

CITY OF SACRAMENTO

Permit No: 9802718

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 2130 MORLEY WY SAC

Sub-Type: ASFR

Parcel No: 2930121009

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

GRAVES ROBERT & SHERESE
2130 MORLEY WY
SACRAMENTO CA 95864

Phone: _____

Phone: _____

Phone: _____

Nature of Work: BATHROOM REMODEL & ADDN OF 50 SF TO MASTER BEDROOM

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 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 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 or 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 9/10/98 Owner Signature Cathy Lane (for Robert Graves)

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.

Date 9/10/98 Applicant/Agent Signature Cathy Lane (for Robert Graves)

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 _____

____ (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 9/10/98 Applicant Signature Cathy Lane (for Robert Graves)

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.

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNER

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed improvement (yes or no) _____

2. I (have/have not) _____ signed an application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name Bryan Hall Address _____

City Sacramento Telephone 454-1855

Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise, and provide the major work.

Name _____ Address _____

City _____ Telephone _____

Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the work indicated:

Name	Address	Phone	Type of Work
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signed

Carley Lane (for Robert Gross)

Job Address 2130 Moxley Ave. Sac. 95864 Date April 10, 1998

Permit No.: 9802718

ATTN: KATHY LAMIE

RECORDING REQUESTED BY

Placer Title Company -
SacramentoAND WHEN RECORDED MAIL THIS DEED AND, UNLESS
OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTSTO: NAME [ROBERT M. GRAVES, etal]
ADDRESS 2130 MORLEY WAY
SACRAMENTO, CA 95864

Title Order No 40203695-PS

Escrow No 40203695-PS

CERTIFIED TO BY A TRUE
AND CORRECT COPY OF
DOCUMENT RECORDED 4-6-98
SERIES BOOK 980406 PAGE 1235
PLACER TITLE CO.-SPACE ABOVE THIS LINE FOR RECORDER'S USE-
THE UNDERSIGNED GRANTOR DECLARES:

DOCUMENTARY TRANSFER TAX \$ 437.80

 COMPUTED ON FULL VALUE OF PROPERTY CONVEYED,
 OR COMPUTED ON FULL VALUE LESS LIENS AND
ENCUMBRANCES REMAINING AT TIME OF SALE.

The Undersigned

Signature of Declarant or Agent determining tax. Firm Name

Grant Deed

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, BOYD H. GIBBONS,
III and GAYETTA M. GIBBONS,, TRUSTEES OF THE BOYD H GIBBONS, III AND GAYETTA H.
GIBBONS REVOCABLE TRUST DATED MARCH 30, 1994hereby GRANT(s) to ROBERT M. GRAVES and SHERESE A. GRAVES, husband and wife
AS Joint tenants

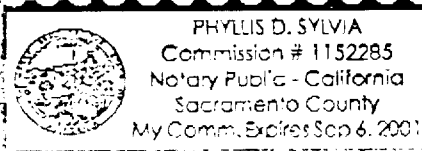
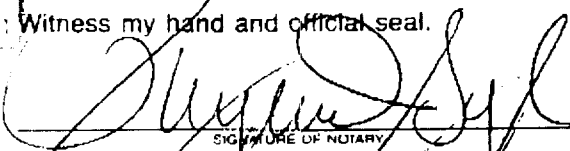
Exhibit A
Legal description of the property

page 1

LOT 522, AS SHOWN ON THE "PLAT OF SIERRA OAKS UNIT NO. 15", RECORDED IN BOOK 82
OF MAPS, MAP NO. 1, RECORDS OF SAID COUNTY.

Assessor's Parcel No: 293-0121-009

ALL-PURPOSE ACKNOWLEDGEMENT

State of <u>California</u>		} CAPACITY CLAIMED BY SIGNER
County of <u>Sacramento</u>		
On <u>3-20-98</u>	before me, <u>Phyllis D. Sylvia</u>	<input type="checkbox"/> INDIVIDUAL(S)
<small>DATE</small>	<small>NAME, TITLE OF OFFICE, E.G., "JANE DOE, NOTARY PUBLIC"</small>	<input type="checkbox"/> CORPORATE _____ OFFICER(S) _____ <small>TITLE(S)</small>
Personally appeared <u>Gayetta M. Gibbons</u>	<small>NAME(S) OF SIGNER(S)</small>	<input type="checkbox"/> PARTNER(S)
<input type="checkbox"/> personally known to me - OR - <input checked="" type="checkbox"/> proved to me on the basis of satisfactory evidence	to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.	<input type="checkbox"/> ATTORNEY-IN-FACT
		<input type="checkbox"/> TRUSTEE(S)
		<input type="checkbox"/> SUBSCRIBING WITNESS
		<input type="checkbox"/> GUARDIAN/CONSERVATOR
		<input type="checkbox"/> OTHER: _____
		SIGNER IS REPRESENTING: NAME OF PERSON(S) OR ENTITY(IES) _____ _____ _____
Witness my hand and official seal.  <small>SIGNATURE OF NOTARY</small>		
ATTENTION NOTARY: Although the information requested below is OPTIONAL , it could prevent fraudulent attachment of this certificate to unauthorized document.		
THIS CERTIFICATE MUST BE ATTACHED TO THE DOCUMENT DESCRIBED AT RIGHT:	Type or Type of Document _____	
	Number of Pages _____	Date of Document _____
	Signer(s) Other Than Named Above _____	

