

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0109190

Insp Area: I

Thos Bros: 298B5

Site Address: 5727 MODDISON AV SAC

Parcel No: 005-0192-016

Sub-Type: ASFR

Housing (Y/N): N

CONTRACTOR

BUENA VISTA ENTERPRISE
2033 HUMBOLT AV
DAVIS CA 95616

OWNER

STAVROS MICHAEL/PAULA NANDI
5727 MODDISON AV
SACRAMENTO CA 95819

ARCHITECT

Nature of Work: ASFR + 640 SF LVNG & 96 SF DECK @ 2ND FLR, 151 SF CVRD
PATIO AREA/2ND FLR O'HANG AREA @ 1ST FLR, (N) STAIRS & 1/2
BTH RMDL @ 1ST FLR

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 B License Number 679040 Date 10-15-01 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 10-15-01 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 EXEMPT 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 10-15-01 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.

Date of Request: 7-19-01

By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

X Project Address: 5727 MODDISON AVE

Assessor's Parcel Number: 005-0192-016

Previous Use: SFR

Description of Request/Proposed Use: addition - second story (600 sq ft.)
for new Master Bedroom, Master Bath and
office. New stairwell and convert full bath to 1/2 bath
on ground floor.

Is This a Change of Use? No

Zoning Designation: R-1

Prior Applications for Project Site(P#, Z#, DRPB#): No PLANNING ENTITLEMENTS

Comments: Second story addition will comply with
setback requirements, maximum lot coverage
and height requirements.

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: David Hung 7/19/01

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

MICROFILM AFTER FINAL



DATE: 7-19-01

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
FAXED PERMIT APPLICATION (certain restrictions apply)

Fax # 916-264-1901

Faxed request must be received in this office by 3:00 p.m. to be processed the following work day.

Note: Contractors must have a current certificate of Worker's Compensation Insurance.

Note: Work started before a Building Permit is issued will be subject to quad fee

IN ORDER TO PROCESS THIS REQUEST, **ALL** THE FOLLOWING INFORMATION **MUST** BE PROVIDED:

RESIDENTIAL APARTMENTS (# units per building) COMMERCIAL (limited)

JOB ADDRESS: 5727 MODDISON AVE UNIT # _____ CONTRACT PRICE \$ 40,800

CONTACT PERSON: REYES CORONA CONTACT PHONE: 530-253-5114

Property Owner: NICHOLE STAVROS License # 679040
 Address: 5727 MODDISON AVE
 City/State/Zip: SAC CA 95819
 Phone: _____ FAX: _____

NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE <input type="checkbox"/> GARAGE #SQUARES _____ Material: _____ <input type="checkbox"/> SIDING <input type="checkbox"/> wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> vinyl <input type="checkbox"/> stucco	<input type="checkbox"/> HVAC INSTALLATIONS (residential ONLY) <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> NEW <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: \$ _____ Equipment: \$ _____ Cut-in: \$ _____ Note: Design Review approval may be required for rooftop units.	<input type="checkbox"/> WATER HEATER (residential ONLY) <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITES DAMAGE REPAIR (Describe locations below) Note: Design Review approval may be required in certain areas.	<input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING (residential ONLY) <input type="checkbox"/> Electric Service Change # amps _____ <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Water Service Replacement <input type="checkbox"/> Sewer Service Replacement <input type="checkbox"/> Gas Line Replacement <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> PGE *NOTE: Correction Notice items will require an additional building permit
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DESCRIPTION OF WORK: 600 SQ FT. ADAPTION



City of Sacramento
Building Inspection Division
cityofsacramento.org

PERMIT OFFICES

Downtown (916) 264-5716
 1231 1st., Rm.200, Sacramento 95814
Natomas Center (916) 264-0000
 2101 Arena Blv., Sacramento 95834
South Center (916) 000-0000
 0000 Rd. Sacramento 95824

SFD or Residential Addition Take-in sheet.

Plans shall consist of the following: Activity # _____

Correct number of 11" x 17" to 36" x 48" plan sets:

All plan sheets to be the same size.

2 sets for Building Inspection Division.

1 set for Assessor (11"X17" floor plan required at issuance).

1 sets for Fire District*. (With Civil Sheets)(Civil sheets to include fire hydrant if purposed)

___ Total number of plan sets **NOTE:** (Fire set to include Civil sheets)

OK Required

- General Information: Address, designer, scope of work.
- Site/Plot Plan. (Abandon septic to be noted and shown on site plan.)
 (All new sewer & water lines to show all point of connections on site plan).
- Vicinity Map.
- Architectural Plans (floor, roof plans, elevations, sections, details, label rooms).
 Floor plans showing the whole house, not just the addition.
- Structural plans. **NOT PROVIDED**

In addition, two sets of the following may be required:

- Structural Calculations and Soil Report (when required). **NOT PROVIDED**
 (An extra set of calculations is required for Foundation Only applications.)
- Soils reports for all subdivisions are required. **N/A**
- Title 24 Energy Compliance Documentation.

*A separate fee for the Fire Department is required for any home that is: 3,600 sq. ft or more.

Required Note: Structures with any point greater than 150' ft. from City street may require

A fire hydrant and or a Sprinkler system with a access road and a turnaround.

- 3,600 sq. feet or more req.'s 1,500 GPM min. water flow.
 To obtain verification of (GPM) contact Joyce Pilgram #264-1430

Planning Department Requirements

- All structures in the Historical Preservation areas (Central City, N. Sacto.Oak Park) 2 sets of plans.
- Design Review/Preservation required by the Planning Dept. 3 sets of plans to Planning Dept.

Accepted: Date _____ Initials _____

Certificate of Compliance
 School District Development Fees

(Print or Type) If Printing, press hard for four copies

PART I To be completed by the APPLICANT (THIS FIELD IS NOT TO BE COMPLETED)

OWNER'S NAME 411 - 1755 St. Avoca
 OWNER'S ADDRESS 5727 Madison Ave.
 PROJECT ADDRESS Same as above
 PARCEL NUMBER 005-0192-016-0000 LOT NO. _____
 SUBDIVISION NAME _____
 NUMBER OF UNITS _____

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE [Signature]
 TITLE OF APPLICANT Homeowner
 DATE 9/28/01 PHONE NUMBER (541) 753-5114

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 2 015490
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL ()
 SQUARE FEET OF CHARGEABLE BUILDING AREA 600
 SIGNATURE [Signature]
 TITLE _____ DATE 9. 28. 01.

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT S. G. U.S.D. - GORHAM CITY
 DISTRICT CERTIFICATION NO. 72491
 EXEMPT _____ COMMENTS _____
 RESIDENTIAL/APT/CONDO 600 SQ FT X \$ 1.72 = \$ 1032.00
 COMMERCIAL/INDUSTRIAL _____ SQ FT X \$ _____ = \$ _____
 OTHER FEE _____ TYPE _____ SQ FT X \$ _____ = \$ _____
 TOTAL FEES COLLECTED CHECK # 1032 9/28/01 = \$ 1032.00

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.

AUTHORIZED SCHOOL DISTRICT OFFICIAL

SIGNATURE [Signature]
 TITLE Superintendent DATE 09/28/01

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Applicant