

2824-53rd Av

0318782



CITY OF SACRAMENTO  
PLANNING & BUILDING DEPARTMENT  
BUILDING DIVISION



www.cityofsacramento.org  
Help Line: 1-916-264-5656 OR 1-866-EZ-PERMIT  
Inspection: 1-916-808-4677

Downtown Permit Center 1-916-264-6807  
1231 I Street, Suite 200, Sacramento, CA 95814

North Permit Center 1-916-808-2354  
2101 Arena Blvd., Suite 200, Sacramento, CA 95834

PRELIMINARY RESIDENTIAL APPLICATION  
1-916-264-5656 OR 1-866-EZ-PERMIT

2824 53 <sup>rd</sup> AVE, Sacro		
BUILDING SITE ADDRESS	SUITE	INSP. AREA

ASSESSOR'S PARCEL NO.	COMMUNITY PLAN NO.	PLAN CHECK NO.
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NAME OF APPLICANT	ADDRESS	ZIP CODE	PHONE NO.
LICENSED CONTRACTOR	Melnikov Construction, Inc.		
PETER MELNIKOV	5929 Shirley Ave., Carmichael, CA 95608 Tel. 484-6360; Cell 709-6360; Fax 484-6131		
CONTRACTOR'S LICENSE NO.:			
PROPERTY OWNER	Melnikov Construction, Inc.		
	5929 Shirley Ave., Carmichael, CA 95608 Tel. 484-6360; Cell 709-6360; Fax 484-6131		

1			1747	2304	472	85
No. of Stories	No. of Rooms	Roof Covering	Area 1 <sup>st</sup> Floor	Total Area	Garage Area	Patio Area

THIS PERMIT IS FOR:

BUILDING     MECHANICAL     PLUMBING     ELECTRICAL     SITE     FIRE

NATURE OF WORK IN DETAIL

NEW SFR

\$ \_\_\_\_\_  
VALUATION

**COUNTY SANITATION DISTRICT 1**  
**SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT**  
**SEWER IMPACT FEE**  
**PERMIT AND CALCULATION**

APPLICATION NO: \_\_\_\_\_ BLDG PERMIT NO: \_\_\_\_\_

GENERAL INFORMATION THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER

THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE

**FEE CALCULATION BUILDING USE**

INSPECTION	RESIDENTIAL	SF U	MF U
CSD-1			COMMERCIAL USE
SROSD			
CONSTRUCTION			
IN-LIEU			
<b>TOTAL FEE</b>			

APN: \_\_\_\_\_

DESCRIPTION/ SUBDIVISION \_\_\_\_\_ LOT: \_\_\_\_\_

PROPERTY ADDRESS \_\_\_\_\_

OWNER \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

CITY-STATE-ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT

APPLICANT SIGNATURE \_\_\_\_\_

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT \_\_\_\_\_ INPUT \_\_\_\_\_ START \_\_\_\_\_

RECEIPT



Sacramento County Regional Sanitation District  
10545 Armstrong Ave Suite 101  
Mather, California  
95655

January 5, 2004  
RECEIVING FAX: 916-944-0579  
SENDING FAX: 916-876-6161

TO: Tom Armstrong

FROM: Fred R. Wingfield  
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

RE: **SEWER FACILITY IMPACT FEES**  
**53<sup>rd</sup> Avenue (#2)**

APN: **041-0025-018**  
CASE: **SWD2004-00004**

### AWARD OF SEWER "BANK" CREDITS

SRCSD sewer credits of 1.0 ESD were approved by the City of Sacramento on December 30, 2003. The adjusted Sewer Facility Impact Fees due for the single-family dwelling on the above-listed parcel is \$923.

If you have any questions regarding the above, please feel free to call me at 876-6073.

*This fee is also subject to adjustment if the data supplied is changed.*

[www.srcsd.com](http://www.srcsd.com)  
e-mail: [wingfieldf@SacCounty.NET](mailto:wingfieldf@SacCounty.NET)

Jan 5 2004 14:57 P.02

D W O COLLECTIONS SYST Fax:916-876-6161

Department of Planning and Development  
Building Inspection Division

Grading and Erosion Control Questionnaire

To be completed for all residential new construction and additions

PART I (To be completed by applicant)

Site Address 2824 53 AVE A.P.N. 041-0025-020

Applicant Information

Name MELNIKOV CONSTRUCTION, LTD  
Address 5929 SHIRLEY AVE  
CARMICHAEL, CA 95608  
Phone 484-6360

Project Information (Check One)

Single Family Dwelling  X  
Duplex   
Triplex   
Deep Lot Development

PART II (To be completed by the applicant when the project is not a part of a larger subdivision)

Are there existing structures on site?  Y  N  
Does the site front on a paved road?  Y  N\*  
Is the site higher than the crown of adjacent road?  Y  N\*  
Is the proposed building site higher than the back of the sidewalk or curb?  Y  N\*

Describe existing frontage improvements along road.

