

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No:** 0412530  
**Insp Area:** 2  
**Thos Bros:** 337G4

**Site Address:** 137 CREEKSIDE CR SAC  
**Parcel No:** 119-0460-018 **CREEKSIDE PARK LOT 35**

**Sub-Type:** NSFR  
**Housing (Y/N):** N

**CONTRACTOR**  
ALEKSANDR KOVALEV CONSTRUCTION  
11433 SE IDYLLWILD CT  
CLACKAMOAS OR 97015

**OWNER**  
SACRAMENTO CA  
95823

**ARCHITECT**  
CREEKSIDE INVESTMENT CORP

**Nature of Work:** NEW 1888 SQ FT SFR W/484 SQ FT GARAGE, 2 STORY --FLOOD ZONE ELEVATION CERT REQUIRED--

**CONSTRUCTION LENDING AGENCY:** I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name \_\_\_\_\_ Lender's Address \_\_\_\_\_

**LICENSED CONTRACTORS DECLARATION:** I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class B License Number 815512 Date \_\_\_\_\_ Contractor Signature \_\_\_\_\_

**OWNER-BUILDER DECLARATION:** I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00);

\_\_\_\_\_, I, as a owner of the property, or my employees with wages as their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professional Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his/her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for the purpose of sale.)

\_\_\_\_\_, I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

\_\_\_\_\_, I am exempt under Sec. \_\_\_\_\_ B & PC for this reason: \_\_\_\_\_

Date \_\_\_\_\_ 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 abovementioned property for inspection purposes.

Date \_\_\_\_\_ 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 \_\_\_\_\_ 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.**

FEDERAL EMERGENCY MANAGEMENT AGENCY  
NATIONAL FLOOD INSURANCE PROGRAM  
**ELEVATION CERTIFICATE**

O.M.B. No. 3067-0077  
Expires December 31, 2005

Important: Read the instructions on pages 1-7.  
**SECTION A - PROPERTY OWNER INFORMATION**

BUILDING OWNER'S NAME <b>EMMITT LEWIS</b>		For Insurance Company Use:	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. CREEKSIDE CIRCLE		Policy Number	
CITY SACRAMENTO		Company NAIC Number	
STATE CA		ZIP CODE 95823	
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) LOT 35, APN 119-0460-018			
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) RESIDENTIAL			
LATITUDE/LONGITUDE (OPTIONAL) (##°-##'-##"##" or ##.####°)		SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____	
HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983			

**SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION**

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER CITY OF SACRAMENTO 060266		B2. COUNTY NAME SACRAMENTO		B3. STATE CA	
B4. MAP AND PANEL NUMBER 060266-0030	B5. SUFFIX F	B6. FIRM INDEX DATE JULY 6, 98	B7. FIRM PANEL EFFECTIVE/REVISED DATE JULY 6, 98	B8. FLOOD ZONE(S) AH	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 17.00
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9. <input type="checkbox"/> FIS Profile <input checked="" type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe): _____					
B11. Indicate the elevation datum used for the BFE in B9: <input checked="" type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe): _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Designation Date _____					

**SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)**

C1. Building elevations are based on:  Construction Drawings\*  Building Under Construction\*  Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

Complete items C3.-a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum NGVD 1929 Conversion/Comments \_\_\_\_\_

Elevation reference mark used 337-HAC Does the elevation reference mark used appear on the FIRM?  Yes  No

- o a) Top of bottom floor (including basement or enclosure) 18. 64 ft.(m)
- o b) Top of next higher floor N/A. ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) N/A. ft.(m)
- o d) Attached garage (top of slab) 16. 30 ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 18. 23 ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 15. 70 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 16.0. 0 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 8
- o i) Total area of all permanent openings (flood vents) in C3.h 567 sq. in. (sq. cm)

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION**

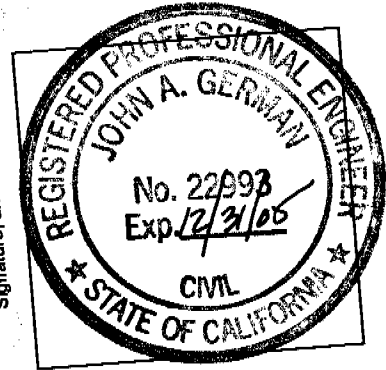
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.  
I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.  
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.  
LICENSE NUMBER RCE22993

CERTIFIER'S NAME **JOHN A. GERMAN** COMPANY NAME **GERMAN ENGINEERING**

TITLE **CIVIL ENGINEER** CITY **SACRAMENTO** STATE **CA** ZIP CODE **95818**

ADDRESS **3000 FRANKLIN BLVD** DATE **01-24-05** TELEPHONE **916-455-3000**

SIGNATURE *John A. German*



License Number, Embossed Seal, Signature, and Date

The p issued PROPE  
ADDRE:  
SIGNATL  
COMMEN

The local official Certificate. Com  
G1.  The info or local k  
G2.  A commu  
G3.  The follow

G4. PERMIT NUME

G7. This permit has l  
G8. Elevation of as-b  
G9. BFE or (in Zone A

LOCAL OFFICIAL'S:  
COMMUNITY NAME  
SIGNATURE  
COMMENTS

Check here if attachments

ABC INSULATION & SUPPLY CO.  
 11386 AMALGAM WAY  
 RANCHO CORDOVA, CA 95670  
 Phone (916) 635-7171  
 Fax (916) 635-7717  
 State License No. 369263

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATIONS, CALIFORNIA ADMINISTRATIVE CODE, TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

LOT# \_\_\_\_\_ TRACT \_\_\_\_\_  
 STREET 137 Creekside Cir CITY Sacramento

**EXTERIOR WALLS:**

Manufacturer: Certainteed Thickness 6 1/4" R Value R(2x6)

**CEILING:**

Batts Manufacturer: Knaufl Thickness 12" R Value 38

Blown In Manufacturer: Certainteed Thickness 10" R Value 30

Blown In Manufacturer: Greenfiber Thickness 10.3" R Value 38

Square footage covered 757

Garage ceiling - living space above  
 Manufacturer: Certainteed Thickness 6 1/4" R Value 17

**FLOORS:**

Manufacturer: N/A Thickness \_\_\_\_\_ R Value \_\_\_\_\_

**POLYSEAL/CAULK PER TITLE 24:** Yes

GENERAL CONTRACTOR \_\_\_\_\_  
 CALIFORNIA CONTRACTORS LICENSE # \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

INSULATION CONTRACTOR ABC INSULATION & SUPPLY CO. DATE 1-21-05  
Bob Plunk Office Manager  
 SIGNATURE TITLE