

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0501096

Insp Area: 3

Thos Bros: 297F7

Site Address: 3448 Y ST SAC

Parcel No: 010-0314-006

N

CONDITIONS OF APP. IN JOB FOLDER.

Sub-Type: COM

Housing (Y/N):

CONTRACTOR

DAVIS CONSTRUCTION
100 WOODSMOKE WAY
FOLSOM, CA. 95630

OWNER

PARKER FAMILY TRUST
3448 Y ST
SACRAMENTO, CA 95817

ARCHITECT

Nature of Work: T/O & INSTALL NEW HORIZONTAL WOOD LAP SIDING AT EXTERIOR OF STRUCTURE.

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 806088 Date 1/25/05 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 _____ 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 1/25/05 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 NONE NO EMPLOYEES 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 1/25/05 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.



CITY OF SACRAMENTO
CALIFORNIA

PLANNING AND
BUILDING
DEPARTMENT
PHONE 916-264-5381

1231 I STREET, ROOM 200
SACRAMENTO, CA
95814-2998
FAX 916-264-7046

Over-The-Counter Project Review

Address: 3448 Y Street
Description: New Siding

Applicant: Denny Davis/Tim Parker
Date Approved: January 25, 2005
Staff Contact: Ashley Feeney, Planning Technician, 808-1941

STAFF ACTION AND CONDITIONS OF APPROVAL:

Staff has reviewed the proposed project, and approves it with the following conditions of approval:

1. Provide new horizontal wood lap siding at all sides of existing structure. The new siding shall match the existing 3-lap teardrop siding. The siding profile exposure shall be 2 3/4 " to match existing detail.
2. Provide wood trim and sills at all doors and windows to match existing details.
3. Repair existing windows as required.
4. Retain existing brick wainscot at the street-face.
5. Paint entire building in a complimentary accent color scheme.
6. The scope of exterior work is limited to the above listed items. Any changes are subject to Design Review staff approval.

Recommended/Optional: Provide a decorative gable end vent with wood trim and sill in upper street-facing gable end. Provide shingle/horizontal wood lap siding (2 3/4) in upper street-facing gable end.



Ashley Feeney
Planning Technician
Design Review

City of Sacramento Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 3448 Y Street	APN: 010-0314-006
DRPB AREA / PUD / SPD: Oak Park Design Review	ZONING: R-2B
EXISTING LAND USE: 4-unit apartment complex	
PROPOSED USE: Exterior Renovations, siding etc.	
<p>PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:</p> <p><input type="checkbox"/> Planning review is NOT required.</p> <p><input type="checkbox"/> Use is NOT allowed; applicant CANNOT submit for plan check.</p> <p><input type="checkbox"/> Requires APPLICATION(s): PC ZA IR ER DR PB</p> <p style="padding-left: 40px;">Required Planning application must be submitted <i>before</i> project can be submitted for plan check.</p> <p><input type="checkbox"/> Application(s) IN PROGRESS:</p> <p style="padding-left: 40px;">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.</p> <p><input type="checkbox"/> Application(s) COMPLETED:</p> <p style="padding-left: 40px;">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.</p> <p><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.</p> <p><input type="checkbox"/> Meets setback & lot coverage requirements as shown on site plan provided.</p> <p><input type="checkbox"/> Plans to be submitted have been stamped/signed by Planning counter staff.</p> <p><input type="checkbox"/> Route to SITE for plan check and inspection.</p> <p><input type="checkbox"/> Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.</p>	
<p>COMMENTS: Plans must conform to Over-The-Counter Project Review approvals. See Approved Conditions.</p> <p>No other work to be done.</p>	
DATE: 25 January 2005	BY: Robert W. Williams

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 # 0501096	Insp. Area SC
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Applicant **MUST** complete ALL Unshaded Areas

ADDRESS: 3448 Y STREET Suite: _____

PARCEL #: 010-0314-006

<p style="text-align: center;">CONTACT</p> <p>Name: <u>Denny Davis</u> Street Address: <u>9580 OAK AVE #305</u> City/State/Zip: <u>Folsom, CA 95630</u> Phone: <u>916 206-2557</u> E-Mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>80008</u></p> <p>Name: <u>Davis Construction</u> Street Address: <u>9580 OAK AVE #305</u> City/State/Zip: <u>Folsom, CA 95630</u> Phone: <u>916 206-2557</u> E-Mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name: <u>N/A</u> Street Address: _____ City/State/Zip: _____ Phone: _____ E-Mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name: <u>Tim Parker</u> Street Address: <u>709 CASTLE WAY</u> City/State/Zip: <u>El Dorado Hills, CA</u> Phone: <u>916 947-7183</u> E-Mail: _____</p>

⇒ Will permittee have any employees on the jobsite? No Yes ⇒ Insurance Co.: Sub-contractors

⇒ WORKER'S COMPANSATION POLICY # _____ EXPRATION DATE: _____

NATURE OF WORK IN DETAIL: Provide and install new horizontal wood lap siding at exterior of structure

OCCUPANT/TENANT: N/A VALUATION: 12,410.00

FLOOD STATUS:			S.C.A.T.								
JOB DISCRPTION			BLDG	SHELL	APT	II()	REM()	SW	FIRE	ADD	OTH
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. [H]	File [Quad]	
						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? Provided Faxed

\$19724