

CITY OF SACRAMENTO

Permit No: 0109664

1231 I Street, Sacramento, CA 95814

Insp Area: 2
Thos Bros: 336F2

Site Address: 9 ALSTAN CT SAC
Parcel No: 031-0860-054

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

CONTRACTOR
GROUP ONE BUILDERS
11355 A PYRITES WY #7
GOLD RIVER, CA 95670

OWNER
CROW RICHARD E LI/ CYNTHIA
6293 GRANGERS DAIRY DR
SACRAMENTO CA 95831

ARCHITECT

Nature of Work: NSFR(2 STRY) - 3552 SF LVNG(2735 1ST), 782 SF ATTCHD GAR,
292 SF CVRD PRCH/PATIO

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 668907 Date 9/14/01 Contractor Signature Robert Sockett

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 9/14/01 Applicant/Agent Signature Robert Sockett

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 LEGION INSURANCE Policy Number WC11617157 Exp Date 01/01/2002

(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 9/14/01 Applicant Signature Robert Sockett

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.

Date of Request: _____

By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 9 Alstan Ct.

Assessor's Parcel Number: 031-0860-054

Previous Use: vacant residential

Description of Request/Proposed Use: new S.F.R.

Is This a Change of Use? YES

Prior Applications for Project Site(P#, Z#, DRPB#): none Zoning Designation: R-1

Comments: meets all setback & lot coverage requirements as shown on site plan

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: Paul Reed 7/30/01

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

MICROFILM AFTER FINAL

**Certificate of Compliance
School District Development Fees**

(Print or Type) If Printing, press hard for four copies

OWNER'S NAME Rick & Cynthia Crow
 OWNER'S ADDRESS 11333 A Pyrites Way #7 Gold River CA 95670
 PROJECT ADDRESS 9 Alston Ct
 PARCEL NUMBER _____ LOT NO. _____
 SUBDIVISION NAME _____
 NUMBER OF UNITS 1

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE [Signature]
 TITLE OF APPLICANT Designer/Drafter
 DATE 9/14/01 PHONE NUMBER 916.852.0300

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER 010966AR
 BUILDING TYPE
 RESIDENTIAL APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL ()
 SQUARE FEET OF CHARGEABLE BUILDING AREA 3557
 SIGNATURE [Signature]
 TITLE Blasp DATE 9/14/01

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT _____
 DISTRICT CERTIFICATION NO. _____
 EXEMPT _____ COMMENTS _____

RESIDENTIAL/APT/CONDO _____	SQ FT X \$ _____	= \$ _____
COMMERCIAL/INDUSTRIAL _____	SQ FT X \$ _____	= \$ _____
OTHER FEE _____ TYPE _____	SQ FT X \$ _____	= \$ _____
TOTAL FEES COLLECTED _____		= \$ 5240.44

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL

SIGNATURE _____
 TITLE _____ DATE _____

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Applicant

Certification of Compliance
School District Development

Part I - To be completed by the APPLICANT

Owner's Name/Address CYNTHIA S RICHARD CROW
Project Address 9 ALSTAN CT
Parcel Number 031-0200-054 Lot No. _____
Subdivision Name _____ No. of Units _____
Applicant's Signature [Signature] Title OWNER
Phone No. 1-800-377-7141 Date X 3/14/02

Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II - To be completed by the BUILDING DEPARTMENT

Plan Identification Number 0109664 R
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 2,489 sq ft
Signature/Title [Signature] Date 3/16/02
CORRECTED SQ. FOOTAGE NET = -63 SQ. FT.

Part III - To be completed by the SCHOOL DISTRICT

School District SULLY Certificate No. 1314
 Exempt Comments See attached Refund of overpayment
Residential/Apartment/etc. _____ Square ft. x \$ _____ = \$ _____
Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____
Total fees collected..... 03-18-02-P03-48-PLV

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature [Signature] Date 3/18/02