1231 I Street, Sacramento, CA	95814	Insp Area:	2
erent i		Thos Bros:	316J6
A A A A A A A A A A A A A A A A A A A	EN DD CAC	Cult Trans.	DED
ite Address: 6200 GREENHAV arcel No: 030-0361-008	UNIT# 203 AND 204	Sub-Type: Housing (Y/N)	
11CET NO. 030-0301-008	ON11# 203 AND 204	110dsing (1714)	
ONTRACTOR .	OWNER TOWNWOMES ILL	<u>ARCHITECT</u>	
	CP PARK TOWNHOMES LLC 1000 SAMSOME ST		
	SAN FRANCISCO, CA 94111		
ature of Work: REPAIR SECO	OND STORY BALCONIES IN APART	ΓΜΕΝΤ UNIT# 203 A	ND 204. ENGINEEI
PPROVED UNDER# 0504543			
ONSTRUCTION LENDING AGENCY work for which this permit is issued (Sec. 309	Y: I hereby affirm under penalty of perjury that there 27, Civ. C).	e is a construction lending agenc	y for the performance of
nder's Name	Lender's Address		The state of the s
	RATION: I hereby affirm under penalty of perj f the Business and Professions Code and my license is		provisions of Chapter 9
ense Class License Number _ Date	Contractor Signature		
WNER-BUILDER DECLARATION:	I hereby affirm under penalty of perjury that I am exe	empt from the contractors Licen	se Law for the following
son (Sec. 7031.5, Business and Professions C or to its issuance, also requires the applicant for ense Law (Chapter 9 (commencing with Sect	ode; any city or county which requires a permit to cor or such permit to file a signed statement that he or she ion 7000) of Division 8 of the Business and <b>Profession</b> of Section 7031.5 by any applicant for a permit subject	nstruct, alter, improve, demolish is licensed Alexand to the prov one Code for Abat he on shorish	, or repair any structure, isions of the Contractors
o does such work himself or herself or throug building or improvement is sold within one y purpose of sale.)	The Contractors License Law does not apply to an this/her own employees, provided that such improve ear of completion, the owner-builder will have the built in the contraction of the c	ements a <del>le not intended</del> or offer rden of proving that he/she did	ed for sale. If, however, not build or improve for
	ly contracting with licensed contractors to construct to owner of property who builds or improves thereon,		
I am exempt under Sec.	B & PC for this reason:		
te 5-6-05	Owner Signature		
	Owner Signature		
easurements and locations shown on the appli	e applicant represents, and the city relies on the repre- ication or accompanying drawings and that the impre- nibited locations for such improvements. This building ment relating to location of improvements.	ovement to be constructed does	not violate any law or
ertify that I have read this application and state lding construction and herby authorize represe	that all information is correct. I agree to comply with mattive(s) of this city to enter upon the abovementation	nall city and county ordinances oproperty for inspection purpose	and state laws relating to ses.
5-6-05	Applicant/Agent Signature		
DEVEDIS COMBENS ATTON DECL	ADATION. IL.		
I have and will maintain a certificate of commance of work for which the permit is issued.	<b>ARATION:</b> I hereby affirm under penalty of perjury onsent to self-insure for workers' compensation as pred.	y one of the following declaration ovided for by Section 3700 of	ns: the Labor Code, for the
I have and will maintain workers' compen permit is issued. My workers' compensation	sation insurance, as required by Section 3700 of the insurance carrier and policy number are:	Labor Code, for the performance	ce of the work for which
Carrier	Policy Number	Exp Date	
employ any person in any manner so as to be	permit is for \$100 or less) I certify that in the perform come subject to the workers' compensation laws of Ca of the Labor Code, I shall forthwith comply with those	nance of the work for which thi alifornia and agree that if I shou	s permit is issued, Ishall ld become subject tothe
e	Applicant Signature		1.
ARNING: FAILURE TO SECURE WORK	ER'S COMPENSATION COVERAGE IS UNLAW UP TO ONE HUNDRED THOUSAND DOLLA FOR IN SECTION 3706 OF THE LABOR CODE, I	RS (\$100,000) IN ADDITION	N TO THE COST OF

Permit No: 0506405

**CITY OF SACRAMENTO** 



Downtown Permit Center 1231 | Street, Suite 200 Sacramento, CA 95814 Help Line: 1-916-264-5656

## CITY OF SACRAMENTO DEVELOPMENT SERVICES DEPARTMENT BUILDING DIVISION www.cityofsacramento.org

North Permit Center 2101 Arena Blvd., Suite 200 Sacramento, CA 9583¢ Inspection: 1-916-808-4677

#### OWNER BUILDER VERIFICATION

1.	Check one below-	I or my immediate	: family (par <del>e</del> nt,	spouse, or cl	hild) will perform:

A - all the work authorized by this permit.

B- ap

a portion of the work.
none of the work.

If B or C is checked, complete 2 or 3 below.

