

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0311143

Insp Area: 4
Thos Bros: 277 J2

Site Address: 3908 CLAY ST SAC
Parcel No: 251-0024-016

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

CONTRACTOR
PETER MELNIKOV
5929 SHIRLEY AV
SACRAMENTO CA 95608

OWNER
DICK ARMSTRONG EMTERPRISES INC
PO BOX 214066
SACRAMENTO CA 95821

ARCHITECT

Nature of Work: NSFR, 1595 SQ FT LIVING, 441 SQ FT ATTACHED GARAGE & 90 SQ FT PORCH

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 724336 Date 3/31/04 Contractor Signature *[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 _____ 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 3/31/04 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 COMBINED SPECIALTY INS CO Policy Number 005-00011783 Exp Date 01/01/2005

(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 04/31/04 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.

OMEGA PRODUCTS CORP.

DIAMOND WALL INSULATING STUCCO SYSTEM

JOB ADDRESS:

3908 CLAY ST

ICBO Report #4004

SACRAMENTO CA 95838

Date of Job Completion 08-15-04

PLASTERING CONTRACTOR:

Name: MELITKOU CONSTRUCTION, INC.

Address: 5929 SWIBLEY AVE CARHIAHALL CA 95608

Telephone No: (916) 484-6360

Contractor Number of Diamond Wall System 729336

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.

Date 08-15-04

Signature of authorized representative of
Plastering Contractor [Signature]

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

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 3908 CLAY ST CITY SACRAMENTO STATE CA
 NUMBER _____

CEILINGS:

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

BATTS:

MANUFACTURER KNAUF THICKNESS 13" R/VALUE 38

EXTERIOR WALLS:

MANUFACTURER KNAUF THICKNESS 3.5" R/VALUE 13

FLOOR INSULATION:

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

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 Gutierrez AUTH. AGENT TITLE _____ DATE 9/10/04

Becky Gutierrez
 BECKY GUTHERZ



Sacramento Regional County Sanitation District
10545 Armstrong Ave., Ste. 102
Mather, California
95655

August 11, 2003
RECEIVING FAX: 916-
SENDING FAX: 916-876-6161

TO: **TO WHOM IT MAY CONCERN**

FROM: **MARSHALL D. CASTON**
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

RE: **SEWER FACILITY IMPACT FEES** APN: **251-0024-016**
3908 Clay St.

There are no Sewer Facility Impact Fees due for a single family dwelling as follows.
The District will allow 1 ESD credit for the house demolished in 1997, billing verified by
City Utility Billing.

<u>Impact:</u> Sac. Regional County San. District	\$ -
	\$ -

If you have any questions regarding the above, please feel free to call me at
876-6100.

*ESD = Equivalent Single Family Dwelling
CSD-1 Impact Fee by Ord. No. SDI-0049 approved May 14, 2003
Sewer Impact Fee Rates quoted with this document represent current rates applicable at the time of quote preparation.
Since Sewer Impact Fee Rates are subject to change, the rates current at the time fees are paid shall apply.*

www.csd-1.com
e-mail: castonm@SacCounty.NET



PLANNING AND BUILDING
DEPARTMENT

CITY OF SACRAMENTO
CALIFORNIA

1231 I STREET
ROOM 300
SACRAMENTO, CA
95814-2998

Planning Division

PLANNING
916-264-5381
FAX 916-264-2023

**PLANNING DIRECTOR'S APPROVAL FOR DEVELOPMENT AND IMPACT FEE REDUCTION
FROM THE INFILL FEE REDUCTION FUND**
(Authorized by City Council OR2003-002)

FILE: M03-149

Building Permit No.: 0311143

PROJECT NAME/LOCATION: 3908 Clay Street, Del Paso Heights Redevelopment Area,
Council District 2, North Sacramento Community Plan Area.

ASSESSOR'S PARCEL NUMBER(S): 251-0024-016

APPLICANT'S NAME/ADDRESS: Tom Armstrong
P.O. Box 2595
Carmichael, CA 95609

UNITS RECEIVING FEE REDUCTION: 1 single family home

DATE APPLICATION FILED: August 12, 2003

APPROVAL: The Planning Director approves the requested Planning Director's reduction of development and impact fees by up to \$5,000 for this project subject to the requirements set forth in the Infill Fee Reduction Ordinance. The project meets the following criteria:

- In a Target Residential Neighborhood;
- Comprised of less than four units of housing, and is not part of a larger subdivision;
- Is consistent with applicable land use designations and density requirements;
- Housing units are less than 2,500 square feet in size.

ENVIRONMENTAL REVIEW:

The recommendation of assignment of funds from the Infill Fee Reduction Fund is exempt from environmental review pursuant to State CEQA Guidelines [CEQA Section 15061(b)(3)].

PREPARED BY: Stacia A. Cosgrove
Stacia Cosgrove, Associate Planner

APPROVED BY: Art GM **APPROVED ON:** 5/13/03
Gary Stonehouse, Planning Director Date

File: Original
cc: Applicant, Building Division

Certification of Compliance School District Development Fees

PART 1 To be completed by APPLICANT

Owner's Name & Address MEINIKO CONSTRUCTION, INC.
 Project Address 3908 CLAY ST. SACTO.
 Parcel Number 251-0024-016 Lot No. 10
 Subdivision Name DEL PASO HTS Number of Units 1
 Applicant's Signature & Title _____
 Date 3/26/04 Phone No. _____

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 2 To be completed by BUILDING DEPARTMENT

Plan Identification Number 031143 Building Type (CHECK ONE)
 Square Feet of Chargeable Building Area 1595 Residential
 Signature [Signature] Apartment/Condominium
 Title BLDG TECH Commercial/Industrial
 Date 3/25/04

PART 3 To be completed by SCHOOL DISTRICTS

Grant Joint Union High School District
 District Certification No. 04-1565
 EXEMPT _____
 Comments Change 899.0
 RESIDENTIAL / APARTMENT / CONDOMINIUM
1595 Sq.Ft. x \$ 2.141 = \$ 1,923.86
 COMMERCIAL / INDUSTRIAL
 _____ Sq.Ft. x \$ _____ = \$ _____
 OTHER FEE: TYPE _____
 _____ Sq.Ft. x \$ _____ = \$ _____
 TOTAL FEES COLLECTED = \$ 1,923.86

Robla Elementary School District
 District Certification No. _____
 EXEMPT _____
 Comments _____
 RESIDENTIAL / APARTMENT / CONDOMINIUM
 _____ Sq.Ft. x \$ _____ = \$ _____
 COMMERCIAL / INDUSTRIAL
 _____ Sq.Ft. x \$ _____ = \$ _____
 OTHER FEE: TYPE _____
 _____ Sq.Ft. x \$ _____ = \$ _____
 TOTAL FEES COLLECTED = \$ _____

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 district 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.

GRANT	ROBLA
Authorized School District Official	Authorized School District Official
Signature <u>[Signature]</u>	Signature _____
Title <u>Secretary</u>	Title _____
Date <u>3/31/04</u>	Date _____

Original: Grant Joint Union High School District/
 Robla Elementary School District
 1st Copy: Building Department
 2nd Copy: Applicant

GJUHSD: Facilities Planning and Construction Department
 Certificate of Compliance Form (rev. 10/02) bep