

**CITY OF SACRAMENTO**

1231 I Street, Sacramento, CA 95814

Permit No: 0510619

Insp Area: 4

Thos Bros: 277J2

Site Address: 3940 HAYWOOD ST SAC

Parcel No: 251-0023-023

Sub-Type: NSFR

Housing (Y/N): N

**CONTRACTOR**  
KELLY'S CONSTRUCTION  
4932 OAK LEAF AV  
CARMICHAEL CA 95608

**OWNER**  
KELLY KEITH R/ALICE M  
3928 HAYWOOD ST  
SACRAMENTO, CA 95838

**ARCHITECT**

**Nature of Work:** NEW SFR 1487 SQ FT LIVING, 420 SQ FT GARAGE, 98 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 648355 Date 9-6-05 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 project with a contractor(s) licensed pursuant to the Contractors License Law).

I am exempt under Sec. \_\_\_\_\_ B & PC for this reason: \_\_\_\_\_ SEP 06 2005

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 9-6-05 Applicant/Agent 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 9-6-05 Applicant 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

www.cityofsacramento.org  
Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT  
Inspection: 1-916-808-7622

Downtown Permit Center  
1231 I Street, Suite 200  
Sacramento, CA 95814

North Permit Center  
2101 Arena Blvd., Suite 200  
Sacramento, CA 95834

SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

PARCEL # 251 - 0023 - 023 PERMIT # 0510619  
SITE ADDRESS 3940 Haywood ACREAGE \_\_\_\_\_

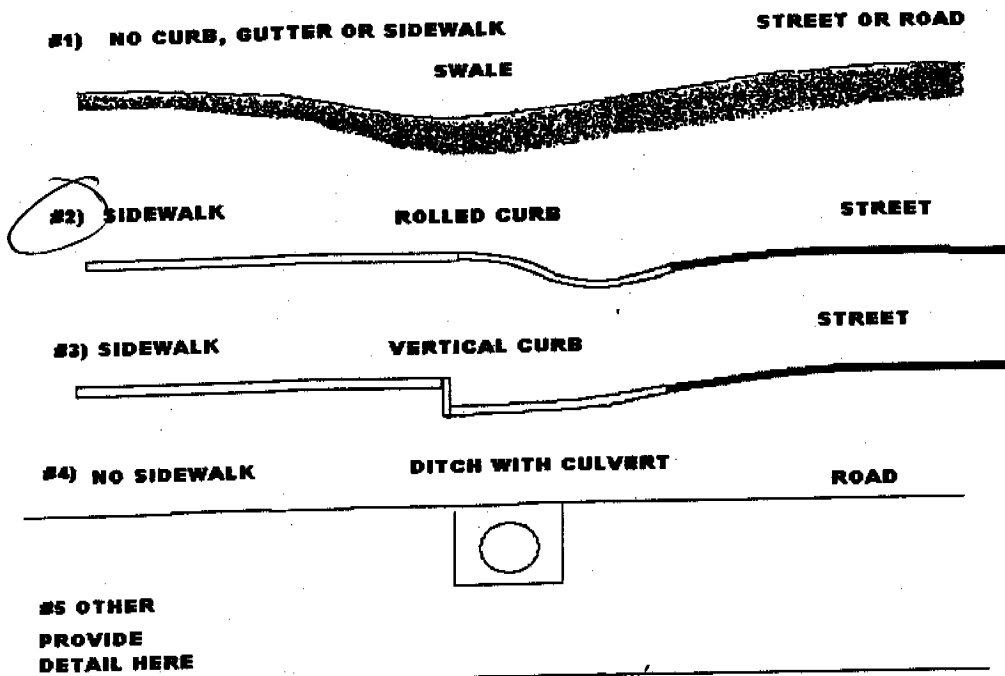
The City of Sacramento requires a building site to be graded to drain correctly and site drainage routed to an approved location. To help us understand the site drainage for your project and determine if a driveway permit or an encroachment permit is required please answer the following questions. All questions must be answered.

