

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0510180

Insp Area: 1
Thos Bros: 297F4

Site Address: 617 27TH ST SAC
Parcel No: 003-0201-024

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

CONTRACTOR

OWNER
EVANS LESLIE
617 27TH ST
SACRAMENTO, CA 95816

ARCHITECT

Nature of Work: REPAIR FRONT STAIR CASE AT FRONT PORCH TO MATCH EXIST, .

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 _____ Date _____ 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 7/12/05 Owner Signature *Leslie Evans*

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 the City of Sacramento to enter my property for inspection purposes.

Date 7/12/05 Applicant/Agent Signature *Leslie Evans*

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 _____ 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 7/12/05 Applicant Signature *Leslie Evans*

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
Development Services Department
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

| | |
|---|---|
| ADDRESS: 617 27 th Street | APN: 003-0201-024 |
| DRPB AREA / PUD / SPD: Alhambra Corridor Design Review | ZONING: R-1B-SPD |
| EXISTING LAND USE: SFR | |
| PROPOSED USE: SFR | |
| PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW: | |
| <input type="checkbox"/> | Planning review is NOT required. |
| <input type="checkbox"/> | Use is NOT allowed; applicant CANNOT submit for plan check. |
| <input type="checkbox"/> | Requires APPLICATION(s): PC ZA IR ER DR PB Required Planning application must be approved <i>before</i> project can be submitted for plan check |
| <input type="checkbox"/> | Application(s) IN PROGRESS: File Number: Application must be approved before project can be submitted for plan check. |
| <input type="checkbox"/> | Application(s) COMPLETED: File Number & approval date: Over-the-counter July 12, 2005 Building permit must conform to approved plans and comply with all conditions of approval. Do NOT accept applications for a building permit prior to the end of the 10-day appeal period. |
| <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. |
| <input type="checkbox"/> | Meets setback & lot coverage requirements as shown on site plan provided. |
| <input type="checkbox"/> | Plans to be submitted have been stamped/signed by Planning counter staff. |
| <input type="checkbox"/> | Route to SITE for plan check and inspection. |
| <input type="checkbox"/> | Route to SITE for inspection only, plan check not required. |
| <input type="checkbox"/> | Preliminary review ONLY ; the information on this form must be reviewed again and confirmed at the time of building permit submittal. |
| CONDITIONS AND COMMENTS: Applicant proposes to repair existing front stairs to match existing. No change to foot print or set backs. 10 day appeal period shall be waived. | |
| DATE: 7-12-05 | BY: Andrea Di Matteo |



**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: 617 27th Street
Description: Repair existing stair case

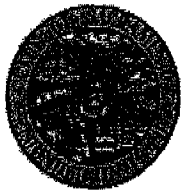
Applicant: Leslie Evans
Date Approved: July 12, 2005
Staff Contact: Andrea Di Matteo, Planning Technician, 808-1928

STAFF ACTION AND CONDITIONS OF APPROVAL:

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

1. Repair and replace wood siding and trim at stair case to match existing in size shape texture and dimension.
2. Repair and replace damaged tread at stair case to match existing bull nose wood tread.
3. Paint all exposed wood and trim to match existing.
4. The scope of exterior work is limited to the above listed items. Any changes are subject to Design Review staff approval.

Andrea Di Matteo
Planning Technician
Design Review



Downtown Permit Center
 1231 I Street, Suite 200, Sacramento, CA 95814

North Permit Center
 2101 Arena Blvd., Suite 200, Sacramento, CA 95834

PRELIMINARY RESIDENTIAL APPLICATION
 1-916-808-5656 OR 1-866-EZ-PERMIT

| | | |
|----------------------------------|--------------------|----------------|
| BUILDING SITE ADDRESS | SUITE | INSP. AREA |
| 617 27th St, Sacramento CA 95816 | | |
| ASSESSOR'S PARCEL NO. | COMMUNITY PLAN NO. | PLAN CHECK NO. |
| 003-0201-024 | | 051 |

| NAME OF APPLICANT | ADDRESS | ZIP CODE | PHONE # | FAX # |
|---------------------|-------------------------------------|------------|--------------|-------|
| Leslie Evans | 617 27th St Sacramento, CA 95816 | 95816 | 916.444.9521 | |
| PROPERTY OWNER | | | | |
| Same as applicant | | | | |
| LICENSED CONTRACTOR | | LICENSE #: | | |
| | | | | |
| ARCHITECT/ENGINEER | | | | |
| | | | | |

| No. of Stories | No. of Rooms | Roof Covering | Area 1 st Floor | Total Area | Garage Area | Patio Area |
|----------------|--------------|---------------|----------------------------|------------|-------------|------------|
| | | | | | | |

THIS PERMIT IS FOR:

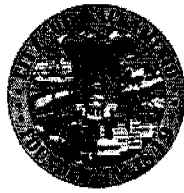
- BUILDING MECHANICAL PLUMBING ELECTRICAL SITE FIRE

NATURE OF WORK IN DETAIL

Repair exterior staircase leading to front porch, repair/replace damaged siding & trim w/ like.

\$ 1200.00
 VALUATION

12/28/2004



**CITY OF SACRAMENTO
DEVELOPMENT SERVICES DEPARTMENT
BUILDING DIVISION**

**North Permit Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834
Inspection: (916) 808-4677**

OWNER BUILDER VERIFICATION

1. Check one below – I or my immediate family (parent, spouse, or child) will perform:

- A - all the work authorized by this permit.
- B - a portion of the work.
- C - none of the work.

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

2. A State licensed contractor (*) will be hired to do:

- all of the authorized work.
- a portion of the authorized work.

Name Peter Christanthis Phone 947-9807
 Address 9171 Harvest View Way, Sacto 95827
 Type of Work repair & replace damaged
837350

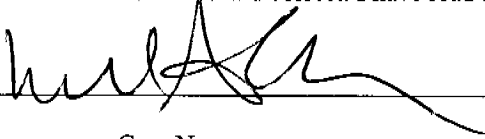
Name _____ Phone _____
 Address _____
 Type of Work _____

Name _____ Phone _____
 Address _____
 Type of Work _____

Name _____ Phone _____
 Address _____
 Type of Work _____

3. I will utilize unlicensed person(s) other than my immediate family to perform all or portions of the authorized work. A Certificate of Workers Compensation must be on file at this office.

I declare under penalty of perjury that the above is true and correct. I have read and understand the owner-builder information on the reverse side of this form.

Signed: Property Owner 

Date 7/12/05 Case No. _____ Permit No. _____

Job Address 1617 27th St Sacramento CA 95816

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