

AREA  
15

JOB  
ADDRESS

3815 J Street

RECORD OF SUBSEQUENT PERMITS ISSUED

DATE	TYPE OF PERMIT AND VALUATION	PERMIT NO. AND FEE	NATURE OF WORK	PRESENT OWNER AND ADDRESS	CONTRACTOR & ADDRESS	FINALED BY	DATE
9-10-81	E \$50.	1-4665 \$Gratis	Install Elec. Cir.	Sierra Health Care 3815 J St.	Pacific Neon Co. P.O. Box 15100	<i>Mason</i>	<i>3/9/82</i>
9-10-81	Sign \$380	S-10281 \$20.	Install Sign	Sierra Health Care 3815 J Street	Pacific Neon Co. P.O. Box 15100	<i>Tremine</i>	<i>10/16/81</i>
9-10-81	Sign \$380.	S-10282 \$20.	Install Sign	Sierra Health Care 3815 J Street	Pacific Neon Co. P.O. Box 15100	<i>Tremine</i>	<i>10/16/81</i>
12-17-81	Sign \$320.	S-10396 \$20.	Install Sign	Sierra Health Care 3815 J St.	Ad Art P.O. Box 2308		

MICROFILM RECORD

PERMIT NO.	REEL AND FRAME NOS.	PERMIT NO.	REEL AND FRAME NOS.	PERMIT NO.	REEL AND FRAME NOS.
1-4665	R 686F 447-448	S-10396	R 702F 80-81		
S-10281	R 686F 447-448				
S-10282	R 686F 447-448				
S-10281	<i>final</i>				
S-10282	<i>final</i>				
1-4665	R 712F 275				

**FINAL INSPECTIONS**

**BUILDING BY DATE**

**ELECTRICAL BY DATE**

**PLUMBING BY DATE**

**MECHANICAL BY DATE**

**CERTIFICATE OF OCCUPANCY ISSUED BY DATE**

**MICROFILM RECORD**

**CITY OF SACRAMENTO BUILDING INSPECTIONS DIVISION**

**JOB ADDRESS**

3815 J Street

AREA 15

**ASSESSOR PARCEL NUMBER**

**LEGAL DESCRIPTION**

**NAME OF FIRM**

**CONTRACTOR**

**ADDRESS**

**ZIP CODE**

**ACCT. NO.**

**PHONE NO.**

**OWNER**

**DATE**

**ARCH. ENGR.**

**DATE**

**CONST. LOAN LENDER**

**PLANS AND APPLICATION**

REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO
REEL NO.	FRAME NO.	TO

**NATURE OF WORK IN DETAIL**

REMARKS AND/OR VARIANCES

THIS PERMIT IS FOR:

BUILDING   
  MECHANICAL   
  PLUMBING   
  ELECTRICAL

BUILDING   
  MECH.   
  PLUMB.

NO. OF STORIES

ROOF COVERING

AREA 1ST FLOOR

TOTAL AREA

GARAGE AREA

PATIO AREA

USE ZONE

**FEES**

VALUATION	\$
ISSUED BY:	
DATE ISSUED	
BUILDING PERMIT FEE	\$
PLAN CHECK FEE	\$
RDF FEE	\$
S.M.I. FEE	\$
REG. SEWER FEE	\$
BRIDGE FEE	\$
CONST. TAX	\$
<b>TOTAL</b>	<b>\$</b>

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REV. 9/79

PERMIT #