

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0109414
Insp Area: 3

Site Address: 5571 79TH ST SAC
Parcel No: 023-0303-015

Sub-Type: RES
Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

CESAR CASTANEDA
5571 79TH ST
SACRAMENTO CA 95820

Nature of Work: INSTALLATION OF PULL ALARM AND INTER-COMMUNICATING SMOKE ALARM SYSTEMS FOR FAMILY RESIDENTIAL FACILITY

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. 8097, 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 is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant shall be subject to the penalties of 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 07/24/01 Owner Signature _____

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed does not violate any law or private agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

I certify that I have read this application and state that all information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative(s) of this city to enter upon the above-mentioned property for inspection purposes.

Date 07/24/01 Applicant/Agent Signature _____

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier _____ Policy Number _____ Exp Date _____

(This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

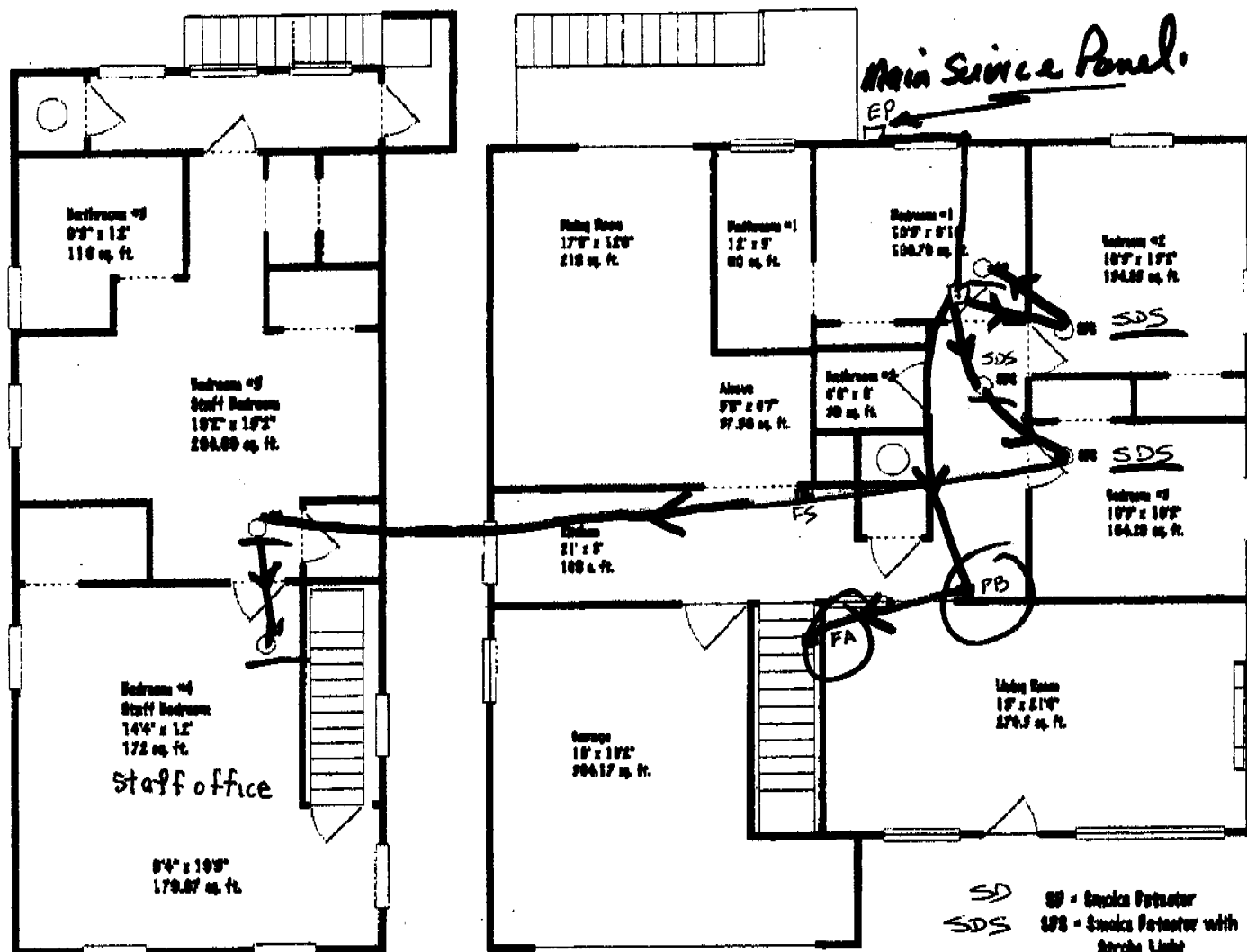
Date 07/24/01 Applicant Signature _____

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

Atkinson Youth Services Group Home VI 5571 79th Street Sacramento, CA 95820

EGRESS OR RESCUE WINDOWS FROM SLEEPING ROOMS SHALL HAVE A MINIMUM NET CLEAR OPENING OF 5.7 SQUARE FEET. THE MINIMUM NET CLEAR OPENING HEIGHT DIMENSION SHALL BE 24 INCHES. THE MINIMUM NET CLEAR OPENING WIDTH DIMENSION SHALL BE 20 INCHES. WHERE WINDOWS ARE PROVIDED AS A MEANS OF EGRESS OR RESCUE THEY SHALL HAVE A FINISHED SILL HEIGHT NOT MORE THAN 44 INCHES ABOVE THE FLOOR.



