CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Site Address: 120 CAFARO CR SAC

225-1230-055 Parcel No:

CONTRACTOR

R A L. BUILDERS

<u>OWNER</u> JOSLIN 120 CAFARO CR

1.618 FAIR OAKS BL SUITE 110 FAIR OAKS, CA 95628 SAC CA. 95834

Nature of Work: PATIO COVER 324 SF

Permit No: 4 Insp Area: Sub-Type: **NOTHR**

Housing (Y/N): N

0100503

ARCHITECT

CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury the	nat there is a construction lending agency for the performance
of the work for which this permit is issued (Sec. 3097, Civ. C).	
l ender's NameLender's Address	
LICENSED CONTRACTORS DECLARATION: 1 hereby affirm under penalty of commencing with section 7000) of Division 3 of the Business and Professions Code and my	ncense is in turn rouge and effects
License Class License Number 774 A Date 1/-0/ Co	
OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury to following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires structure, prior to its issuance, also requires the applicant for such permit to file a signed of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 penalty of not more than five hundred dollars (\$500.00);	statement that he or she is licensed pursuant to the provisions of the Business and Professions Code) or that he or she is
I, as a owner of the property, or my employees with wages as their sole compensation for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does thereon, and who does such work himself or herself or through his/her own employees, prosale. If, however, the building or improvement is sold within one year of completion, the onot build or improve for the purpose of sale.)	vided that such improvements are not intended or offered for
1, as owner of the property, am exclusively contracting with licensed contractors to Code: The Contractors License Law does not apply to an owner of property who builds or contractor(s) licensed pursuant to the Contractors License Law)	improves thereon, and who contracts for such projects with a
Tam exempt under Sec. B & PC for this reason: Date Owner Signature	
Date Owner Signature	
IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on all measurements and locations shown on the application or accompanying drawings and that or private agreement relating to permissible or prohibited locations for such improvements. any improvement or the violation of any private agreement relating to location of improvement.	the representation of the applicant, that the applicant verified at the improvement to be constructed does not violate any law. This building permit does not authorize any illegal location of ints.
I certify that I have read this application and state that all information is correct. I agree to relating to building construction and herby authorize representative(s) of this city to enter upon the construction and the construction are constructed as a construction and the construction and the construction are constructed as a construction and the construction are constructed as a construction and the construction and the construction are constructed as a construction are constructed as a construction and the construction are constructed as a construction and the construction are constructed as a	to comply with all city and county ordinances and state laws on the abovementioned property for inspection purposes.
Date / / / C / Applicant/Agent Signature	
WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of the performance of work for which the permit is issued.	ion as provided for by Section 3700 of the Labor Code, for the
I have and will maintain workers' compensation insurance, as required by Section 3 which this permit is issued. My workers' compensation insurance carrier and policy number.	1700 of the Labor Code, for the performance of the work for are:
Carrier FARMERS INSURANCE GROUP Policy Number A051	10574 Exp Date 12/08/2001
(This section need not be completed if the permit is for \$100 or less) I certify that it shall not employ any person in any manner so as to become subject to the workers compensation provisions of Section 3700 of the Cabor Code. I shall for	ensation laws of California and agree that it I should become
Date /- (- () Applicant Signature Class	4 W/
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNION COMPENSATION. DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR	DOLLARS (\$100,000) IN ADDITION TO THE COST OF

Date of Request:	
Ву:	-

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION PLANNING AND ZONING INFORMATION REQUEST

Project Address: 120 CA FARO CIR
Assessor's Parcel Number: 225-1230-055
Previous Use: Existing bouse
Description of Request/Proposed Use: Relis PATIO COVER
Is This a Change of Use?
Zoning Designation: RIPDU Prior Applications for Project Site(P#, Z#, DRPB#): NONE
Comments: EXPANDED NORTH DESIGN REVIEW, NOT
IN VIEW FROM PUBLIC STREETS MEETS
LET BACKS AND LOT COVERAGES
Are There Any Planning Issues?: (circle one) YES
* Staff Site Plan Check Required? (Circle one) * Field Inspection Required? (Circle one) * Design Review/Preservation Required?: (Circle one) YES (TO) YES (TO) YES (TO)
Planning Review by/Date: When You 1-11-01
the state of this form

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

MICROFILM AFTER FINAL