Ditch \*  Curb and Gutter

N/D Curb, Gutter, and Sidewalk

The direction of drainage on this site is:

Front to Rear \*  Rear to Front

Side to Side \*

Does an adjacent site drain across this parcel?

Y\*  N

Does this site have an existing low area or drainage swale?

Y\*  N

Will construction require cut or fill on site? (\* >50FT3 or >2FT)

Y  N

- How much cut? \_\_\_\_\_ Yards  
- How much fill? \_\_\_\_\_ Yards

Depth  
Depth

Has building site been previously been filled?

Y\*  N

Will existing drainage be re-routed?

Y\*  N

Do you plan to construct or modify culverts or drainage ditches?

Y\*  N

Print Name Luda Melnikov Title \_\_\_\_\_

Signature [Signature] Date 12/05/04  
Owner or Contractor

PART III (To be completed by staff)

What is the acreage of the parcel to be built on? \_\_\_\_\_ Acres.

If greater than 1/2 acre has an approved erosion and sediment control plan been provided?  Y  N

If greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP?  Y  N

Is the parcel to be built on part of a larger subdivision?  Y  N

Subdivision Name: \_\_\_\_\_

If yes has an approved erosion and sediment control plan been provided?  Y  N

If the original subdivision is greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP?  Y  N

Is grading and drainage approval required prior to permit issuance?  Y  N

Approved by: C. Boyd Date: 7-10-04

Building permit #: 0318782

White Copy - Permit Jacket  
Yellow - Utilities  
Pink - Bldg. Div.

**Certification of Compliance**  
School District Development

**Part I - To be completed by the APPLICANT**

Owner's Name/Address D. ARMSTRONG  
 Project Address 4211 53 ST  
 Parcel Number 041-0025-018 Lot No. \_\_\_\_\_  
 Subdivision Name \_\_\_\_\_ No. of Units \_\_\_\_\_  
 Applicant's Signature [Signature] Title \_\_\_\_\_  
 Phone No. (916) 484-6360 Date 02/06/04

**Notice to Applicant:** Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

**Part II - To be completed by the BUILDING DEPARTMENT**

Plan Identification Number 0318782 X  
 Building Type (check one)  Residential  Apartment/Condominium  Commercial/Industrial  
 Square Feet of Chargeable Building Area 1747 X  
 Signature/Title [Signature] 32 ID X Date \_\_\_\_\_

**Part III - To be completed by the SCHOOL DISTRICT**

School District 201152 Certificate No. 117 X  
 Exempt Comments \_\_\_\_\_  
 Residential/Apartment/etc. 1747 Square ft. x \$ 514 X = \$ 735.58  
 Commercial/Industrial \_\_\_\_\_ Square ft. x \$ \_\_\_\_\_ X = \$ \_\_\_\_\_  
 Total fees collected. CK# 12 = \$ 735.58

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature [Signature] Date 2/6/04

White & Canary - School District • Pink - Building Department • Goldenrod - Applicant

City of Sacramento Planning Division  
**PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL**

ADDRESS: 2810 53 <sup>rd</sup> Avenue (AKA 2824)	APN: 041-0025-020
DRPB AREA / PUD / SPD: None	ZONING: R-1
EXISTING LAND USE: Vacant	
PROPOSED USE: New SFR	
<b>PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:</b>	
<input type="checkbox"/>	Planning review is NOT required.
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.
<input checked="" type="checkbox"/>	Requires APPLICATION(s): PC      ZA      IR      ER   X   DR      PB Required Planning application must be submitted <i>before</i> project can be submitted for plan check.
<input type="checkbox"/>	<b>Application(s) IN PROGRESS:</b> Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.
<input checked="" type="checkbox"/>	<b>Application(s) COMPLETED:</b> ER03-266, Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.
<input type="checkbox"/>	<b>Plans may be submitted for plan check.</b> Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.
<input checked="" type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input checked="" 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 checked="" type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
COMMENTS: Lot at 66' x 141' = 9,306 sq. ft. Total building area = 2,640 sq. ft. $2,640/9,306 = 28\% < 40\%$ , okay. There appears to be no other planning issues present.	
DATE: 12/11/03	BY: Ashley Feeney



