

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0005243**  
**Insp Area: 2**

**Site Address: 368 RIVER BEND CR SAC**  
Parcel No: 009-0030-023 #368-382

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

CONTRACTOR

OWNER  
HOUSING AUTHORITY OF CITY OF SACTO  
SACRAMENTO CA  
95812-1834

ARCHITECT

**Nature of Work: COMPLETE REHAB OF 8 APT UNITS: NEW HVAC, NEW ELECTRICAL, NEW PLUMBING AND LTG FIXTURES**

**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 9/12/02 Owner Signature [Signature] (SHZA)

**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 9/13/02 Applicant/Agent Signature [Signature]

**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 9/13/02 Applicant Signature [Signature]

**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

**CERTIFICATE OF OCCUPANCY**

For Information Contact (916) 264-5716

Building Address: 368 - 382 RIVER BEND CIRCLE Permit No. 0005243

Building Use: APARTMENTS Occupancy: R1

Building Owner: SACRAMENTO HOUSING Construction Type: VN

Owner Address: 320 COMMERCE CIRCLE Sprinkled? [ ] Yes [ X ] No

Portion of Building Occupied: 368 - 382 Area: 7488 Sq. Ft.

06/04/01

Date

By: Print

*Bryan Nakas*

Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[ Finaled By: GTD.MJS.JZB.MJG.SB ]

*This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.*

**POST IN A CONSPICUOUS PLACE**



**INSULATION CONTRACTORS  
ASSOCIATION  
OF AMERICA**

INSULATION  
CERTIFICATE  
**62245**

1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATIVE CODE, TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

*Capital Center* LOT # \_\_\_\_\_ TRACT # *2112*

STREET *365/382 River Bend Dr* CITY *Shirley*

**EXTERIOR WALLS:**

MANUFACTURER *Castleberg* THICKNESS/TYPE \_\_\_\_\_ R- VALUE *13*

**CEILING:**

BATT: MANUFACTURER *Watts Power* THICKNESS/TYPE \_\_\_\_\_ R- VALUE \_\_\_\_\_

BLOWN IN: MANUFACTURER *Watts Power* MINIMUM THICKNESS *1.5* R- VALUE *38*

SQUARE FOOTAGE COVERED *2500* NUMBER OF BAGS USED *150*

FLOORS: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- VALUE \_\_\_\_\_

SLAB ON GRADE: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- VALUE \_\_\_\_\_

WIDTH OF INSULATION \_\_\_\_\_ INCHES

FOUNDATION WALLS: MANUFACTURER \_\_\_\_\_ THICKNESS/TYPE \_\_\_\_\_ R- VALUE \_\_\_\_\_

GENERAL CONTRACTOR \_\_\_\_\_ DATE \_\_\_\_\_

CALIFORNIA CONTRACTORS LICENSE # \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

INSULATION CONTRACTOR **ARCADE INSULATION** \_\_\_\_\_ DATE \_\_\_\_\_

CALIFORNIA CONTRACTORS LICENSE #263784 \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

# APPLICATION FOR COMMERCIAL BUILDING PERMIT

**CITY OF SACRAMENTO**  
**DEVELOPMENT SERVICES DIVISION**  
**PERMIT SERVICES SECTION**

1231 I Street, Rm. 200  
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # <span style="font-size: 1.5em; font-weight: bold;">00052A3</span>	Insp. Area <span style="font-size: 1.5em; font-weight: bold;">ZC</span>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 368-382 River Bend Circle Suite \_\_\_\_\_  
 PARCEL # 012-0010-024

<p style="text-align: center;"><b>CONTACT</b></p> <p>Name <u>John Brooks</u>                  Street Address <u>320 Commerce Circle</u>                  City/State/Zip <u>Sac CA 95815</u>                  Phone <u>566-1243</u> FAX <u>566-1202</u>                  E-mail: _____</p>	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> <p>Name _____                  Address _____                  City/State/Zip _____                  Phone _____ FAX _____                  E-mail: _____</p>
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> <p>Name <u>Mike Taylor</u>                  Address <u>320 Commerce Circle</u>                  City/State/Zip <u>Sac CA 95815</u>                  Phone <u>566-1243</u> FAX <u>566-1202</u>                  E-mail: _____</p>	<p style="text-align: center;"><b>OWNER</b></p> <p>Name <u>SHRA Sacramento Housing Agency</u>                  Address <u>320 Commerce Circle</u>                  City/State/Zip <u>SAC CA 95815</u>                  Phone <u>566-1243</u> FAX <u>566-1202</u>                  E-mail: _____</p>

→ Will permittee have any employees on the jobsite?  No  Yes → INSURANCE CO: \_\_\_\_\_  
 → WORKER'S COMPENSATION POLICY # \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

NATURE OF WORK IN DETAIL: Full modernization of eight (8) residential apartment units, & porches  
350K

