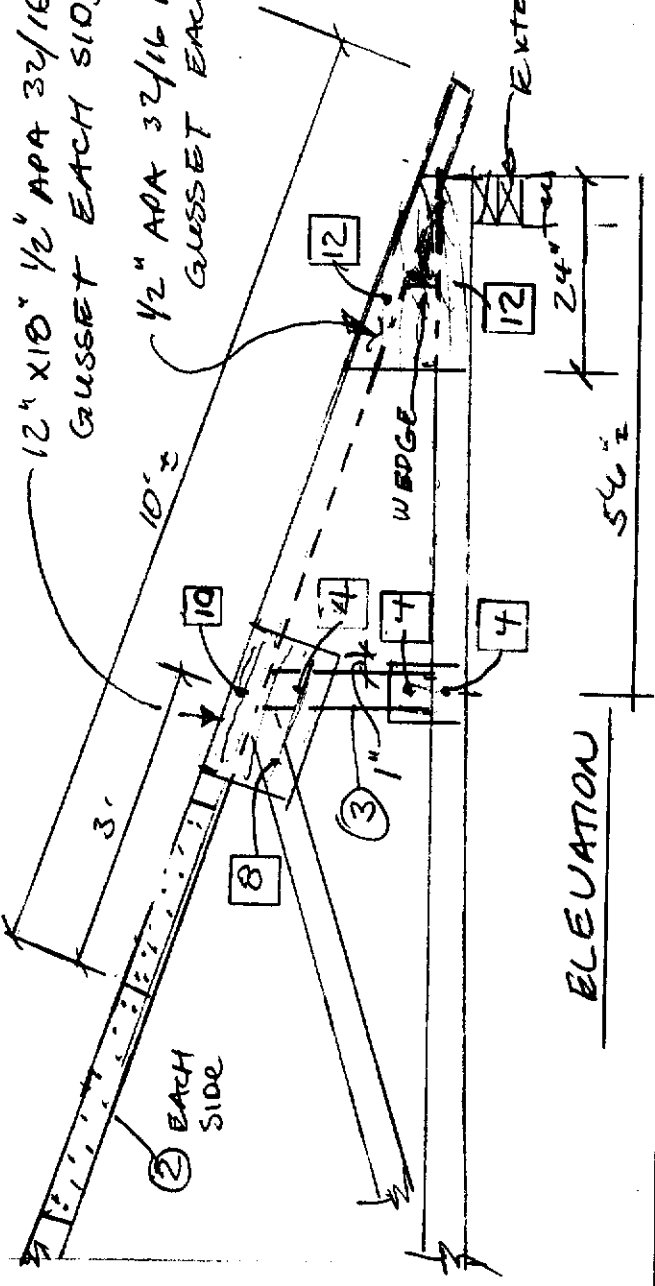
TOP VIEW

- ① - NEW TOP CHORD - # 1 OF 2X4
- ② - NEW 2X4 X 5 I # 2 OF 1
- ③ - NEW VERTICAL 2X4 \* 2DF

⑩ NUMBER OF 10d NAILS EACH SIDE OF TRUSS

12" X 10" 1/2" APA 3/16 RYWOOD GUSSET EACH SIDE