2. A State licen	sed contractor (*) will be hired to do:	
	all of the authorized work.	a portion of the authorized work.
	7-0	D1:

	Name 10	BE DETERMENT	Phone	· · · · · · · · · · · · · · · · · · ·	<u>.</u>	
	Address	Oug Fon Bro			·	
	Type of Work			· · · · · · · · · · · · · · · · · · ·	· · · ·	
				-		
	Name		Phone		<del></del>	
	Address				<del></del> ·	:
	Type of Work					
	Name		Phone		<u> </u>	
٠.	Address					
	Name		Phone		<del></del>	•
	Address		<u> </u>	<u> </u>		
	Type of Work				<del></del> .	
3.	Certificate of Workers C	person(s) other than my immediate fa compensation must be on file at this o	ffice.	1.4	•	
I deci	everse side of this form.	that the above is true and correct. I h	nave read and understan	d the owner-build	ler info	rmation on
	Signed: Property Owner  Date 5-6-05	Case No	•		06	405
	Job Address 6200	GREENHAUEN SA	CINAMIENTO CAL			

Note: \* Information regarding unknown contractors or change in subcontractors shall be submitted to the Building Inspection field office.

## City of Sacramento Planning Division PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

DDRESS: 6200 GREENHAVEN DR APN: 030-0361-008				
ZONING: D 2				
DRPB AREA / PUD / SPD: N/A ZONING. K-3				
EXISTING LAND USE: Apartments.	<u>.</u>			
PROPOSED USE: Replace existing balcony with new design	S BEI	OW.		
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEM	<u>s pr</u> i	<u> </u>		
Planning review is NOT required.				
Use is NOT allowed; applicant CANNOT submit for plan	heck			
Requires APPLICATION(s): PC ZA II		ER	DR	PB
Required Planning application must be submitted before projection	ct can	be submitte	d for plan cl	heck.
Application(s) IN PROGRESS:				
Applicant may submit for concurrent building permit plan che Building Division must check with Planning staff and/or SITE	ck, at befo	applicant's re issuing bu	risk. iilding perm	it.
Application(s)	20.00			
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.				
XX Plans may be submitted for plan check. Plan checker(s) shortinance requirements and all applicable development stand	all co ards <i>p</i>	nfirm compl orior to issud	iance with Z ince of build	Coning ling permit.
Meets setback & lot coverage requirements as shown on site plan provided.			·	
Plans to be submitted have been stamped/signed by Planning	count	er staff.		
Route to SITE for plan check and inspection.				
Preliminary review ONLY; the information on this form must at the time of building permit submittal.			<u> </u>	<u></u>
COMMENTS: Building permit must conform to approved plans an <b>Z04-351</b> .	d con	ply with all	conditions (	of approval for
DATE: April 5, 2005 BY: Elise Gumm				

CITY OF SACRAMENTO PERMIT ASSISTANCE

APR 0 5 2005

RECEIVED



Date: March 28, 2005 Brackwish blass and specifications must be leave by the property and the same than the property of the specification of the specificati 2420 K Street, Suite #220 Sacramento, CA. 95816 (916) 658-8600 Esplanade Apts. (916) 658-8601 (fax) 6058 Riverside (916) 690-1458 (cell) **APPROVED** Sacramento, CA. City of Sacramento Pion esengineering0704@sbcglobal. Structural Dear Mr. Walters, Per the request of your General Contractor, Paul Thomas, CS Engineering is submitting the in response to the proposed framing modifications at the subject project. In particular, I shall address the framing requirements necessary to replace the second floor cantilevered decks. Based upon today's site observations, it is my opinion that the decks must be refaced. We suggest changing the existing balcony (a cantilevered condition) to a new simple support condition. While this requires a new beam with two posts and footings, it allows you to pand the decks up to 10'-0" for (some of the units) and creates a much more stable support system. It is also my professional opinion, based upon today's jobsite visit, under acceptable visual conditions, and a review of the attached drawings and calculations that the proposed framing modifications below are structurally preferable to the existing cantilevered deck systems. However, the new framing requirements are as follows: Install a new 2 x 8 ledger (after removing old balcony) to face of wall. Contractor to ensure enough material to screw into - add blocking as needed. Then add (N) 2 x 6 decking (redwood or fiberon) over (N) 2 x 8 D.F. #1 joists @ 24"o.c. Use a double 2 x 10 D.F. #1 rim. Attach (N) wrought iron guardrail to dbl. 2 x 10 w/ 2-3/8" diameter bolts. The two corner support posts shall be 4 x 4 D.F. #1 in Simpson CB44 bases set in 16" sq. x 12" deep concrete pad footings. See attached detail. Please call if you have any questions/concerns about the items delineated above. For your convenience, two additional stamped and signed copies have been delivered to the General Contractor for review and approval by the Building Inspector. kept on the power of the solutions to make the work of the solution of the sol This set of plan Sincerety CITY OF SACRAMENTO PERMIT ASSISTANCE **kc**ora toe. Aspection Division. 5 proval Minisation and spike cation Buildi APR 0 5 2005 Th of be beld 1/3 cont or improve the SHAL violation of any City Ordinance of State Law. 0506405 6200 PLEENH