OCCUPANT/TENANT: River Oaks Village Apts. VALUATION: \$ 300,000.00

FLOOD STATUS:				S.C.A.T.								
JOB DESCRIPTION		BLDG	SHELL	APT	TI( )	REM <input checked="" type="checkbox"/>	SW	FIRE	ADD	OTH		
INSPECTION DISCIPLINES		<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	<input checked="" type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input checked="" type="checkbox"/> SITE	<input checked="" type="checkbox"/> FIRE					
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / <input checked="" type="checkbox"/> N		Fed Code	Via. File			
		<u>248K</u> <u>5250</u>		<u>RI</u>	<u>VN</u>	SPR	ALARM	<u>0A</u>	[H]	[Quad]		
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input checked="" type="checkbox"/> P	<input checked="" type="checkbox"/> M	<input checked="" type="checkbox"/> E	<input checked="" type="checkbox"/> F	<input checked="" type="checkbox"/> S		D	PW	UTIL		

COMMENTS: Client to bring 2 more sets & 2 sets ~~of~~ HVAC cut sheets  
(1 for site, 1 more for trades)

REGIONAL SANITATION FEES?  Yes  No      HEALTH DEPARTMENT?  Yes  No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS?  Provided  Faxed

Date of Request: 5/16/00  
By: \_\_\_\_\_

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION  
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 346-354, 368-382 River Bend Circle

Assessor's Parcel Number: 012-0010-024

Previous Use: (E) Apt. Complex

Description of Request/Proposed Use: renodel 2 apt. bldgs.  
w/ addition of porch/patio covers.

Is This a Change of Use? \_\_\_\_\_

Zoning Designation: R3R

Prior Applications for Project Site(P#, Z#, DRPB#): \_\_\_\_\_

Comments: Porch covers on Bldg. C.1  
require zoning Admin. Variance + Plan  
Review modification. (ok to submit  
for plan check) wj

Are There Any Planning Issues?: (circle one)  YES  NO

- \* Staff Site Plan Check Required? (Circle one)  YES  NO
- \* Field Inspection Required? (Circle one)  YES  NO
- \* Design Review/Preservation Required?: (Circle one) YES  NO

Planning Review by/Date: W. J. Bourke 5/16/00

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL



Insp. Area \_\_\_\_\_

### AUTHORIZATION TO START WORK

CITY OF SACRAMENTO, BUILDING INSPECTIONS DIVISION  
1231 I ST., ROOM 200, SACRAMENTO, CA 95814

Company: SHRA

PC # 0005243

Address: 368-382 RIVERBEND CR

BID App. BN (LAL)

Job Phone: 870.5839 Office Ph. 5539280

Fee 350<sup>00</sup>

SUBJECT: Project Address: \_\_\_\_\_ Suite # \_\_\_\_\_  
APN \_\_\_\_\_

I request permission to start the following work DEMO NON BEARING WALLS,  
ROUGH ELECTRICAL, ROUGH MECHANICAL,  
ROUGH PLUMBING  
\*NO STRUCTURAL\*

I realize that all work will be at the owner's and contractor's risk without assurance that the permit for the project will be granted. Any code conflicts will be corrected. I agree not to cover or conceal any work or portion thereof. I realize that inspections will not be made on this project until a building permit is issued. All changes required to conform to the approved plans will be completed without dispute. Work affecting the structural integrity of the existing building is not permitted.

I will expedite necessary revisions, corrections and clarifications as required to obtain the building permit.

If it should be determined subsequently by the City that changes in the design of the building are necessary after commencement of the work authorized, I assume full responsibility and all risk of loss which may result by reason of such changes. I agree that the building shall conform to the approved final plans as amended, without regard to the stage of completion.

This authorization is valid for 30 days while the plans are being processed for permit. These state required declarations must be properly executed before this authorization is valid. This authorization is valid when initialed by authorized Building Department personnel and stamped approved. Keep posted on job site at all times.

#### 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 SHRA

Lender's Address 320 Commerce Circle, SAC, CA

#### LICENSED CONTRACTORS DECLARATION

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with Section 7000) of the Business and Professions Code and my license is in full force and effect.

Lic. Class: B Lic. Number: 128776

CAPI Commercial Builders Inc.  
COMPANY NAME

[Signature]  
SIGNATURE

7/31/00  
DATE

**OWNER-BUILDER DECLARATION**

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I, as 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 Professions 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 or her own employees, provided that such improvement 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 or she did not build or improve for the purpose of sale).

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I am exempt under Sec. \_\_\_\_\_ B & P Code for this reason \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

**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 the work for which this 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: GARESE BONAS & INS SERV. INC exp. 1/14/01

Policy No.: WA 1702070 - 00

I certify under penalty of perjury 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.

CCB/AGENT  
SIGNATURE

7/31/00  
DATE

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 FEES.

In issuing this 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 the 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 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, understand and agree to the above conditions. I certify under penalty of perjury that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes.

CCB/AGENT  
SIGNATURE OF APPLICANT OR AGENT

7/31/00  
DATE