CITY OF SACRAMENTO  
CALIFORNIA

PLANNING AND  
BUILDING DEPARTMENT  
PLANNING DIVISION

1231 I STREET, ROOM 200  
SACRAMENTO, CA  
95814-2998

**WATER DEVELOPMENT FEE WAIVER**

Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Property Address: 2824 53<sup>RD</sup> AVE

APN: 041-0025-020 Zoning: R-1 Number of Units: 1

**This project qualifies for the waiver because it is in a:**

REDEVELOPMENT AREA; or

DESIGNATED INFILL AREA; or

QUALIFIED INFILL AREA, meeting all of the following requirements:

1. The site is located in a neighborhood where the median year of housing construction is 1965 or earlier as shown on the Neighborhood Statistics Boundary Map, or the applicant has proof to the satisfaction of the Planning Director that the median age of housing within 500 feet of the site was developed prior to 1965; and
2. The lot is surrounded on three sides by existing or approved development; and
3. The project is consistent with the General Plan or more specific plan designation; and
4. The site is no more than 5 acres in size for single family development, or 2 acres in size for multiple family development; and
5. The site has City sewer, water, and drainage services, or is within proposed or existing assessment district for these services; and the services provided are capable of serving the proposed development to the satisfaction of the Public Works Director.

Fee Waiver Denied by: \_\_\_\_\_ Date: \_\_\_\_\_

Fee Waiver Approved by: Bonnie Surgeon Date: 9-1-04

WD No: \_\_\_\_\_

INSULATION CERTIFICATE

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

SITE ADDRESS 2824 53RD AVE SACRAMENTO CA  
NUMBER CITY STATE

CEILINGS:

BLOW: MANUFACTURER GREEN FIBER THICKNESS 10.3" R/VALUE 38

BATTS: MANUFACTURER KNAUF THICKNESS 13" 38

KNAUF

EXTERIOR WALLS:

MANUFACTURER KNAUF THICKNESS 3.5" R/VALUE 13

KNAUF

FLOOR INSULATION:

MANUFACTURER KNAUF THICKNESS N/A R/VALUE N/A

KNAUF

AIR INFILTRATION: (TITLE 24)

YES XXX NO       

OTHER: \_\_\_\_\_

GENERAL CONTRACTOR: MELNIKOV CONSTRUCTION LICENSE # \_\_\_\_\_

BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

INSULATION CONTRACTOR: WESTERN INSULATION LP LICENSE # 794484

BY: Becky Gutherz TITLE AUTH. AGENT DATE 3/1/2005

BECKY GUTHERZ



**INSTALLATION CERTIFICATE**

(Page 1 of 13)

CF-6R

2824 53 RD AVE SACRAMENTO, CA

0318782

Site Address

Permit Number

An installation certificate is required to be posted at the building site or made available for all appropriate inspections. (The information provided on this form is required; however, use of this form to provide the information is optional.) After completion of final inspection, a copy must be provided to the building department (upon request) and the building owner at occupancy, per Section 10-103(b).

**HVAC SYSTEMS:**

**Heating Equipment**

Equip. Type (pkg. heat pump)	CEC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) (≥CF-1R value)	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
CENTRAL AIR CONDITIONER	TRANE	1	80% AFUE	ATTIC	4.2	75,000	75,000

**Cooling Equipment**

Equip. Type (pkg. heat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) (≥CF-1R value)	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
SPLIT AIR CONDITIONER	TRANE	1	10.0 SEER	ATTIC	4.2	42,000	42,000

1. ≥ reads greater than or equal to.

I, the undersigned, verify that equipment listed above is: 1) the actual equipment installed, 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings, and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

[Signature] 05-01-05 HELVETIA CONSTRUCTION, INC

Signature, Date

Installing Subcontractor (Co. Name)

OR General Contractor (Co. Name) OR Owner

**WATER HEATING SYSTEMS:**

Heater Type	CEC Certified Mfr Name & Model Number	Distribution Type (Std. Point-of-Use)	If Recirculation Control Type	# of Identical Systems	Rated <sup>2</sup> Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency <sup>2</sup> (EF, RE)	Standby <sup>2</sup> Loss (%)	External Insulation R-value <sup>2</sup>
SMALL GAS	AWAC	STAND	AUTO	1	40,000	50	0.62	N/A	N/A

- 2 For small gas storage (rated input of less than or equal to 75,000 Btu/hr), electric resistance and heat pump water heaters, list Energy Factor.
- For large gas storage water heaters (rated input of greater than 75,000 Btu/hr), list Recovery Efficiency, Standby Loss and Rated Input.
- For instantaneous gas water heaters, list Recovery Efficiency and Rated Input.
- 3. R-12 external insulation is mandatory for storage water heaters with an energy factor of less than 0.58.