ATTN: KATHY LANE

RECORDING REQUESTED BY

Placer Title Company -
SacramentoAND WHEN RECORDED MAIL THIS DEED AND, UNLESS
OTHERWISE SHOWN BELOW, MAIL TAX STATEMENTSTO: NAME [ROBERT M. GRAVES, etal]
ADDRESS 2130 MORLEY WAY
SACRAMENTO, CA 95864

Title Order No. 40203695-PS

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CERTIFIED TO BY A TRUE
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Signature of Declarant or Agent determining tax. Firm Name

Grant Deed

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III and GAYETTA M. GIBBONS, TRUSTEES OF THE BOYD H GIBBONS, III AND GAYETTA H.
GIBBONS REVOCABLE TRUST DATED MARCH 30, 1994hereby GRANT(s) to ROBERT M. GRAVES and SHERESE A. GRAVES, husband and wife
AS Joint tenantsthe following described real property in the Unincorporated Area
County of SACRAMENTO, State of California:
Property is described on Exhibit A attached hereto and made a part hereof.

Dated March 18th, 1998

STATE OF ~~CALIFORNIA~~ WISCONSIN
COUNTY OF RACINEOn March 19th, 1998 before me,
BOYD H GIBBONS, III personally appearedpersonally known to me (or proved to me on the basis of satisfactory
evidence) to be the person(s) whose name(s) is/are subscribed to
the within instrument and acknowledged to me that he/she/they
executed the same in his/her/their authorized capacity(ies), and that
by his/hor/their signature(s) on the instrument the person(s), or the
entity upon behalf of which the person(s) acted, executed the
instrument.

WITNESS my hand and official seal.

EXP: 6/25/2000

X
BOYD H. GIBBONS, IIIX
GAYETTA M. GIBBONS,

(Space above for official notarial seal)

MAIL TAX STATEMENTS TO PARTY SHOWN ON FOLLOWING LINE; IF NO PARTY SHOWN, MAIL AS DIRECTED ABOVE

Grantee at address above

0568

Name

Street Address

City & State

2130 Morley Wy.



PROJECT OF	2130 MORLEY WY
PHOTO ADDRESS	2130 MORLEY WY
APN	293 021 009
BUILD PERMIT #	98-02718-R
NEW PLAN #	
AMOUNT	

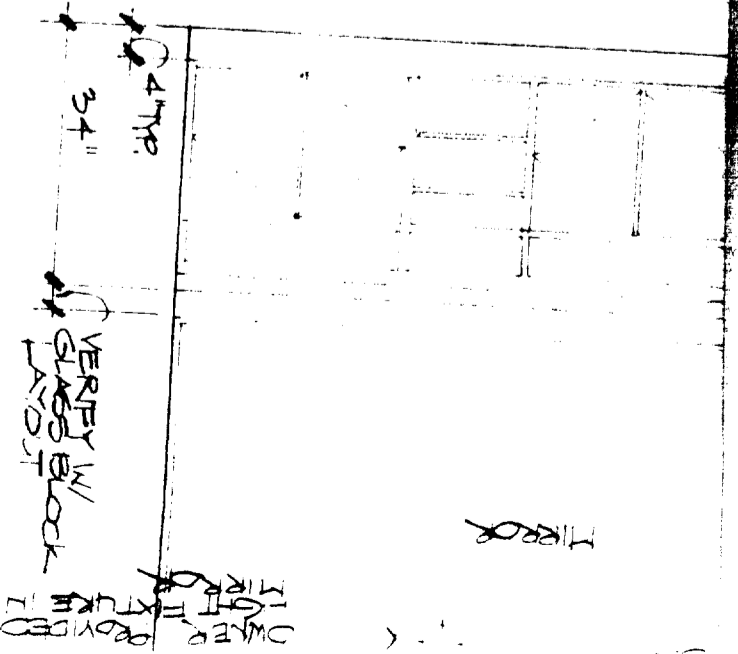
5050F
TION

PROJECT INFO.
 OWNER: BOB AND SHERISE GRAVES
 ADDRESS: 230 MORLEY WAY SACRAMENTO CA 95861
 ASPN 293 021 009
 ADDITION OF 46 SQ. FT.
 DESIGNER: DAVID B. HEARD
 221 ARROYO GRAYCE DR SAC CA 95861
 (916) 482 6933

APR 10 1998

ISSUED

APR 10 1998



SECRET DRAWING
 1/34 10
 1/34 10
 1/34 10