

**CITY OF SACRAMENTO**

1231 I Street, Sacramento, CA 95814

Permit No: 0516587

Insp Area: 2

Thos Bros: 297B7

Site Address: 956 VALLEJO WY SAC

Parcel No: 012-0101-014

Sub-Type: ASFR

Housing (Y/N): N

**CONTRACTOR**

**OWNER**

MORRIS LAWRENCE E/SHERRI C  
956 VALLEJO WY  
SACRAMENTO, CA 95818

**ARCHITECT**

BRUCE WHITELAM  
1260 42ND AVE  
SACRAMENTO, CA 95822

**Nature of Work:** FIRST AND 2ND STORY ADDITION & CNVERT EXISTING GARAGE TO STUDIO/WORKSHOP

**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 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 February 22, 2006 Owner Signature Lynne Robertello for Larry & Sherri Morris

**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 a 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date February 22, 2006 Applicant/Agent Signature Lynne Robertello for Larry & Sherri Morris

**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 \_\_\_\_\_ Exp Date \_\_\_\_\_

*LR* (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 February 22, 2006 Applicant Signature Lynne Robertello for Larry & Sherri Morris

**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.**

956 Vallejo Wy 0516587

City of Sacramento  
Development Services Department

**PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL**

ADDRESS: 956 VALLEJO WAY		APN: 012-0101-014	
DRPB AREA / PUD / SPD: NONE		ZONING: R-1	
EXISTING LAND USE: TWO STORY RSF WITH DETACHED GARAGE			
PROPOSED USE: ADDITION TO RSF AND CONVERT DETACHED GARAGE TO STUDIO/WORKSHOP			
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:			
<input type="checkbox"/>	Planning review is NOT required.		
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.		
<input type="checkbox"/>	Requires APPLICATION(s): PC      ZA      IR      ER      DR      PB		
Required Planning application must be approved <i>before</i> project can be submitted for plan check			
<input type="checkbox"/>	Application(s) IN PROGRESS: File Number:		
Application must be approved <i>before</i> project can be submitted for plan check.			
<input type="checkbox"/>	Application(s) COMPLETED: File Number & approval date:		
Building permit must conform to approved plans and comply with all conditions of approval. Do NOT accept applications for a building permit prior to the end of the 10-day appeal period.			
<input checked="" type="checkbox"/>	Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.		
<input checked="" type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.		
<input checked="" type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.		
<input type="checkbox"/>	Route to SITE for plan check and inspection.		
<input type="checkbox"/>	Route to SITE for inspection only, plan check not required.		
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.		
CONDITIONS AND COMMENTS: LOT AREA = 4792 (METROSCAN). EXISTING & PROPOSED FOOTPRINT = 1704 / 4792 = 36% TOTAL LOT COVERAGE. MEETS ALL SETBACK AND LOT COVERAGE REQUIREMENTS, EXISTING DETACHED GARAGE EXTENDS BEYOND REAR PROPERTY LINE ACCORDING TO LAND SURVEYOR. ORIGINALLY CONSTRUCTED IN 1937, CONSIDERED LEGAL NON-CONFORMING AND REMAIN IN EXACT LOCATION. EXTERIOR OF EXISTING GARAGE STRUCTURE TO REMAIN IN SAME FOOTPRINT, ONLY REMODEL/REHAB WORK TO BE COMPLETED. STUDIO/WORKSHOP NOT FOR LIVING SPACE.			
ALL EXTERIOR MATERIALS, ROOF PITCH AND COLORS TO MATCH EXISTING.			
DATE: 10/19/05		BY: BONNIE SURGEON	

0516587

DATE: 10/19/02



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

Fax # 916-264-1901

Note: 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 (4+ units per building)  COMMERCIAL (limited)

JOB ADDRESS: 950 VALLEJO WAY UNIT # \_\_\_\_\_ CONTRACT PRICE \$ F.B.O.

CONTACT PERSON: BRUCE WHITEHAM AIR  CONTACT PHONE: 916-884-1625

Property Owner: LARRY & SHARON TORRES License # \_\_\_\_\_  
Address: 950 VALLEJO WAY Address: F.B.O.  
City/State/Zip: SAC CA 95819 City/State/Zip: F.B.O.  
Phone: 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 <b># SQUARES:</b> 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 TERMITE 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:**

CC  
CHANGE  
10/19/02  
16:58  
LAN CK - RESTO L  
#366, 35  
04  
2:06  
SHT RES  
#30  
#0.00

**Certification of Compliance**  
School District Development

**Part I - To be completed by the APPLICANT**

Owner's Name/Address Morris, LARRY AND SHERRI  
 Project Address 956 VALLEJO WAY SACRAMENTO CA 95818  
 Parcel Number 012-0101-014-0000 Lot No. 62  
 Subdivision Name SWANSTON PALMS No. of Units 1  
 Applicant's Signature [Signature] Title OWNER  
 Phone No. 916-501-3528 Date 01-23-06

**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 cost 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 II - To be completed by the BUILDING DEPARTMENT**

Plan Identification Number ~~05-16587~~ 05-16587  
 Building Type (check one):  Residential  Apartment/Condominium  Commercial/Industrial  
 Square Feet of Chargeable Building Area 861 sq ft  
 Signature/Title [Signature] JI 2 Date 11-08-05

**Part III - To be completed by the SCHOOL DISTRICT**

School District CLUSD Certificate No. 11134

Exempt Comments \_\_\_\_\_  
 Residential/Apartment/etc. 861 Square ft. x \$ 5.41 = \$ 4658.11  
 Commercial/Industrial 0 Square ft. x \$ 0 = \$ 0  
 Total fees collected OK 2750 12/14 = \$ 4658.11

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage on this project will require an amendment to the Certificate of Compliance.