# CS Engineering

2420 K Steet, Suite 220; Sacramento, CA. 95816 Phone (916) 658-8600 Fax (916) 658-8601

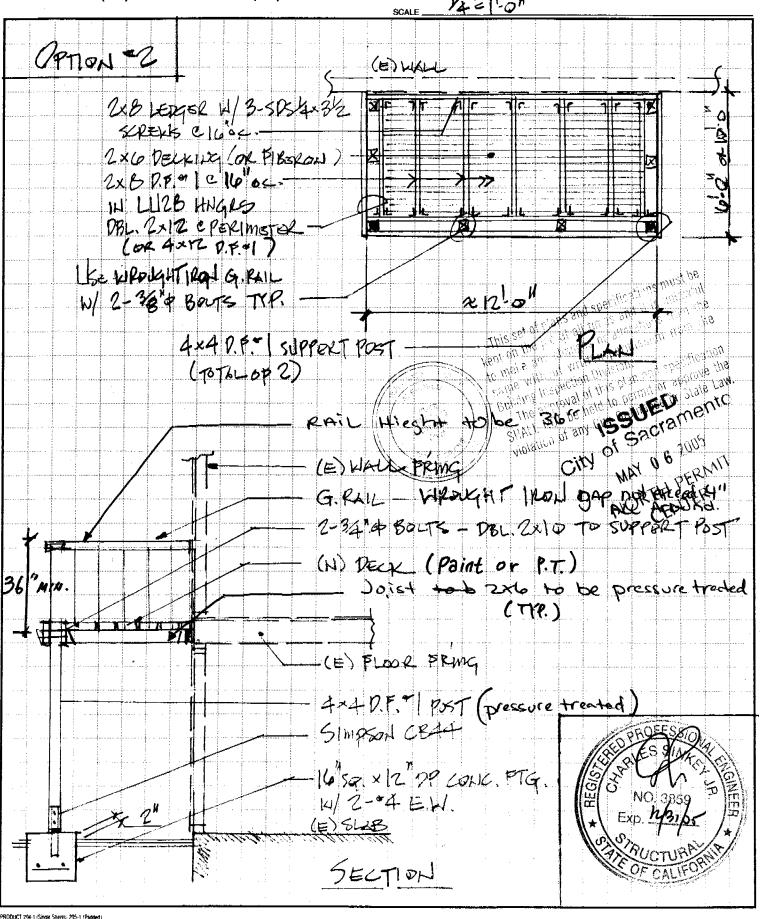
JOB ESPLA	HOE APTE	5
SHEET NO.	<u> </u>	OF
CALCULATED BY		DATE
CHECKED BY		DATE

Phone (916) 658-8600	Fax (910) 030-0001	SCALE		
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	2×8 Level 1	4/ 3-7/2-74	-x 7/2 SCKSWS	(720° cap.)

### CS Engineering

2420 K Steet, Suite 220; Sacramento, CA. 95816 Phone (916) 658-8600 Fax (916) 658-8601

JOB ESPLANADE APT	5
SHEET NO.	OF
CALCULATED BY	DATE 3/05
CHECKED BY	DATE
SCALE 12-0h	





### CITY OF SACRAMENTO CALIFORNIA

PLANNING AND BUILDING DEPT.

ZONING DIVISION

Reviewed by: \_

1231 I STREET, ROOM 200 SACRAMENTO, CA 95814-2998

#### MEMORANDUM OF UNDERSTANDING RELATED TO MITIGATION MEASURES, PLANNING CONDITIONS, ZONING ORDINANCE PROVISIONS, AND/OR SIGN ORDINANCE PROVISIONS

In order to proceed with construction/occupancy of the project located at 6200 Greenhaven Drive
I agree that the following Mitigation Measures, Planning Conditions, Zoning Ordinance Provisions, and/or Sign
Ordinance Provisions associated with project <u>Z04-351</u> will be fully implemented to the (File Number)
satisfaction of the City of Sacramento by <u>FINAL INSPECTION</u> .  (Date)
LIST OF MEASURES/CONDITIONS/PROVISIONS:
<ol> <li>The project shall be constructed in conformance with submitted plans.</li> <li>The applicant shall obtain a building permit prior to commencing construction.</li> <li>This permit allows the removal of the upper balconies on the building located at the northwest corner of Riverside Boulevard and Greenhaven Drive (units 117-124) to be replaced with metal railings that span the length of the existing slider (see exhibit A).</li> <li>This permit allows the removal of the upper balconies on the remaining buildings to be replaced with wood or wood composite balconies and railings as submitted (see exhibit B). The balconies shall be a minimum width of 4 feet and span the length of the slider.</li> <li>Balconies shall be painted to coordinate with the paint scheme.</li> <li>Any other changes or modifications shall require Planning review and approval.</li> </ol> The above language shall not be deemed a waiver by the City of Sacramento of any Mitigation Measure, Planning Condition, Zoning Ordinance Provision, and/or Sign Ordinance Provision applicable to the project whether or not the measure, condition, or provision is listed above.
Signature
Name & Title:
Address:
Phone Number:
**************************************

