

CITY OF SACRAMENTO

Permit No: 0112340

1231 I Street, Sacramento, CA 95814

Insp Area: I
Thos Bros: 297J7

Site Address: 1606 CHRISTOPHER WY SAC
Parcel No: 008-0492-002

Sub-Type: RES
Housing (Y/N): N

CONTRACTOR
SUNRISE PEST CONTROL
4032 LEOS LN
CARMICHAEL 995608

OWNER
MANUELE
1606 CHRISTOPHER WAY
SACRAMENTO, CA 95819

ARCHITECT

Nature of Work: REPLACE HOT MOP SHOWER PAN.

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 OPR 8417 Date 9-25-01 Contractor Signature Robert Richard

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 hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 9-25-01 Applicant/Agent Signature Robert Richard

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.

72 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 STATE FUND Policy Number 046-01 MIT 0005017 Exp Date 01/01/2002

(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 9-25-01 Applicant Signature Robert Richard

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.

WOOD DESTROYING PESTS AND ORGANISMS INSPECTION REPORT

This is an inspection report only -- not a Notice of Completion
ADDRESS OF PROPERTY INSPECTED

BUILDING NO. 1606	STREET, CITY, STATE, ZIP Christopher Way, Sacramento, CA, 95819	COUNTY CODE 34	DATE OF INSPECTION 08/28/01	NUMBER OF PAGES 4
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SUNRISE PEST CONTROL, INC.
4032 Leos Lane
Carmichael, CA 95608
Ph: (916) 944-PEST (7378) or (916) 331-2000
Fax: (916) 944-7385



Affix stamp here on Board copy only
A LICENSED PEST CONTROL OPERATOR IS AN EXPERT IN HIS/HER FIELD. ANY QUESTIONS RELATIVE TO THIS REPORT SHOULD BE REFERRED TO HIM/HER.

REGISTRATION # PR 3917	REPORT # 24246B	STAMP #	ESCROW #
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ORDERED BY: _____

REPORT SENT TO: Joe/Annie Manuele 1606 Christopher Way Sacramento CA 95819
955-0202 455-2112

PROPERTY OWNER: Joe/Annie Manuele 1606 Christopher Way Sacramento CA 95819
955-0202 455-2112

PARTY IN INTEREST: _____

ORIGINAL REPORT LIMITED REPORT SUPPLEMENTAL REPORT * REINSPECTION REPORT * *Original Stamp # _____ Date _____

GENERAL DESCRIPTION: LIMITED REPORT

INSPECTION TAG POSTED: Garage

OTHER INSPECTION TAGS: Sunrise Pest Control, INC - 10/6/00

	I N S P E C T E D A R E A S	N O T I N S P E C T E D	F U T H E R I N S P E C T E D	S U B S T R U C T U R E A R E A S	D R Y W O O D T R E E S	P U L V E R T I C E S	O T H E R W O O D	D A M A G E D W O O D	E A R T H I N W O O D	F A C I L I T Y	C E L L I N G	E X T E R I O R	S H O W N O N D I A G R A M
1. SUBSTRUCTURE AREA	LIMITED REPORT		X										
2. STALL SHOWER	See Below						X						
3. FOUNDATIONS	LIMITED REPORT		X										
4. PORCHES -- STEPS	LIMITED REPORT		X										
5. VENTILATION	LIMITED REPORT		X										
6. ABUTMENTS	LIMITED REPORT		X										
7. ATTIC SPACES	LIMITED REPORT		X										
8. GARAGES	LIMITED REPORT		X										
9. DECKS -- PATIOS	LIMITED REPORT		X										
10. OTHER -- INTERIOR	LIMITED REPORT		X										
11. OTHER -- EXTERIOR	LIMITED REPORT		X										

DIAGRAM AND EXPLANATION OF FINDINGS (This report is limited to structure or structures shown on diagram)

2A

Inspected by Bob Richardson License No. OPR-8417 Signature *Bob Richardson*

NOTE: Questions or problems concerning the above report should be directed to the manager of the company. Unresolved questions or problems with services performed may be directed to the Structural Pest Control Board at (916) 263-2533, or (800) 737-8188. You are entitled to obtain copies of all reports and completion notices on this property filed with the Board during the preceding two years upon payment of a \$2.00 search fee to: The Structural Pest Control Board, 1418 Howe Ave., Ste. 18, Sacramento, California 95825-3204.

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Except as noted below the following areas are considered inaccessible for inspection without impractical dismantling or defacing of the property or basically removing the building contents including furniture, appliances and floor coverings. Inaccessible attics or portions thereof; the interior of hollow walls; spaces between a floor or porch deck and the ceiling or soffit below and stall showers over finished ceiling. Such structural segments as porte cocheres, enclosed bay windows, butresses, and similar areas to which there is no access. Built-in cabinet work, floors beneath coverings and areas above, behind or below furnishings. It must be understood that infestations or infections by pests or organisms may exist in the above referred to inaccessible areas without any outward manifestation or said infestation or infection.