1. Are there existing structures on the site? Y  N
2. Is there an existing concrete or paved driveway to this parcel from the street? Y  \*N
3. Will the existing access to this parcel be changed in any way for this project? \*Y  N
4. Are all portions of the lot higher than the crown of the street?  Y  \*N
5. Are all portions of the lot higher than the back of the sidewalk?  Y  N
6. Is there a curb and gutter at the street level?  Y  N
7. Is there a sidewalk with a curb and gutter at the street? \*Y  N  N/A
8. Is the curb at the street square?  Y  N  N/A
9. Is there a rolled curb at the street? Y  \*N  N/A
10. Is there a drainage ditch or culvert at the street?  Y  \*N
11. Does the lot drain from back to front? Y  \*N
12. Does the lot drain from front to rear? \*Y  N
13. Does another lot drain across this parcel? \*Y  N
14. Does the lot drain from side to side? \*Y  N
15. Does the site have an existing low area or drainage swale? \*Y  N  N/A
16. Does the drainage swale drain to an adjacent parcel? Y  \*N  N/A
17. Does the drainage swale drain to the street? \*Y  N
18. Will existing drainage be re-routed? \*Y  N  N/A
19. Will drainage ditches or culverts be constructed or modified? \*Y  N
20. Did this project require approval from the Zoning Administrator? \*Y  N
21. Did the project require approval from the Planning Administrator? \*Y  N

# SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

- |   |    |   |
|---|----|---|
| 22. Is there any tree, telephone pole, guy wire or similar obstruction located at the front of the property adjacent to the street or road? | *Y | <input checked="" type="radio"/> N      |
| 23. Is this a corner lot?   | *Y | <input checked="" type="radio"/> N      |
| 24. Is the posted speed limit on this street greater than 25 MPH?   | *Y | <input checked="" type="radio"/> N      |
| 25. Is this parcel located on a four-lane street?   | *Y | <input checked="" type="radio"/> N      |
| 26. If site is greater than 1/2 acre has an erosion and sediment control plan been submitted?   | Y  | *N <input checked="" type="radio"/> N/A |
| 27. If site disturbs 1 acre or more has a copy of the State General Permit NOI and SWPPP been submitted?                                    | Y  | *N <input checked="" type="radio"/> N/A |
| 28. If site is part of a larger subdivision greater than 1 acre has a copy of the State General Permit NOI and SWPPP been submitted?        | Y  | *N <input checked="" type="radio"/> N/A |

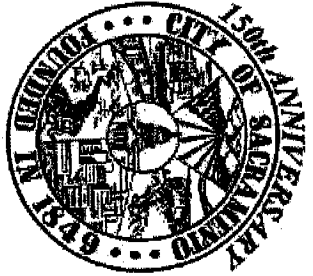
**CIRCLE THE DRAWING NUMBER BELOW THAT BEST ILLUSTRATES THE EXISTING CONDITION AT THE LOCATION OF THE PROPOSED DRIVEWAY OR SITE ACCESS.**



The information provided on this document is accurate. I understand that if this form is incomplete, contains inaccurate or misleading information, the project located at this address may be delayed until any drainage or encroachment issues are resolved to the satisfaction of the City of Sacramento.

SIGNED *[Signature]*      DATE 8-15-05  
 TITLE Owner  
 PHONE NO. (916) 489-5690

PD: 07/19/2005 \*\*\*DUPLICATE\*\*\*  
DATE: 07/19/2005 043 LPM  
PRT#: 0510616 4:30PM 000006307  
0204PLAN CK-RESID'L SHT RES BLD PT  
\$351.00



05 10619

DATE: 7-19-05

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 grand fee

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

RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (limited)  
JOB ADDRESS: 3940 HAYWOOD ST UNIT # \_\_\_\_\_ CONTRACT PRICE \$ \_\_\_\_\_  
 CONTACT PERSON: AUCCE KELLY  CONTRACT PHONE: \_\_\_\_\_

Property Owner: KATHY AND AUCCE KELLY License # \_\_\_\_\_  
Address: 4932 OAK CENT AVE FAX: \_\_\_\_\_  
City/State/Zip: CHATHAM CHURCH, CA 95608  
Phone: (916) 488-5690

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"/> RESHET <input type="checkbox"/> HOUSE <input type="checkbox"/> GARAGE <b># STAIRS:</b> #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 Note: Design Review approval may be required in certain areas.	<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 TERMITTE 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:

NEW SFR 1465 SQ FT LIVING 390 SQ FT GARAGE, 100 SQ FT POOL

COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT  
 1-23-01 **SEWER IMPACT FEE**  
 PERMIT AND CALCULATION SHEET

APPLICATION NO: **SWD 2001-00291**  
 GENERAL INFORMATION

*City of Sac.*

BLDG PERMIT  
 THIS PERMIT GOOD ONLY WHEN  
 VALIDATED BY THE CASHIER  
**PAID**  
 APR 23 2001  
 THIS PERMIT TO CONNECT EXPIRES  
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL	SF MF
CSD-1			<input checked="" type="checkbox"/>
SPCSD	2404	COMMERCIAL USE	
CONSTRUCTION			
ALIEU			
<b>TOTAL FEE</b>	<b>* 2404</b>		