**Faucets & Shower Heads:**

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Section 111.

I, the undersigned, verify that equipment listed above my signature is: 1) the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

[Signature] 05-01-05 HELVETIA CONSTRUCTION, INC

Signature, Date

Installing Subcontractor (Co. Name) OR

General Contractor (Co. Name) OR Owner

COPY TO: Building Department  
 IERS Provider (if applicable)  
 Building Owner at Occupancy

Site Address

Permit Number

**FENESTRATION/GLAZING:**

Manufacturer/Brand Name (GROUP LISTED OR FIELD FABRICATED)	Product U-Factor (s) CF-1R value <sup>1</sup>	Product SHGC (s) CF-1R value <sup>1</sup>	# of Panels	Total Quantity of Like Product (Optional)	Square Foot	Exterior Shading Device or Overhang	Comments/Location/ Special Features
1. <u>FIELD FABRICATED</u>	<u>0.34</u>	<u>0.34</u>	<u>2</u>	<u>2</u>	<u>30.0</u>	<u>Bug Screen</u>	<u>FRONT</u>
2. <u>"</u>	<u>0.34</u>	<u>0.34</u>	<u>2</u>	<u>1</u>	<u>40</u>	<u>"</u>	<u>LEFT</u>
3. <u>"</u>	<u>0.34</u>	<u>0.34</u>	<u>2</u>	<u>2</u>	<u>40.0</u>	<u>"</u>	<u>REAR</u>
4. <u>"</u>	<u>0.34</u>	<u>0.34</u>	<u>2</u>	<u>1</u>	<u>40.0</u>	<u>"</u>	<u>REAR</u>
5. <u>"</u>	<u>0.34</u>	<u>0.34</u>	<u>2</u>	<u>3</u>	<u>43.0</u>	<u>"</u>	<u>RIGHT</u>
6. <u>"</u>	<u>0.34</u>	<u>0.34</u>	<u>2</u>	<u>2</u>	<u>30.0</u>	<u>"</u>	<u>RIGHT</u>
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

<sup>1</sup> Manufactured fenestration products use the values from the product label. Field fabricated fenestration products use the default values from Section 116 of the Energy Efficiency Standards.

<sup>2</sup> Installed U-Factor must be less than or equal to values from CF-1R. Installed SHGC must be less than or equal to values from CF-1R, or a shading device (exterior or overhang) is installed as specified on the CF-1R. Alternatively, installed weighted average U-Factors for the total fenestration area are less than or equal to values from CF-1R.

I, the undersigned, verify that the fenestration/glazing listed above my signature: 1) is the actual fenestration product installed; 2) is equivalent to or has a lower U-Factor and lower SHGC than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) the product meets or exceeds the applicable requirements for manufactured devices (from Part 6), where applicable.

*Peter Melnikov* 05-01-05 MELNIKOV CONSTR. INC.

Item #s (if applicable)	Signature, Date	Installing Subcontractor (Co. Name) OR General Contractor (Co. Name) OR Owner OR Window Distributor

COPY TO: Building Department  
HERS Provider (if applicable)  
Building Owner at Occupancy

\$2 of 13

OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

ICBO Report 04004

JOB ADDRESS:

2824 53RD AVE

SACRAMENTO, CA

Date of Job Completion 05-01-05

PLASTERING CONTRACTOR:

Name: MELNIKOV CONSTRUCTION, I, LC

Address: 5929 SHIRLEY AVE. CARMICHAEL, CA 95608

Telephone No: (916) 484-6360

Contractor Number of Diamond Wall System 724336

This is to certify that the exterior coating system on the building exterior at the above address has been installed in accordance with the evaluation report specified above and the manufacturer's instructions.

05-01-05

Date

*[Signature]*

Signature of authorized representative of  
Plastering Contractor

This installation card must be presented to the building inspector after completion of work and before final inspection.

D P R I N I N G A T C E M : : N O 3 R N D . S D O