1/2" APA 3/16 PLYWOOD GUSSET EACH SIDE



ELEVATION

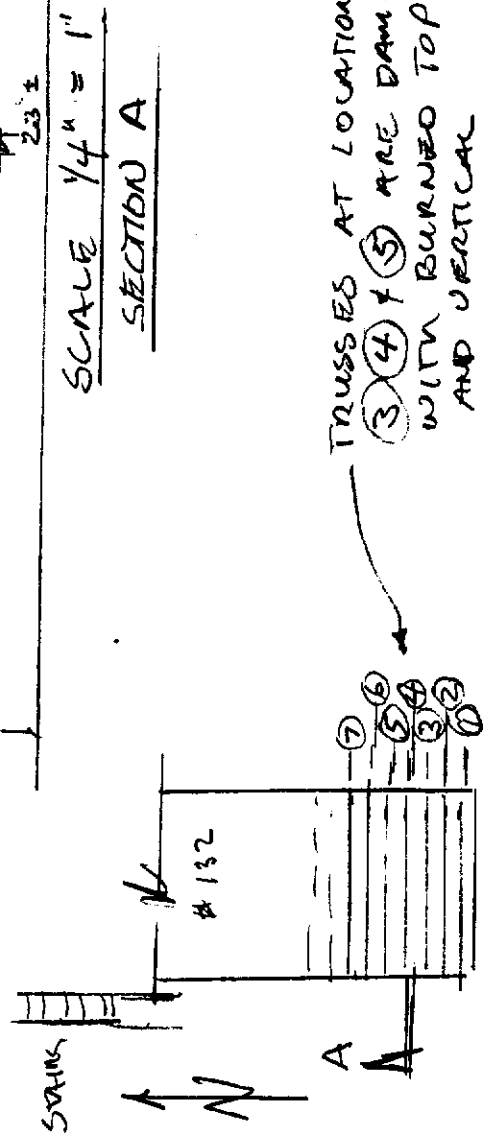
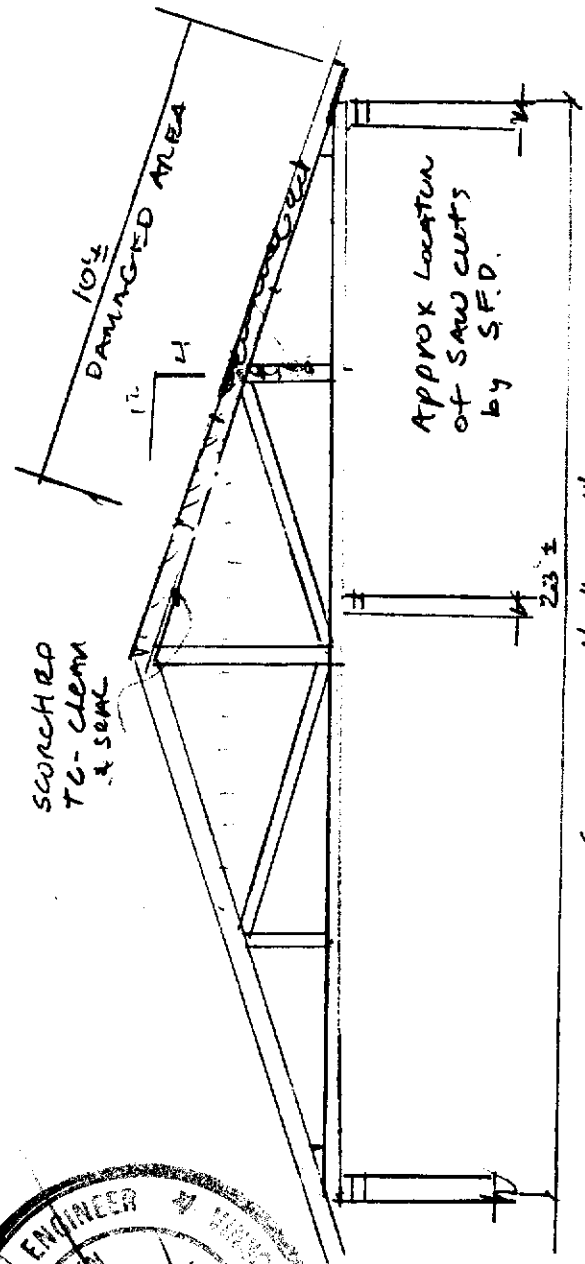
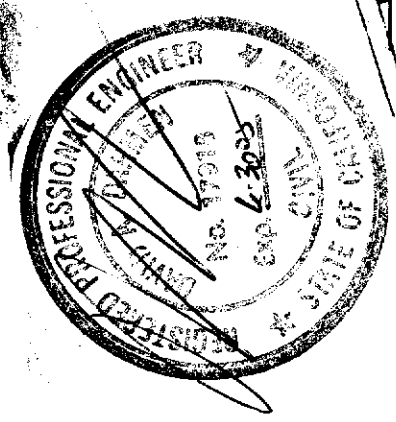
TRUSS REPAIR DETAILS

