1231 I Street	t, Sacramento, CA	95814			Insp Area:	1
Site Address: Parcel No:	001-0090-003 N	1234	<b>McCartift G</b> 1240;1238;123	<b>√</b> <b>5</b> ;1234 MC CA	Sub-Type: ARTHY CT	REM Housing (Y/N):
<u>CONTRACTOR</u>		<u>own</u>	<u>'ER</u>		<u>ARCHITECT</u> MGRT ARCHITI 1725 J ST SACRAMENTO	
Nature of Wor PLUMBING, H	k: REHAB:LBP& ASE VAC,ROOF; REMODE	BESTOS A EL PORCI	ABATEMENT, F HES, NEW WIN	REPLACE ELEC DOWS	CTRICAL PANEL,	
	ON LENDING AGENCY ch this permit is issued (Sec.			of perjury that there	is a construction lending a	gency for the performance
Lender's Name			Lend	er'sAddress		
LICENSED CO	NTRACTORS DECLAR section 7000) of Division 3 o	RATION: f the Busines	I hereby affirm und ss and Professions C	er penalty of perjudode and my license	y that I am licensed under s in full force and effect.	er provisions of Chapter 9
License Class	License Number		Date	Contracto	r Signature	
exempt therefrom a penalty of not more  I, as a owner for sale (Sec. 7044 thereon, and who desale. If, however, to the build or improvement of the contract of the Code: The Contract of the c	License Law (Chapter 9 (cornd the basis for the alleged ethan five hundred dollars (\$5 r of the property, or my employ. Business and Professional oes such work himself or her the building or improvement e for the purpose of sale.)  of the property, am exclusive tors License Law does not a sed pursuant to the Contractors.	xemption. 2 500.00); oyees with w Code: The rself or throu is sold with rely contract pply to an o	Any violation of Sec vages as their sole co Contractors License agh his/her own emp in one year of comp ing with licensed co wner of property wh	mpensation, will do E Law does not app ployees, provided th letion, the owner-bu	the work, and the structure ly to an owner of propert at such improvements are hilder will have the burden	e is not intended or offered y who builds or improves not intended or offered for of proving that he/she did
Lam exempt	under Sec	B & PC	for this reason:			
Date ///6	100		(/ )	W MA	MICABORHOUDS ENELOPMEN	T SERVICES
IN ISSUING THAS all measurements are or private agreemer any improvement of Lecrify that I have	S BUILDING PERMIT, the nd locations shown on the application to permissible or per the violation of any private the read this application and st construction and herby authors.	applicant replication or rohibited loc agreement reate that all increase representations.	epresents, and the cir accompanying draw rations for such impre- lating to location of information is correc- ntative(s) of this city	ings and that the im overnents. This bui improvements.	provement to be constructed thing permit does not author your with all gity and county	ed does not violate any law orize any illegal location of ordinances and state laws
Date // /6 /	<i>(06</i>	Applica	nt/Agent Signature_	1 XX W		
I have and w performance of wor	DMPENSATION DECLA will maintain a certificate of cook for which the permit is issuantly maintain workers' compe	onsent to sel led.	f-insure for workers'	compensation as pr	ovided for by Section 3700	of the Labor Code, forthe
which this permit is	s issued. My workers' compe	nsation insur	rance carrier and poli	cy number are:	ne zabor code, for the pe	
Carrier			Policy Nur	mber	Exp Date	
shall not employ ar	n need not be completed if the ny person in any manner so the compensation provisions	as to becom	e subject to the wor	kers' compensation	ormance of the work for w laws of california and agr comply with those provision	ee that if I should become
Date // /	00	Applica	nt Signature	me		
WARNING: FAIL	URE TO SECURE WORK	ER'S COMP	ENSATION COVE		FUL AND SHALL SUBJE	

**CITY OF SACRAMENTO** 

Permit No: 0010152

Insp Area:

COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

## **OWNER-BUILDER VERIFICATION**

## ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

Improvement (ye			construction of the proposed
2. (have/have not)			signed an application for
A building permi	t for the proposed work.		
3. I have contracted	with the following person	on (firm) to provide	the proposed construction:
VAROTA Name	ers Construction	Address 901	Sonrise AUE, Sut
<del></del>	lle, Cia	Telephone	() 782-9059
Contractors Lic	cense No. <u>7/2978</u>	7	
	portions of the work, bu rovide the major work.	at I have hired the fo	ollowing person to coordinate,
Name		_Address	
City	VA	Telephone	
Contractors Lic	ense No		
		e contracted (hired)	the following to provide the
Name	Address	Phone	Type of work
	<del></del>		
NA	<u>L</u>		
NA			
NA Signed MA	alla		-
Signed July Job Address 122	L VIII E31 RICHARD	s & Lowes	: S/

## APPLICATION FOR COMMERCIAL BUILDING PERMIT

PERMIT SERVICES SECTION 1231 I Street, Rm. 200 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046	Insp. Area  Applicant MUST complete ALL Unshaded areas  AKA			
ADDRESS <u>1240; 1238; 1236; 1234</u> Mc PARCEL# 001·0090-003	CARTHY CT Suite 32/ GUZA ST			
CONTACT  Name MIKE Miller  Street Address 320 Commerce Circle  City/State/Zip Sacro, Ca 958/5  Phone 566/245 FAX 566/275  E-mail:	LICENSED CONTRACTOR Lic No. #			
ARCHITECT/ENGINEER  Name  Address 320 Commerce Circle  City/State/Zip Sucro, CA 958/5  Phone 566-1245 FAX 576 1/2 75  E-mail:	OWNER SHEAT  Name SACTO NOUNING & REDERHAPMENT AGENCY  Address 330 Commerce Cyrele  City/State/Zip Shep CA  Phone SAME FAX SAME  E-mail:			
Will permittee have any employees on the jobsite? I No I Ye  WORKER'S COMPENSATION POLICY #  NATURE OF WORK IN DETAIL:   Replace existing electrical, plumbing, roof  (modernize)  OCCUPANTATENANT: D. (1) 11 11 15 15 15 15	LBP Abotement Mabesios Abotement, water service, porches, paint & windows			
OCCUPANT/TENANT: Phi Housing DOS RIOS DEV. VALUATION: \$ 153.889  FLOOD STATUS: UR S.C.A.T. X16				
JOB DESCRIPTION BLDG SHELL APT	TI( ) REM( 🗸 ) SW FIRE ADD OTH			
INSPECTION DISCIPLINES BLDS MEC	ELIMA CELED SITE JACK			
# Stories Ist firArea. Total Area Use Zone Occp Grow  Occp Grow  P  M  P  M  P	Const type Fire Req. Y N Fed Code Vio. File  SPR ALARM [H] [Quad]			
	No.			
COMMENTS: Single family of molliple family directionss MARK Dully Does MOTIKIANT TO HOWE THIS ROSTED TO HOM B-30.00				
REGIONAL SANITATION FEES? Yes And HEALTH DEPARTMENT? Yes No  WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed				
dssu/forms/commercialana [ray 02/28/00]				

Date of Request:			
Ву:	-		
		**************************************	

## CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION PLANNING AND ZONING INFORMATION REQUEST

_	(0.201
Pi A	roject ddress: 321 Eliza S+
A	ssessor's Parcel Number: 001-0090-003
	evious Use: public bound
De	escription of Request/Proposed Use: window replacement,
_	dding front porch, need rooting, trepainting
Is 7	This a Change of Use?
Pric Con	Zoning Designation: RMX DR 48-119, DR 98-122, DR 98-180, DR 97-126, P85-059 noments: Persures Design Review approval - approved nu DR 98-119 and DP 98-122 and DR 98-180.
	Are There Any Planning Issues?: (circle one) YES NO
* *	Staff Site Plan Check Required? (Circle one) Field Inspection Required? (Circle one)  Design Review/Preservation Required?: (Circle one)  YES NO  YES NO
	Planning Review by/Date: Oreven (excht 7/21/00)
A li	st of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL