

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0012819
Insp Area: 4

Site Address: 1132 ASCOT AV SAC
Parcel No: 226-0080-007

A

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

CONTRACTOR
G.W. EXCAVATING
2236 Q ST
RIO LINDA, CA. 95673

OWNER
FACKRELL ROBERT M/KAREN D
6721 CRYSTAL BL
EL DORADO CA 95623

ARCHITECT

Nature of Work: DEMO SFR, ABANDON SEPTIC.

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 A, C, Z1 License Number 2376368 Date 10/24/00 Contractor Signature Cuytad

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: 10/24/2000
Date _____ Owner Signature _____

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representations 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 10/24/00 Applicant/Agent Signature Cuytad

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 STATE FUND Policy Number 0773941-00 Exp Date 10/31/2001

(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 10/24/00 Applicant Signature Cuytad

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.

2 INSPECTION PERMIT

226-0080-008

ADDRESS: 1130 Ascot Ave

OWNER: _____

Approval by the following City Departments must be obtained prior to the issuance of a wrecking permit by the Building Inspection Division. Design Review approval required on all wrecking permits in Central City/Alhambra Blvd. corridor prior to sewer disconnect permit being issued.

DESIGN REVIEW 1231 I Street, Room 200 (916)264-5604	<i>Expanded No Area DR Dist. - any new structure may require Design Review</i> <i>Donato 10/24/00</i>
PLUMBING DIVISION (All) 1231 I Street, Room 200 (916)264-7619 (or) Housing (916)264-5404	<i>Kill Tap</i>
WATER DEPARTMENT (All) 1391 35 TH Avenue (916)264-5371	<i>Called Patti 12/24/00 Bd</i>
FIRE DEPARTMENT (All) 1231 I Street, Room 401 (916)264-5416	<i>Quiana M. Yates</i>
TRAFFIC ENGINEER (Commercial) 1000 I Street (916)264-5307	
ARBORIST/TREE SERVICE (Downtown and Commercial Buildings) 5730 24 th Street (916)433-6345	

- 1.) Route to Planning and Fire
- 2.) Sewer Disconnect after we call 264-5371 Kill Tap
Bring Permit (signed off by plumbing inspector) back to the building department to add Wrecking.
* Unless City Awarded Contract.
- 3.) Commercial Buildings Required to have Asbestos Form and not to be issued Before Air Quality Date on Asbestos Form (bottom right corner)



DEPARTMENT OF
PLANNING AND DEVELOPMENT

CITY OF SACRAMENTO
CALIFORNIA

1231 I STREET
ROOM 200
SACRAMENTO, CA
95814-2998

WRECKING PERMIT # _____

BUILDING INSPECTIONS
916-264-5716
Permit Services
916-264-7619
FAX 916-264-7046

DEMOLITION PERMIT NOTIFICATION

A Demolition Permit for a one story building at:

1130 Ascot Ave

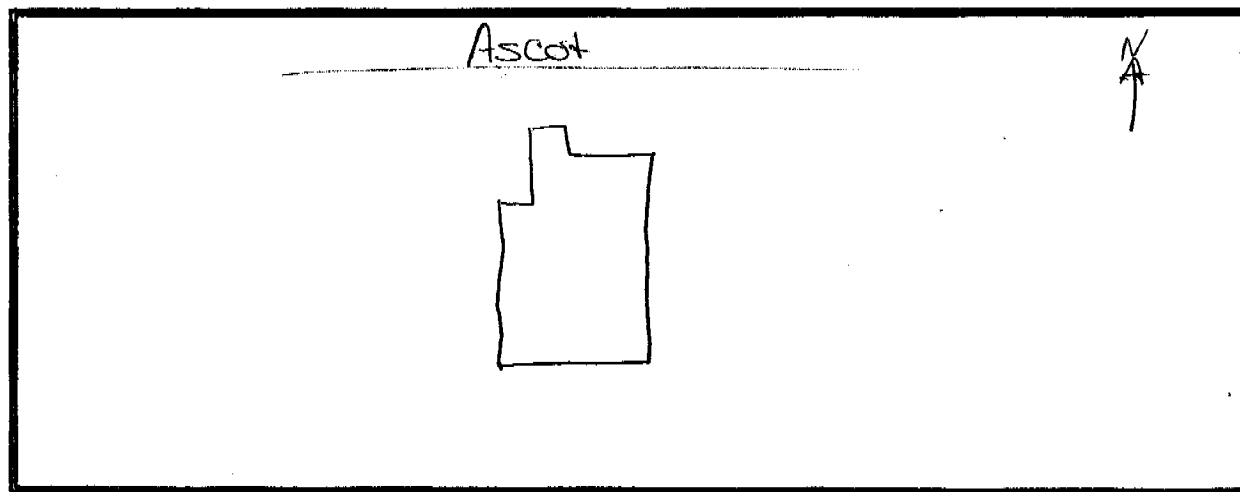
(Address)

Parcel number: 226-0080-008

has been issued on 10/23/00
(date)

The structure is scheduled for demolition within 30 days.

Please update your service and billing records accordingly.



(SAMPLE SITE PLAN)

cc: P.G. & E (Terry Clark)
SMUD
SOLIDWASTE (3141)
UTILITIES (3350)
UTILBILLING (1125)
FIREDEPT. (2510)

INITIAL: aw DATE: 10/23/00

APPLICATION FOR WRECKING PERMIT

LOCATION

ADDRESS: 1130 Ascot Ave
LOT: _____ TRACT: _____
LOT DEPTH: _____ LOT WIDTH: _____ CORNER LOT: _____ INTERIOR LOT: _____
OWNER: _____
ADDRESS: _____

BUILDING DATA

LENGTH: _____ WIDTH: _____ FIRST FLOOR AREA: _____ (SQ.FT.) NO. STORIES: _____
USE OF BUILDING: _____ CONSTRUCTION TYPE: _____ HEIGHT: _____
OF UNITS: 1 REAR YARD: _____ SIDE YARD: _____ SET BACK: _____
CITY SEWER: _____ WATER: _____ SEPTIC: SEPTIC WELL: _____

CONTRACTOR

NAME: G W Demolition & Excavating STATE LICENSE NO. 576368
ADDRESS: 2236 Q Street, Rio Linda, CA 95673
PHONE: (916) 991-0741 FAX: (916) 991-9246
LIABILITY INSURANCE P.L. Zurich _____ P.D. SPC30408950 _____ POLICY ON FILE Yes
WORKERS COMPENSATION INSURANCE _____ State Fund 0773941-99 _____ Yes

CODE REQUIREMENTS

NOTIFICATION OF ADJACENT PROPERTY OWNERS _____ DATE: _____
COPY OF NOTIFICATION ON FILE: _____ USE OF PROPERTY REQUIRED: _____
PEDESTRIAN PROTECTION REQUIRED: _____ REQUIREMENTS ATTACHED _____
BASEMENTS OR OTHER EXCAVATIONS ON LOT: _____ TO BE FILLED _____ FENCED _____

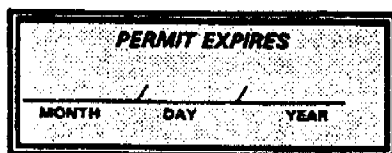
PREPARE PLOT PLAN SHOWING LOCATION OF BUILDING ON LOT AND TYPE AND LOCATION OF BUILDING BARRICADE.

SPECIAL CONDITIONS:

I have read the above application and know the contents thereof; the same is true and correct. I further state that I am familiar with the laws governing the demolition of buildings within the City of Sacramento and the State of California and that the above structure will be razed in conformity therewith. I further state that I understand that this permit may be revoked for any violation of the provisions of the Code of the City of Sacramento pertaining to or affected by the demolition procedure to be used on the above building.

No. W _____
DATE: _____
FEE: _____

APPLICANT: *Crystal*
TITLE: *Office Manager*
(APPLICANT/OWNER)




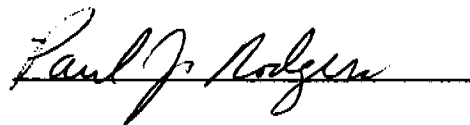
THIS IS A REVOCABLE PERMIT

Statement of Facts

I, Crystal Welliver, of G W Demolition and Excavating hereby confirm that all septic tanks listed below have been pumped, back filled and compacted as witnessed by Paul Rodgers, County of Sacramento Inspector.

Permit No.	Assessor Parcel No.	Address
0101198	226-0080-090	1030 Ascot Avenue
0011877	226-0080-099	1032 Ascot Avenue
0012822	226-0080-008	1130 Ascot Avenue
0012819	226-0080-007	1132 A, Ascot Avenue
0101197	226-0080-062	5549 Dry Creek Road
0012820	226-0080-061	5559 Dry Creek Road


Crystal Welliver



STATE OF CALIFORNIA
COUNTY OF SACRAMENTO

On February 2, 2001 before me, Christopher B. Nelson, Notary Public
Personally appeared Crystal Welliver, proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that she executed the same in her authorized capacity, and that by her signature on the instrument the person or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.

Signature 

My commission expires: June 30, 2004

Affiant Known Produced ID

Type of ID CADn



(Seal)