2ND Story

The approval of all
Electrical work is subject to final
inspections

1ST Story

SD - Smoke Detector
SDS - Smoke Detector with Strobes
PB - Pull Box
FA - Fire Alarm

EP - ELECTRICAL PANEL
J - Junction Box
FS - FIRE EXTINGUISHER

APPROVED
Al Davis 7/24/01
Sacramento Fire Department
PENDING FIELD INSPECTION

provide CSPM listing sheets for inspectors

APPROVED PER 1996
NATIONAL ELECTRICAL CODE
AND CITY OF SACRAMENTO
AGREEMENT
T.L.M. 7-24-2001
ELECTRICAL DIVISION

Date of Request: _____

By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 5571 79th St

Assessor's Parcel Number: 023-0303-015

Previous Use: exist. S.F.R.

Description of Request/Proposed Use: bdy permit for interior work to establish Family Care Facility

Is This a Change of Use? YES

Prior Applications for Project Site(P#, Z#, DRPB#): N/A Zoning Designation: R-1

Comments: Family Care Facility, by definition for six individuals or fewer, allowed in the zone w/o Planning approval. An auxiliary clients

Are There Any Planning Issues?: (circle one) YES NO

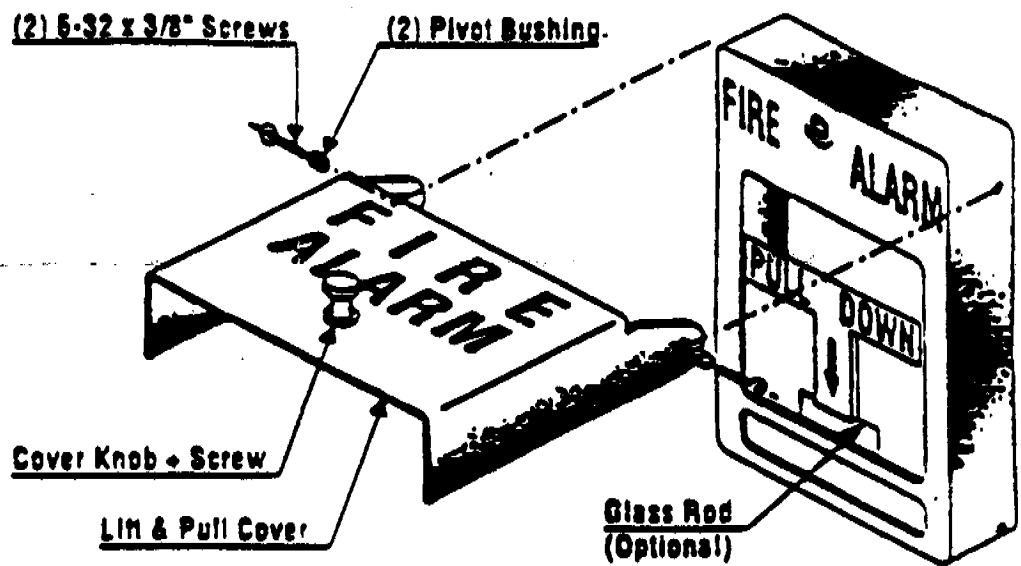
- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: PHIL REED 7/23/01

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

MICROFILM AFTER FINAL

Installation and Service



ELECTRICAL BOX DIMENSIONS:

STANDARD: 1-1/2"D X 3-1/4"W X 4-7/8"L
SPECIAL: 2-1/4"D X 3-1/4"W X 4-7/8"L

Installers Note:

The stations are supplied with glass rod removed. It is recommended that the station be activated and tested prior to installation of the glass rod.

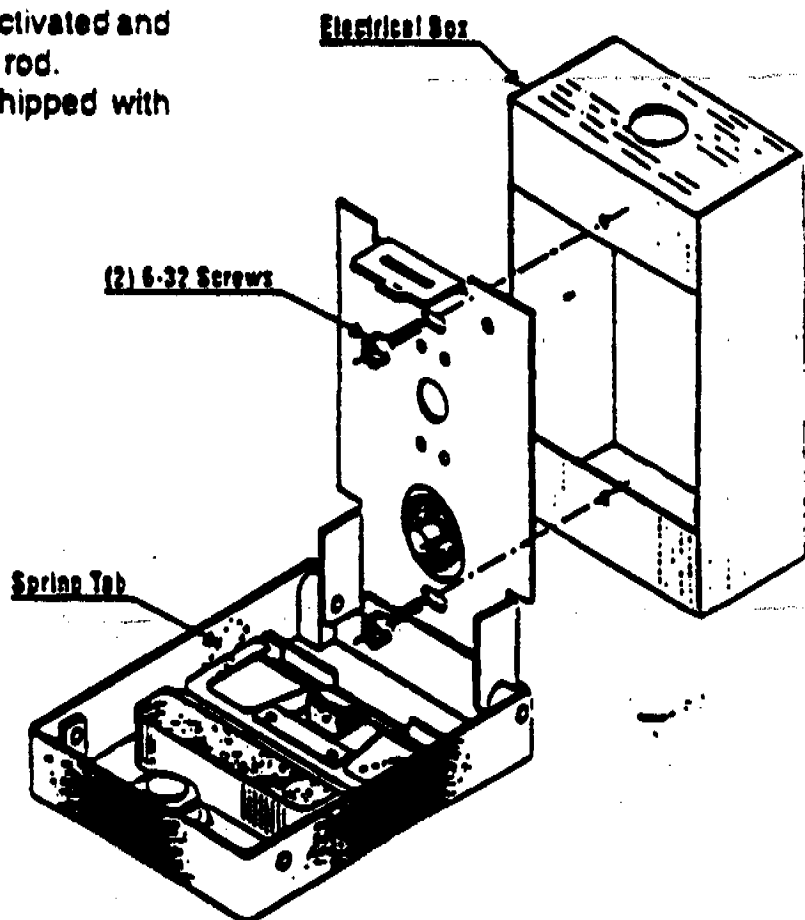
- Glass Rods and Hardware are shipped with station in box.

Replacement of Glass Rod:

If broken, remove debris, then reset T-Handle to Normal Position. Insert one end of new Glass Rod under Spring Tab, then with one finger, lift other end of Spring Tab allowing Glass Rod to slip into place.

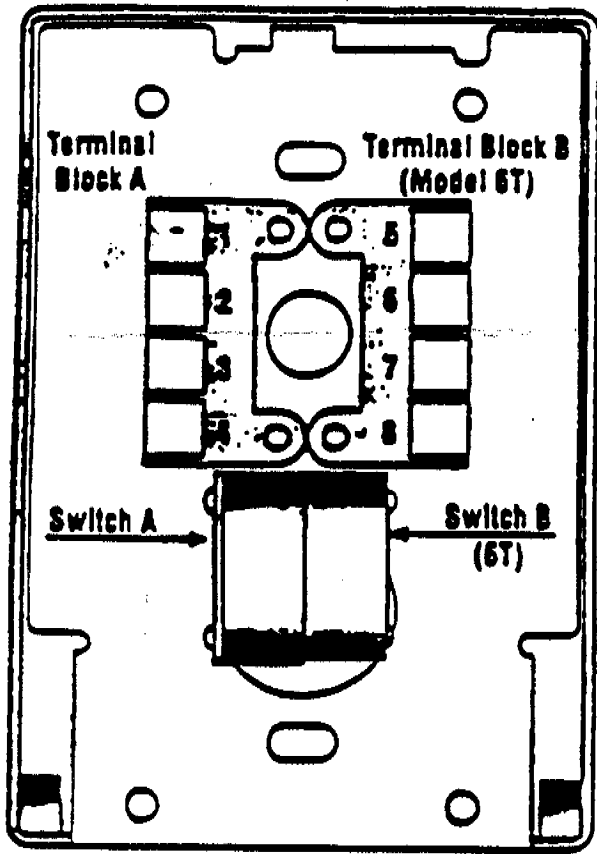
To Close Station:

If hex Screw Model, simply push station closed.
If Key Lock Model, hold station closed then turn key counterclockwise.

