

FINAL INSPECTIONS

BUILDING BY DATE

ELECTRICAL BY DATE

PLUMBING BY DATE

MECHANICAL BY DATE

CERTIFICATE OF OCCUPANCY ISSUED BY DATE

MICROFILM RECORD

PLANS AND APPLICATION

REEL NO. FRAME NO. TO

REEL NO. FRAME NO. TO

REEL NO. FRAME NO. TO

REEL NO. FRAME NO. TO

REEL NO. FRAME NO. TO

REEL NO. FRAME NO. TO

REEL NO. FRAME NO. TO

CITY OF SACRAMENTO BUILDING INSPECTIONS DIVISION

JOB ADDRESS

5151 - F Street

LEGAL DESCRIPTION

Curth Co

ASSESSOR PARCEL NUMBER

NAME OF FIRM

CONTRACTOR

DATE

OWNER

DATE

ARCH. ENGR.

DATE

CONST. LOAN LENDER

NO. OF STORIES	ROOF COVERING	AREA 1ST FLOOR	TOTAL AREA	GARAGE AREA	PATIO AREA	USE ZONE
<input type="checkbox"/> BUILDING	<input type="checkbox"/> MECHANICAL	<input type="checkbox"/> PLUMBING	<input type="checkbox"/> ELECTRICAL			

NATURE OF WORK IN DETAIL

REMARKS AND/OR VARIANCES

VALUATION \$

ISSUED BY:

DATE ISSUED

BUILDING PERMIT FEE \$

PLAN CHECK FEE \$

RDF FEE \$

S.M.I. FEE \$

REG. SEWER FEE \$

BRIDGE FEE \$

CONST. TAX \$

TOTAL FEES \$

RECORD CARD - BUILDING INSPECTIONS DIVISION - CITY OF SACRAMENTO, CALIFORNIA

CARD #3

PROPERTY PARCEL NO.		JOB ADDRESS					INSPECTION AREA		FINAL INSPECTIONS		
		5151 - F Street					1				
LEGAL DESCRIPTION					OCCUP. GR.	CONST TYPE	VAR. NO.	FIRE ZONE	BUILDING BY	DATE	
					D-2	I		3			
TITLE AND NAME			T/C	ADDRESS			ZIP	CITY LIC. NO.	TEL. NO.	ELECTRICAL BY	DATE
GEN. CONTR.											
ELEC. CONTR.											
PLBG. CONTR.										PLUMBING BY	DATE
MECH. CONTR.										MECHANICAL BY	DATE
ARCH. ENGR.											
OWNER											
CONST. LOAN LENDER										CERTIFICATE OF OCCUPANCY	
										ISSUED BY	DATE
BLDG. WIDTH	BLDG. LENGTH	TOTAL HEIGHT	NO. OF STORIES	ROOF CONSTR.	AREA 1st FLOOR	TOTAL AREA	C.S.D.	C.I. CASE			
SIDE YARDS	REAR YARDS	SET BACK REQ.	USE ZONE	PARK'G REQ.	SPACES	TREES RMVD.	CENSUS TRCT. NO.				

NATURE OF WORK:-

PERMIT NO. S.P. -	MICROFILM RECORD				
ISSUED BY					
ISSUANCE DATE	PLANS AND APPLICATION	REEL NO.	FRAME NO:-	TO	
VALUATION \$	INSPECTION RECORD	REEL NO.	FRAME NO:-	TO	
R.D.F. FEE \$	JOB FILE	REEL NO.	FRAME NO:-	TO	
S.M.I. FEE \$					
PLAN CK. FEE \$					
SEWER INCL. FEE \$					
PERMIT FEE \$					
\$					
\$					
TOTAL FEES \$					
REMARKS AND/OR VARIANCES					
Hospital					