As the authorized school 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.

Signature [Signature] Date 1/23/06

White - County School District • Pink - Building Department • Goldenrod - Applicant

**N**orman

**S**cheel

**S**tructural

**E**ngineer

5022 Sunrise Blvd.  
Fair Oaks, CA 95628  
(916) 536-9585  
(916) 536-0260 (fax)

**Norman Scheel**  
Structural Engineer  
E-mail: [norm@nsse.com](mailto:norm@nsse.com)

**Rob Coon**  
General Manager  
E-mail: [robcoon@nsse.com](mailto:robcoon@nsse.com)

**Brad Moser, P.E.**  
Project Manager  
E-mail: [brad@nsse.com](mailto:brad@nsse.com)

**Steve Smith**  
Design Engineer  
E-mail: [stevesmith@nsse.com](mailto:stevesmith@nsse.com)

**Steven Cooksey**  
CAD Supervisor  
E-mail: [steve@nsse.com](mailto:steve@nsse.com)

**Jeff Marchant, P.E.**  
Design Engineer  
E-mail: [jeff@nsse.com](mailto:jeff@nsse.com)

**Jamie Hires**  
Design Engineer  
E-mail: [jamie@nsse.com](mailto:jamie@nsse.com)

December 16, 2005


Whitelam & Whitelam Architects  
2120 20<sup>th</sup> Street  
Sacramento, CA 95818

Re: **Morris Residence (Job #25346)**  
**Plan Check**

**Item #/Response**

1. Architect to respond.
2. See revised plans for requested information.
3. See revised plans for requested information.
4. Architect to respond.
5. Splice details are provided on sheet SN-2.
6. Straps have been added where required.
7. See revised calculation package and plans for requested information.
8. A 15"x18" continuous footing has been called out on sheet A5.
9. A note on sheet A5 requires footing size verification.
10. All required footings are shown on the plans
11. See revised calculation package and plans for steel beam information.
12. Builder to respond.
13. Architect to respond.
14. Architect to respond.

If you have any questions please contact Brad Moser.

  
Norman Scheel  
Structural Engineer

BM:bm

Enclosure: Repair detail

CITY OF SACRAMENTO  
NORTH PERMIT  
CENTER

JAN 06 2006

**RECEIVED**



DEC 16 2005



2101 Arena Blvd. #200  
Sacramento, CA 95834  
916-808-2534  
FAX: 916-808-7046

**CITY OF SACRAMENTO**  
CALIFORNIA  
Department of Neighborhood  
Planning and Development Services

1231 I Street, Room 200  
Sacramento, CA 95814  
916-264-7619  
FAX: 916-264-7046

Development Services Division

**EXHIBIT 1**

I have read and am familiar with the contents of the City's Standard Owner-Builder Notification and Owner-Builder Verification, as required by California Health and Safety Code Section 19830 and 19831. I authorize my agent(s) Lynne Robustelli to sign the Owner-Builder Verification on my behalf.

Signature Sherril C. Morris  
Print Name Sherril C. Morris  
Address 9500 Valley Way  
SACRAMENTO CA 95818  
Telephone (916) 501-9373

City of Sacramento  
U: forms/counter/Authorization to Sign

CITY OF SACRAMENTO  
NORTH PERMIT  
CENTER

FEB 22 2006

**RECEIVED**



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

OWNER BUILDER VERIFICATION

1. Check one below - I or my immediate family (parent, spouse, or child) will perform:

- A - [ ] all the work authorized by this permit.
B - [X] a portion of the work.
C - [ ] none of the work.

If B or C is checked, complete 2 or 3 below.

2. A State licensed contractor (\*) will be hired to do:

- [ ] all of the authorized work. [ ] a portion of the authorized work.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Type of Work \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Type of Work \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Type of Work \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Type of Work \_\_\_\_\_

3. [ ] I will utilize unlicensed person(s) other than my immediate family to perform all or portions of the authorized work. A Certificate of Workers Compensation must be on file at this office.

I declare under penalty of perjury that the above is true and correct. I have read and understand the owner-builder information on the reverse side of this form.

Signed: Property Owner LYNNE ROUSTEVI (Printed name) Lynne Roustevi for Larry Sherri Morris (Signature)

Date February 22, 2008 Case No. \_\_\_\_\_ Permit No. 0516587

Job Address 956 VALLEJO WAY

Note: \* Information regarding unknown contractors or change in subcontractors shall be submitted to the Building Inspection field office.