County of Sacramento  
 Accounting and Fiscal Services  
 Date: 04/23/2001 Cashier #: 3  
 Receipt #: 3200102905  
 Check #:   
 Permit #: SAC2001-00291  
 Fee Type  
 SPCSD Sewer Fees Amount \$2,404.00  
 Total Due \$2,404.00  
 Change Due \$2,404.00

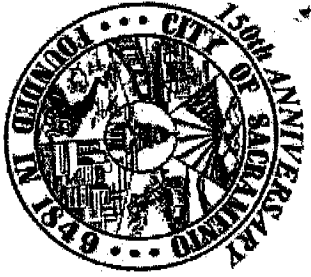
APN: **251-0023-023**  
 DESCRIPTION/  
 SUBDIVISION LOT:  
 PROPERTY ADDRESS **3740 HARLEIGH ST.**  
 OWNER **KEITH KELLY**  
 MAILING ADDRESS  
 CITY-STATE-ZIP PHONE  
 ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.  
 APPLICANT SIGNATURE  
 CONSOLIDATED UTILITY BILLING USE ONLY  
 ACCT \_\_\_\_\_ INPUT \_\_\_\_\_ START \_\_\_\_\_

RECEIPT

2114

PD: 07/19/2005 043 LPM  
DATE: 07/19/2005 4:30PM 00006308  
PMT#: 0518619 SHT RES BLD PT  
0204PLAN CK-RESID/L \$351.00  
CC \$702.00  
CHANGE \$9.00

\*\*\*DUPLICATE\*\*\*



CITY OF SACRAMENTO  
DEVELOPMENT SERVICES DIVISION  
FAXED PERMIT APPLICATION (certain restrictions apply)  
FAX # 916-264-1901

DATE: 7-19-05

*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.*

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

RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (umbrella)  
JOB ADDRESS: 3936 HAYWOOD ST UNIT # \_\_\_\_\_ CONTRACT PRICE \$ \_\_\_\_\_  
 CONTACT PERSON: Alice Kelly  CONTACT PHONE: \_\_\_\_\_

Property Owner: Alice Kelly / Brent Kelly Contractor: \_\_\_\_\_ License # \_\_\_\_\_  
Address: 4932 ORCHARD AVENUE Address: \_\_\_\_\_  
City/State/Zip: SACRAMENTO, CA 95608 City/State/Zip: \_\_\_\_\_  
Phone: (916) 488-5690 Phone: \_\_\_\_\_ FAX: \_\_\_\_\_

NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.				
<input type="checkbox"/> ROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEAT <input type="checkbox"/> HOUSE <input type="checkbox"/> GARAGE # SQRs: _____ Material: _____	<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)	<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"/> 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
<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	Value of duct work: \$ _____ Equipment: \$ _____ Cut-in: \$ _____	<input type="checkbox"/> DRY ROT OR TERMITTE DAMAGE REPAIR (Describe locations below)		

DESCRIPTION OF WORK:

NEW SFR 1464 sq Living, 390 sq FT GARAGE  
100 sq Deck



COUNTY SANITATION DISTRICT NO. 1  
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT  
**SEWER IMPACT FEE**  
 PERMIT AND CALCULATION SHEET

APPLICATION NO: **5402001-00290**  
 GENERAL INFORMATION

*City of Sac*

BLDG PERMIT **5402001-00290**  
 THIS PERMIT GOOD ONLY WHEN  
 VALIDATED BY THE CASHIER\*  
**RCPT # 3200102987**  
**PAID**  
**APR 23 2001**  
 THIS PERMIT TO CONNECT EXPIRES  
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF	MF UNITS
CSD-1		<input checked="" type="checkbox"/>	<input type="checkbox"/>
SRCSD	<b>2404</b>		
CONSTRUCTION			
LIEU			
<b>TOTAL FEE</b>	<b>2404</b>		

APN: **251-0023-022** LOT:

DESCRIPTION / SUBDIVISION

PROPERTY ADDRESS **3936 Haywood St**

OWNER **Keith Kelly**

MAILING ADDRESS

CITY-STATE-ZIP

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

APPLICANT SIGNATURE \_\_\_\_\_  
 CONSOLIDATED UTILITY BILLING USE ONLY  
 ACCT \_\_\_\_\_ INPUT \_\_\_\_\_ START \_\_\_\_\_

County of Sacramento  
 Accounting and Fiscal Services

Check #: **04/23/2001** Cashier #: **3**

Receipt #: **3200102987**

Permit #: **5402001-00290**

Fee Type **SRCSD Sewer Fees** Amount **\$2,404.00**

Total Due **\$2,404.00**

Change Due **\$2,404.00**

RECEIPT