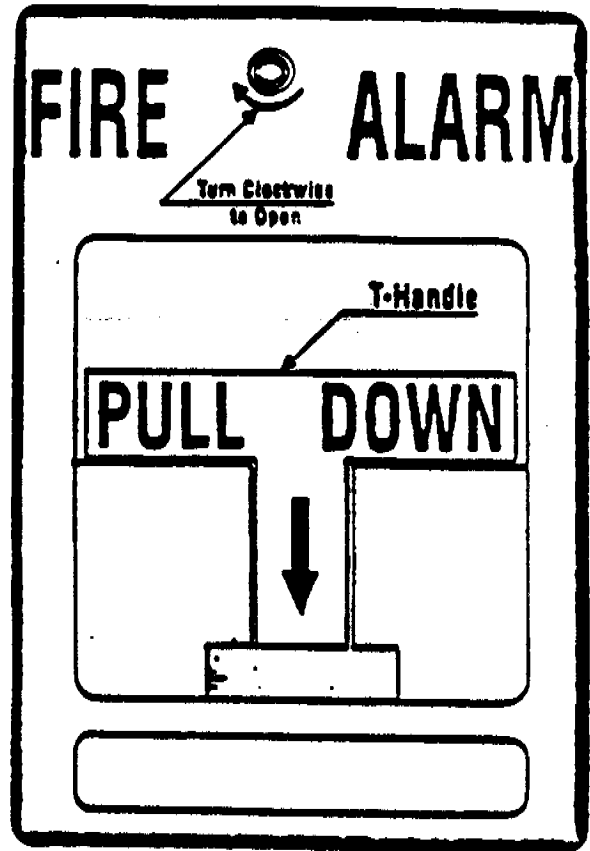


Wiring Instructions on Reverse Side

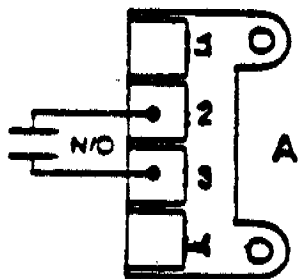
Rear View



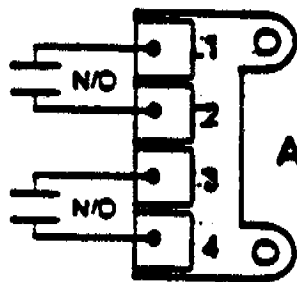
Front View



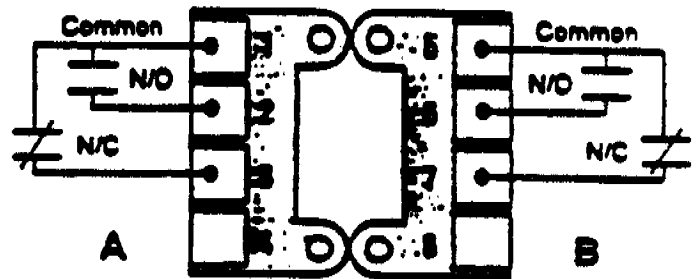
Electrical Wiring



Model 1T
SPST N/O



Model 2T
DPST N/O



Model 6T
DPST N/O - N/C - COM

Model	Terminal Block	Terminal Connecting	Switch Function	Terminal Connections			Contact Rating
				LED	Switch	Phone Jack	
1P	None	None	SPST	Leads	Leads	Leads	10 amp @125 vac
1T	A	2 & 3	SPST	1(-) & 4(-)	1 & 4	1 & 4	10 amp @125 vac
2T	A	1&2 - 3&4	DPST	5(-) & 6(-)	5 & 6	5 & 6	10 amp @125 vac
3T	A	1, 2, & 3	SPDT	5(-) & 6(-)	5 & 6	5 & 6	10 amp @125 vac
6T	A & B	1, 2, 3, 5, 6, 7	DPDT	4(-) & 8(-)	4 & 8	4 & 8	10 amp @125 vac

Phone Jack: 1/4 • Key Switch: 3Amp@125Vac • Led: T1-3/4@24Vdc

Note: all contact ratings shown apply to closed station

Mounting Instructions on Reverse Side

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 7-31-01

**FROM: Troy Malaspino
Fire Marshal**

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

5571 79² STREET

Has been conducted by Inspector

H. Coole

On

7-30-01

01-09414

Permit Number

Square Footage

Fire Alarm

Type of Inspection

They system is acceptable by this department.



By: Ross L. Woodman,
Fire Prevention Officer II

01-160
F.D. Reference Number