

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0311634

Insp Area: 4

Thos Bros: 257 H7

Site Address: 4845 RIO LINDA BL SAC

Parcel No: 226-0240-025

Sub-Type: NOTHR

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

WAT LAO PHOSIESATTANAK TEMPLE
4845 RIO LINDA BL
SACRAMENTO CA 95815

Nature of Work: CONSTRUCT SIX FOOT HIGH MASONRY WALL

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 08-07-03 Owner Signature Cheng Lamonty

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 08-07-03 Applicant/Agent Signature Cheng Lamonty

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 08-07-03 Applicant Signature Cheng Lamonty

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
PLANNING & BUILDING DEPARTMENT
 1231 I Street, Suite 200 or 2101 Arena Bl., 200
 Sacramento, CA 95814 Sacramento, CA 95834
 (916) 264-5656, 1-866 EZ PERMIT or www.cityofsacramento.org

| | |
|-------------------|-------------------|
| ACTIVITY # | Insp. Area |
|-------------------|-------------------|

Applicant to complete all areas down to valuation

ADDRESS 4845 Rolinda Blv. Sacramento, CA 95838 Suite
PARCEL # _____

| | | | |
|--|--|---|--|
| CONTACT Name <u>Cheing Lamountry</u> Street Address <u>2807 Aurora st.</u> City/State/Zip <u>Sacramento, CA 95821</u> Phone <u>916-912-5334</u> FAX _____ E-mail: <u>Lcheing@yahoo.com</u> | | LICENSED CONTRACTOR Lic No. # _____ Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____ | |
| ARCHITECT/ENGINEER Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____ | | OWNER Name <u>Wat Lao phosiesatanak</u> Address <u>4845 Rolinda Blv.</u> City/State/Zip <u>Sacramento, CA 95838</u> Phone <u>9169256152</u> FAX _____ E-mail: _____ | |

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

NATURE OF WORK IN DETAIL: Building masonry wall by owner.

OCCUPANT/TENANT: _____ **VALUATION: \$** 247,000

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

COMMENTS:

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

City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

| | |
|--|--|
| ADDRESS: 4845 Rio Linda Bl | APN: 226-0240-025 |
| DRPB AREA / PUD / SPD: Expanded North | ZONING: R-1 |
| EXISTING LAND USE: SFR | |
| PROPOSED USE: 6 ft high masonry wall | |
| PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW: | |
| <input type="checkbox"/> | Planning review is NOT required. |
| <input type="checkbox"/> | Use is NOT allowed; applicant CANNOT submit for plan check. |
| <input type="checkbox"/> | Requires APPLICATION(s): PC ZA IR ER DR PB Required Planning application must be submitted <i>before</i> project can be submitted for plan check. |
| <input type="checkbox"/> | Application(s) IN PROGRESS: Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit. |
| <input type="checkbox"/> | Application(s) COMPLETED: Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period. |
| <input checked="" type="checkbox"/> | Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit. |
| <input type="checkbox"/> | Meets setback & lot coverage requirements as shown on site plan provided. |
| <input type="checkbox"/> | Plans to be submitted have been stamped/signed by Planning counter staff. |
| <input type="checkbox"/> | Route to SITE for plan check and inspection. |
| <input type="checkbox"/> | Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal. |
| COMMENTS: Max. height of wall to not exceed 6 ft above finished grade. | |
| DATE: 8/7/03 | BY: Linda Hay |