

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0601680

Insp Area: 4

Thos Bros: 257J6

Site Address: 1129 VINCI AV SAC

Parcel No: 226-0080-030

Sub-Type: ASFR

Housing (Y/N): N

CONTRACTOR

OWNER

FRANCIS RICHARD  
1129 VINCI AV  
SACRAMENTO, CA 95838

ARCHITECT

Nature of Work: ADDITION 290 SQ FT LIVING

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

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

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

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

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

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

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

I am exempt under Sec. \_\_\_\_\_ B & PC for this reason: \_\_\_\_\_  
Date 3-15-06 Owner Signature Paul Francis

CITY OF SACRAMENTO  
MAR 15 2006

**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 3-15-06 Applicant/Agent Signature Paul Francis

**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 3-15-06 Applicant Signature Paul Francis

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.

**OWNER BUILDER VERIFICATION**

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

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

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

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

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

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

Address \_\_\_\_\_

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

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

Address \_\_\_\_\_

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

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

Address \_\_\_\_\_

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

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

Address \_\_\_\_\_

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

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

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

Signed: Property Owner Rich Francis , Rich Francis  
(Printed name) (Signature)

Date 3-15-06 Case No. \_\_\_\_\_ Permit No. 0601680

Job Address 1129 Vinci Av Sac CA 95838

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

**MICROFILM AT FINAL**

PD: 02/08/2006 043 LP#  
DATE: 02/08/2006 12:52PM 00001201  
PMT#: 0601680 SHF RES BLD PT  
0204PLAN CK-RESID'L \$132.00  
CC \$132.00  
CHANGE \$0.00

\*\*\*DUPLICATE\*\*\*



### SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

PARCEL # 226 - 0080 - 030 PERMIT # 0601680  
SITE ADDRESS 1129 VINCI AV ACREAGE \_\_\_\_\_

The City of Sacramento requires a building site to be graded to drain correctly and site drainage routed to an approved location. To help us understand the site drainage for your project and determine if a driveway permit or an encroachment permit is required please answer the following questions. All questions must be answered.

1. Are there existing structures on the site?
2. Is there an existing concrete or paved driveway to this parcel from the street?
3. Will the existing access to this parcel be changed in any way for this project?
4. Are all portions of the lot higher than the crown of the street?
5. Are all portions of the lot higher than the back of the sidewalk?
6. Is there a curb and gutter at the street level?
7. Is there a sidewalk with a curb and gutter at the street?
8. Is the curb at the street square?
9. Is there a rolled curb at the street?
10. Is there a drainage ditch or culvert at the street?
11. Does the lot drain from back to front?
12. Does the lot drain from front to rear?
13. Does another lot drain across this parcel?
14. Does the lot drain from side to side?
15. Does the site have an existing low area or drainage swale?
16. Does the drainage swale drain to an adjacent parcel?
17. Does the drainage swale drain to the street?
18. Will existing drainage be re-routed?
19. Will drainage ditches or culverts be constructed or modified?
20. Did this project require approval from the Zoning Administrator?
21. Did the project require approval from the Planning Administrator?

Y     N  
 Y     \*N  
 \*Y     N  
 Y     \*N  
 Y     \*N  
 \*Y     N  
 \*Y     N  
 \*Y     N    N/A  
 Y     N    N/A  
 Y     \*N    N/A  
 Y     \*N  
 Y     \*N  
 \*Y     N  
 \*Y     N  
 \*Y     N    N/A  
 Y     \*N    N/A  
 \*Y     N  
 \*Y     N    N/A  
 \*Y     N  
 \*Y     N