2/2

RIVER COURT  
1671 W. EL CAMINO AVE  
SACRAMENTO, CA 95833

1/2

PACIFIC CONSULTING ENGINEERS  
2150 BELL AVE. SUITE 105  
SACRAMENTO, CA 95833



SEE SHEET 2  
FOR REPAIR  
DETAILS

TRUSSES AT LOCATION  
③ ④ ⑤ ARE DAMAGED  
WITH BURNED TOP CHORD  
AND VERTICAL

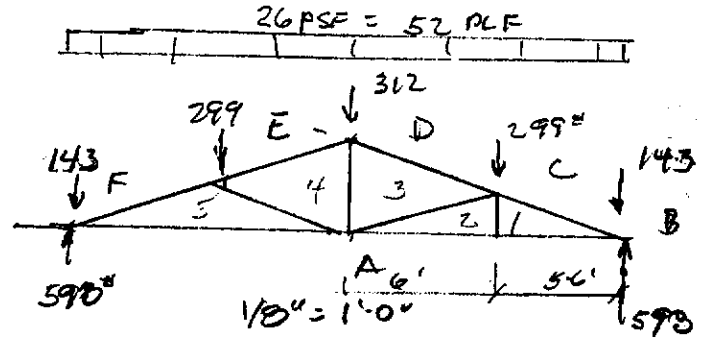
NOTE IF SFD SAW CUTS OCCUR ON  
TRUSSES OTHER THAN ③ ④ ⑤ PROVIDE  
2x4 x 4' \* 2 OF ONE SIDE - NAIL  
AS SHOWN FOR ② SHEET 2

PARTIAL ROOF PLAN

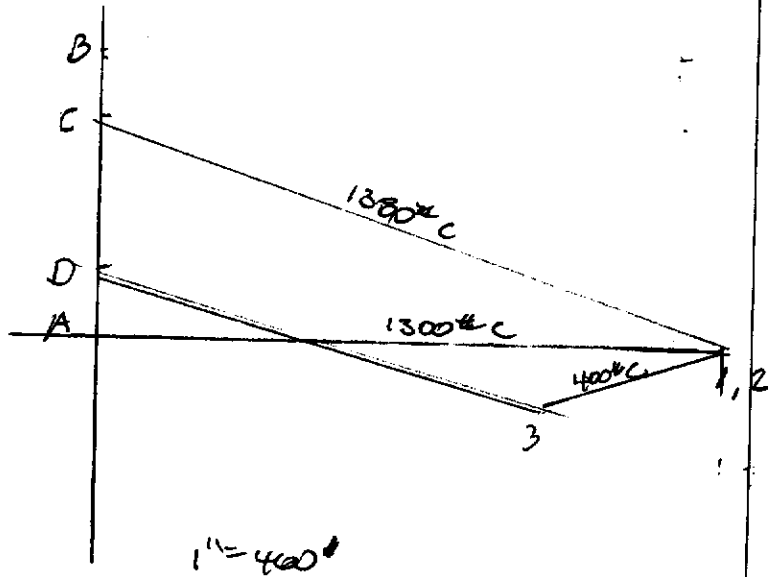




LOAD



FORCE



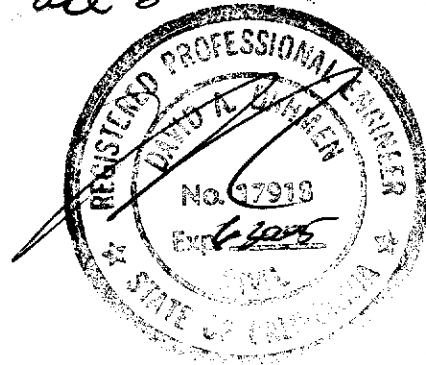
USE 1/2" plywood Gussers  
each side of joints - secure  
w/ 10d nail

$$F = 94 \times 1.25 = 117 \text{ #/NAIL}$$

NO FASTENERS each joint

Heel joint  $F = 1300 \text{ #}$  NO NAILS =  $1300 / 117 = 12 \text{ MIN}$  use 14

2-3 Ding -  $F = 400 / 117 = 3 + \text{ MIN}$  use 3



PACIFIC CONSULTING ENGINEERS  
2150 BELL AVE., SUITE 145  
SACRAMENTO, CA 95838