The following inspection and report pertaining solely to the laws and regulations contained in the Structural Pest Control Act. It is not an inspection concerning GENERAL BUILDING CONDITIONS. These inspection are available from other agencies.

This report includes findings relating to the presence or absence of wood destroying organisms or visible signs of leaks in the accessible portions of the roof. The inspector did not go out on the roof surface due to possible physical damage to the roof or personal injury. No opinion is rendered nor guarantee implied concerning the water tight integrity of the roof. We recommend the owner/agent engage the services of a licensed roofing contractor to determine the current condition of the roof.

The owner or owner's agent has been provided with a standard work contract. If the owner wishes SUNRISE PEST CONTROL, INC. to complete the recommendations as required, please sign, date and return the original copy. However, if such recommendations are completed by others, we cannot be held responsible for the quality of such work. Nor does SUNRISE PEST CONTROL, INC. make any representation to conditions that may or may not be concealed by others.

If the work is performed by others, SUNRISE PEST CONTROL, INC. will perform a reinspection to determine if such work has been completed, however there will be an additional charge for this or any subsequent reinspection that may be necessary. Reinspections can only be performed within four month from the date of the original inspection. After four months, a new original report is required.

No painting, texture coating, or wallpapering is included. Estimates given for floor repairs and/or replacement is for flat lay linoleum and rubber cove base.

If the work is performed by others, interim inspections will be required. THERE WILL BE A CHARGE FOR EACH INSPECTION.

Structural repairs and chemical treatments performed by SUNRISE PEST CONTROL, INC. are guaranteed for one (1) year from date of completion. FLOOR COVERINGS, PLUMBING REPAIRS, TILE GROUTING, AND/OR CORRECTIVE MEASURES FOR THE CONTROL OF MOISTURE ARE GUARANTEED FOR THIRTY (30) DAYS FROM THE DATE OF COMPLETION WHEN SUBJECT TO NORMAL USE AND CARE. WE DO NOT GUARANTEE ANY WORK DONE BY THE OWNER, HIS AGENT OR OTHER CONTRACTORS NOT IN OUR EMPLOY.

Unless otherwise requested SUNRISE PEST CONTROL, INC. will use neutral colored and patterned F.H.A. vinyl floor covering.

STATE LAW requires that you be given the following information: CAUTION: PESTICIDES ARE TOXIC CHEMICALS. Structural pest control operators are licensed and regulated by the STRUCTURAL PEST CONTROL BOARD, and apply pesticides which are registered and approved by the CALIFORNIA DEPARTMENT OF FOOD AND AGRICULTURE AND THE U.S. ENVIRONMENTAL PROTECTION AGENCY. Registration is granted when the state finds that based on existing scientific evidence there is no appreciable risk if proper use conditions are followed or that the risks are outweighed by the benefits. The degree of risk depends upon the degree of exposure, so the exposure should be minimized.

If within 24 hours following application you experience symptoms similar to common seasonal illness comparable to the flu, contact your physician or poison control center and your pest control officer immediately.

For further information contact the following:

Sunrise Pest Control, Inc.	944-7378		
Poison Control Center	453-3692		
County Health Dept.	366-2174	Yolo County	666-8649
Placer County	823-4464	El Dorado County	626-2305
Nevada County	265-1450		
County Agricultural Comm.	366-2003	Yolo County	666-8140
Placer County	823-4371	El Dorado County	626-8140
Nevada County	273-2648		263-2544
Structural Pest Control Board (regulatory information)			

PESTICIDES/ACTIVE INGREDIENTS

THERMIN-8	Copper Namthanate
TORPEDO	Permethrin
METHYL BROMIDE	
VIKANE	Sulfuryl Fluoride
TRIBUTE	Cyano Methyl 4 Chloro Alpha Benzeacetate

TARGET PESTS

Wood destroying fungus
Subterranean Termites
Wood Boring Beetles
Drywood Termites
Subterranean termites and local treatment of
Drywood Termites

NOTICE: The Structural Pest Control Board encourages competitive business practices among registered companies. Reports on this structure prepared by various companies should list the same findings, fungus damage, etc. However, recommendations to correct these findings may vary from company to company. Therefore, you may wish to seek a second opinion since there may be alternative methods of correcting the findings listed on this report that may be less costly.

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THE EXTERIOR SURFACE OF THE ROOF WILL NOT BE INSPECTED. IF YOU WANT THE WATER TIGHTNESS OF THE ROOF DETERMINED, YOU SHOULD CONTACT A ROOFING CONTRACTOR WHO IS LICENSED BY THE CONTRACTOR'S STATE LICENSE BOARD.

THIS IS A SEPARATED REPORT WHICH IS DEFINED AS SECTION 1 & SECTION 2 CONDITIONS EVIDENT ON THE DATE OF INSPECTION.

