



RECORD CARD - BUILDING INSPECTIONS DIVISION - CITY OF SACRAMENTO, CALIFORNIA

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
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| PROPERTY PARCEL NO.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | JOB ADDRESS           |  | 1461 London Street       |  | INSPECTION AREA |  | A-3              |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| LEGAL DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  | OCCUP. GR.            |  | CONST TYPE               |  | VAR. NO.        |  | FIRE ZONE        |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| TITLE AND NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | ADDRESS               |  | ZIP                      |  | CITY LIC. NO.   |  | TEL. NO.         |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| GEN. CONTR.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | ELEC. CONTR.          |  | PLBG. CONTR.             |  | MECH. CONTR.    |  | ARCH. ENGR.      |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| OWNER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  | CONST. LOAN LENDER    |  | CERTIFICATE OF OCCUPANCY |  | ISSUED BY       |  | DATE             |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| BLDG. WIDTH                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  | BLDG. LENGTH          |  | TOTAL HEIGHT             |  | NO. OF STORIES  |  | ROOF CONSTR.     |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| AREA 1st FLOOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | TOTAL AREA            |  | C.S.D.                   |  | C.I. CASE       |  | CENSUS TRCT. NO. |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| SIDE YARDS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | REAR YARDS            |  | SET BACK REQ.            |  | USE ZONE        |  | PARK'G REQ.      |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| SPACES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  | TREES RMVD.           |  | EXISTING BLDG'S SAME LOT |  | HOW USED        |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| NATURE OF WORK:-                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
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| ISSUANCE DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | PLANS AND APPLICATION |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| VALUATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | INSPECTION RECORD     |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| R.U.F. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | JOB FILE              |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| S.M.I. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| PLAN CK. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| SEWER INCL. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| PERMIT FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| TOTAL FEES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
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| ISSUED BY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | MICROFILM RECORD      |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| ISSUANCE DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  | PLANS AND APPLICATION |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| VALUATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | INSPECTION RECORD     |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| R.U.F. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | JOB FILE              |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| S.M.I. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| PLAN CK. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| SEWER INCL. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| PERMIT FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| TOTAL FEES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2">PERMIT NO. S.P.</td> <td colspan="2">MICROFILM RECORD</td> <td colspan="2">REEL NO.</td> <td colspan="2">FRAME NO.</td> <td colspan="2">TO</td> </tr> <tr> <td colspan="2">ISSUED BY</td> <td colspan="2">PLANS AND APPLICATION</td> <td colspan="2">REEL NO.</td> <td colspan="2">FRAME NO.</td> <td colspan="2">TO</td> </tr> <tr> <td colspan="2">VALUATION</td> <td colspan="2">INSPECTION RECORD</td> <td colspan="2">REEL NO.</td> <td colspan="2">FRAME NO.</td> <td colspan="2">TO</td> </tr> <tr> <td colspan="2">R.U.F. FEE</td> <td colspan="2">JOB FILE</td> <td colspan="2">REEL NO.</td> <td colspan="2">FRAME NO.</td> <td colspan="2">TO</td> </tr> <tr> <td colspan="2">S.M.I. FEE</td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">PLAN CK. FEE</td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">SEWER INCL. FEE</td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">PERMIT FEE</td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> <tr> <td colspan="2">TOTAL FEES</td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> </tr> </table> |  |                       |  |                          |  |                 |  |                  |  | PERMIT NO. S.P. |  | MICROFILM RECORD      |  | REEL NO. |  | FRAME NO. |  | TO |  | ISSUED BY     |  | PLANS AND APPLICATION |  | REEL NO. |  | FRAME NO. |  | TO |  | VALUATION  |  | INSPECTION RECORD |  | REEL NO. |  | FRAME NO. |  | TO |  | R.U.F. FEE |  | JOB FILE |  | REEL NO. |  | FRAME NO. |  | TO |  | S.M.I. FEE   |  |  |  |  |  |  |  |  |  | PLAN CK. FEE    |  |  |  |  |  |  |  |  |  | SEWER INCL. FEE |  |  |  |  |  |  |  |  |  | PERMIT FEE |  |  |  |  |  |  |  |  |  | TOTAL FEES |  |  |  |  |  |  |  |  |  |
| PERMIT NO. S.P.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  | MICROFILM RECORD      |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| ISSUED BY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | PLANS AND APPLICATION |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| VALUATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  | INSPECTION RECORD     |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| R.U.F. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | JOB FILE              |  | REEL NO.                 |  | FRAME NO.       |  | TO               |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| S.M.I. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| PLAN CK. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| SEWER INCL. FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| PERMIT FEE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| TOTAL FEES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |
| REMARKS AND/OR VARIANCES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                       |  |                          |  |                 |  |                  |  |                 |  |                       |  |          |  |           |  |    |  |               |  |                       |  |          |  |           |  |    |  |            |  |                   |  |          |  |           |  |    |  |            |  |          |  |          |  |           |  |    |  |              |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |                 |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |            |  |  |  |  |  |  |  |  |  |