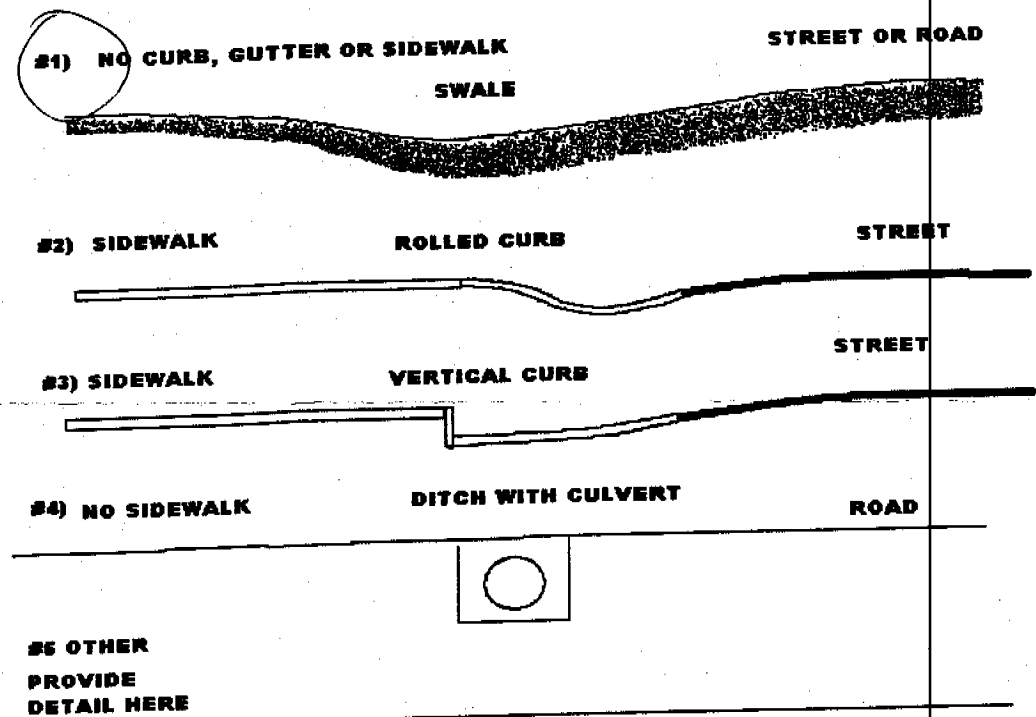
CITY OF SACRAMENTO  
NORTH PERMIT  
CENTER

MAR 08 2006

**RECEIVED**

- 22. Is there any tree, telephone pole, guy wire or similar obstruction located at the front of the property adjacent to the street or road? \*Y  N
- 23. Is this a corner lot? \*Y  N
- 24. Is the posted speed limit on this street greater than 25 MPH? \*Y  N
- 25. Is this parcel located on a four-lane street? \*Y  N
- 26. If site is greater than 1/2 acre has an erosion and sediment control plan been submitted? Y  N  N/A
- 27. If site disturbs 1 acre or more has a copy of the State General Permit NOI and SWPPP been submitted? Y  N  N/A
- 28. If site is part of a larger subdivision greater than 1 acre has a copy of the State General Permit NOI and SWPPP been submitted? Y  N  N/A

**CIRCLE THE DRAWING NUMBER BELOW THAT BEST ILLUSTRATES THE EXISTING CONDITION AT THE LOCATION OF THE PROPOSED DRIVEWAY OR SITE ACCESS.**



*PROJECT IS ON BACK SIDE OF EXISTING HOME*

The information provided on this document is accurate. I understand that if this form is incomplete, contains inaccurate or misleading information, the project located at this address may be delayed until any drainage or encroachment issues are resolved to the satisfaction of the City of Sacramento.