SECTION 1: CONTAINS ITEMS WHERE THERE IS EVIDENCE OF ACTIVE INFESTATION, INFECTION OR CONDITIONS THAT HAVE RESULTED IN OR FROM INFESTATION OR INFECTION.

SECTION 2: SECTION 2 ITEMS AREA CONDITIONS DEEMED LIKELY TO LEAD TO INFESTATION OR INFECTION, BUT WHERE NO VISIBLE EVIDENCE OF SUCH WAS FOUND.

FURTHER INSPECTION: FURTHER INSPECTION ITEMS ARE DEFINED AS RECOMMENDATIONS TO INSPECT AREA(S) WHICH DURING THE ORIGINAL INSPECTION, DID NOT ALLOW THE INSPECTOR ACCESS TO COMPLETE THE INSPECTION AND CANNOT BE DEFINED AS SECTION 1 OR SECTION 2.

THIS IS A "STRUCTURAL PEST CONTROL" INSPECTION REPORT: NOT A BUILDING INSPECTION REPORT, THEREFORE NO OPINION IS BEING RENDERED REGARDING THE STRUCTURAL INTEGRITY OF THE BUILDING.

THE FOLLOWING AREAS WERE NOT INSPECTED, AS INDICATED IN SECTION #1990, PARAGRAPH (j) OF THE STRUCTURAL PEST CONTROL ACT AND RULES AND REGULATIONS: FURNISHED INTERIORS, INACCESSIBLE ATTICS, INSULATED ATTICS, AND PORTIONS THEREOF; THE INTERIOR OF HOLLOW WALLS: SPACES BETWEEN A FLOOR OR PORCH DECK AND THE CEILING OR SOFFIT BELOW: STALL SHOWERS OVER FINISHED BUTTRESSES AND SIMILAR AREAS TO WHICH THERE IS NO ACCESS WITHOUT DEFACING OR TEARING OUT LUMBER, MASONRY AND FINISHED WORK, BUILT-IN CABINET WORK: FLOOR BENEATH COVERINGS, AREAS WHERE STORAGE CONDITIONS OR LOCKS MAKES INSPECTION IMPRACTICAL.

INSPECTION FEES ARE TO BE PAID AT THE TIME OF INSPECTION UNLESS ESCROW INFORMATION IS PROVIDED AT THE TIME OF REQUEST. THE PERSON ORDERING THIS REPORT IS HELD RESPONSIBLE FOR THE INSPECTION FEE IF ESCROW IS CANCELLED. BILLS ARE DUE AND PAYABLE WITHIN 30 DAYS, 1.5% WILL BE CHARGED ON ALL PAST DUE ACCOUNTS UNLESS OTHER ARRANGEMENTS ARE MADE.

NOTE: AT THE REQUEST OF THE OWNER, ANNIE MANUELE THIS REPORT IS LIMITED TO THE STALL SHOWER ONLY, AS DIAGRAMED. SUNRISE PEST CONTROL INC. RECOMMENDS THAT THE ENTIRE STRUCTURE BE INSPECTED.

STALL SHOWER:

Item 2A:

The stall shower pan is leaking. Water stains and/or surface fungus on the wood members below.

RECOMMENDATION: Remove the shower floor and (3) rows of tile along the wall for further inspection. If no further damage is exposed, scrape away all visible surface fungus and treat the infected area with COPPERNAPHTHENATE, an approved fungicide. Install a new hot mopped pan and retile to match as close as current patterns and colors permit. Although care will be taken, hairline cracks may develop that are beyond our control.

***** Unknown Further Inspection Recommended *****

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NOTICE:.. Reports on this structure prepared by various registered companies should list the same findings (i.e. termite infestations, termite damage, fungus damage, etc.). However, recommendations to correct these findings may vary from company to company... You...have a right to seek a second opinion. ...from another company.

ALL REPAIRS COMPLETED BY OTHERS MUST BE REINSPECTED BY SUNRISE PEST CONTROL INC. BEFORE A CERTIFICATION WILL BE ISSUED. THE REINSPECTION WILL ONLY CERTIFY THE ABSENCE OF INFESTATION OR INFECTION IN THE ACCESSIBLE AND VISIBLE AREAS. WE DO NOT GUARANTEE WORK COMPLETED BY OTHERS, NOR DOES THIS FIRM MAKE ANY STATEMENTS CONCERNING WORKMANSHIP OF THOSE REPAIRS. WORKMANSHIP IS ONLY DETERMINABLE BY THOSE PAYING FOR OR RECEIVING THOSE SERVICES. A REINSPECTION OF SPECIFIC ITEMS ON THE REPORT OR OF ANY OTHER CONDITION PERTAINING TO THIS STRUCTURE CAN BE DONE AT AN ADDITIONAL COST PER REQUEST. THIS REINSPECTION MUST BE DONE WITHIN 4 MONTHS OF THE ORIGINAL TRIP.

SECTION 1

SECTION 2

FURTHER INSPECT.

2A: N/C