SIGNED *Pat Francis* DATE 3-8-06

TITLE \_\_\_\_\_

PHONE NO. 916-835-8098

City of Sacramento  
Development Services Department  
**PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL**

ADDRESS: 1129 VINCI AVE	APN: 226-0080-030
DRPB AREA / PUD / SPD: EXPANDED NORTH AREA D/R	ZONING: R-1
EXISTING LAND USE: RSF	
PROPOSED USE: RSF WITH NEW 290 SQ FT ADDITION	
<b>PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:</b>	
<input type="checkbox"/>	Planning review is NOT required.
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.
<input type="checkbox"/>	Requires APPLICATION(s): PC      ZA      IR      ER      DR      PB Required Planning application must be approved before project can be submitted for plan check
<input type="checkbox"/>	Application(s) IN PROGRESS: File Number: Application must be approved before project can be submitted for plan check.
<input type="checkbox"/>	Application(s) COMPLETED: File Number & approval date: Building permit must be based on approved plans and comply with all conditions of approval. Do NOT accept applications for a building permit prior to the end of the 10-day appeal period.
<input checked="" type="checkbox"/>	Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards prior to issuance of building permit.
<input checked="" type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input checked="" type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.
<input type="checkbox"/>	Route to SITE for plan check and inspection.
<input type="checkbox"/>	Route to SITE for inspection only, plan check not required.
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
CONDITIONS AND COMMENTS:	LOT SIZE = 21,780 SQ FT, EXISTING HOUSE = 1,729 SQ FT, PROPOSED NEW ADDITION = 290 SQ FT. 2,019/21,780 = 9 % LOT COVERAGE. MEETS ALL SETBACKS AS SHOWN ON SITE PLAN. NO PREVIOUS PLANNING ENTITLEMENTS APPARENT.
DATE: FEBRUARY 8, 2006	BY: DAN WATERS



**CITY OF SACRAMENTO**

www.cityofsacramento.org

Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT  
Inspection Request: 1-916-808-7622

New City Hall  
915 I Street, 3rd Floor  
Sacramento, CA 95814

North Permit Center  
2101 Arena Blvd., Suite 200  
Sacramento, CA 95834

Fax # 916-264-1901

**MINOR PERMIT APPLICATION**

Date: \_\_\_\_\_

*Faxed/web request must be received in this office by 3:00 P.M. to be processed the following workday. Contractors must have a current certificate of Worker's Compensation Insurance. Note: Work started before a Building Permit is issued will be subject to quad fee.*

**Permits requiring Plan Review are not eligible for the MINOR PERMIT PROGRAM**

*Design Review and Historic Preservation approval may be required if job address is located in those areas (additional forms may be required).*

**IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDED:**

Bldg Type:  RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (limited)  
Unit # \_\_\_\_\_ Contract Price \_\_\_\_\_

Job Address: 1129 Kissel Dr  
CONTACT INFO Name: Rich Francis Phone #: \_\_\_\_\_ Email: \_\_\_\_\_  
Property Owner: Rich Francis Contractor: \_\_\_\_\_ License #: \_\_\_\_\_  
Address: 1129 VINCI AVE Address: \_\_\_\_\_  
City/State/Zip: SAC, CA 95838 City/State/Zip: \_\_\_\_\_  
Phone: 916-991-8561 386-0115 Fax: \_\_\_\_\_  
Pre-Registered? YES NO Registration # \_\_\_\_\_

Nature of Work: Provide description of work & indicate type of work in selections below.

Description of Work: 290 SQ FT ADDITION off BACKSIDE of HOME

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: _____ # Squares: _____ Material: _____ <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco	<input type="checkbox"/> HVAC Installations (Residential Only) <input type="checkbox"/> Change-out <input type="checkbox"/> New <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: \$ _____ Equipment: \$ _____ Cut-in: \$ _____	<input type="checkbox"/> Water Heater (Residential Only) <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> Dry Rot or Termite Damage Repair <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Mud sill/Studs <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior	<input type="checkbox"/> Minor Electric and/or Plumbing (Residential Only) <input type="checkbox"/> Electric Service Change # amps _____ <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Water Service Replacement <input type="checkbox"/> Sewer Service Replacement <input type="checkbox"/> Gas Line Replacement <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> Public Utilities Safety Inspection (Residential and single apartment units Only) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E * NOTE * Correction Notice items will require an additional building permit.
<b>Office Use Only:</b> Parcel #: _____ Date Received: _____ Date Issued: _____		Processor's Initials: _____ Permit #: _____		