

CITY OF SACRAMENTO

Permit No: 9801691

1231 I Street, Sacramento, CA 95814

Insp Area: 3

Site Address: 2931 44TH ST SAC

Parcel No: 0140163028

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR

DOUBLE B TRUCKING
194 WILLOW CREEK DR
FOLSOM 95630
Phone: 983-0700

OWNER

REDEVELOPMENT AGENCY OF THE CITY O
630 I ST FL ND
SACRAMENTO CA 95814
Phone:

ARCHITECT

Phone:

Nature of Work: SEWER CAP

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 C-21 License Number 637105 Date 3-5-98 Contractor Signature R. Blackwell

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 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 or 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 or 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.

Date 3-5-98 Applicant/Agent Signature R. Blackwell

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 339-97 1023

(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 3-5-98 Applicant Signature R. Blackwell 12.31.98

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.

**CITY OF SACRAMENTO  
APPLICATION FOR WRECKING PERMIT**

**LOCATION:**

ADDRESS: 2931 44th St.  
LOT \_\_\_\_\_ TRACT \_\_\_\_\_  
LOT DEPTH \_\_\_\_\_ LOT WIDTH \_\_\_\_\_ CORNER LOT \_\_\_\_\_ INTERIOR LOT \_\_\_\_\_  
OWNER S.H.R.A.  
ADDRESS 1013 7th St., Suite 200, Sacramento, CA 95814

**BUILDING DATA:**

LENGTH \_\_\_\_\_ WIDTH \_\_\_\_\_ FIRST FLOOR AREA 1138 (SQ. FT.) NO. OF STORIES 1  
USE OF BUILDING \_\_\_\_\_ TYPE OF CONSTRUCTION \_\_\_\_\_ HEIGHT \_\_\_\_\_  
NO. OF UNITS 1 REAR YARD \_\_\_\_\_ SIDE YARD \_\_\_\_\_ SETBACK \_\_\_\_\_  
CITY SEWER  WATER  SEPTIC \_\_\_\_\_ WELL \_\_\_\_\_

**CONTRACTOR:**

NAME DOUBLE B TRUCKING  
ADDRESS 194 Willow Creek Dr, Folsom, CA 95630  
PHONE 916-983-0700 STATE LICENSE NO. 637105  
LIABILITY INSURANCE P.L. 1,000,000 P.D. \_\_\_\_\_ POLICY ON FILE \_\_\_\_\_

**CODE REQUIREMENTS:**

NOTIFICATION OF ADJACENT PROPERTY OWNERS S.H.R.A. DATE \_\_\_\_\_  
COPY OF NOTIFICATION ON FILE \_\_\_\_\_ USE OF PROPERTY REQUIRED \_\_\_\_\_  
PEDESTRIAN PROTECTION REQUIRED \_\_\_\_\_ TYPE: \_\_\_\_\_  
APPROVAL BY OTHER DEPARTMENTS \_\_\_\_\_ 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. ~~W 177~~ W 179 APPLICANT Rebecca Blackwell  
DATE 3/11/98 9801691  
FEE \$ 87.36 TITLE OWNER  
(APPLICANT/OWNER)

**PERMIT EXPIRES**  
4/11/98

**NOTE: THIS IS A REVOCABLE PERMIT**

ADDRESS: 2931 44th St.

OWNER: S.H.R.A.

Approval by the following City Departments must be obtained prior to the issuance of a wrecking permit by the Building Inspections 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 200 264-5604	<i>D.K. M. Lambert</i>
PLUMBING DIVISION 1231 I Street, Room 200 264-5716 (or) Housing 264-5404	<i>Bandowee</i>
WATER DEPARTMENT 1391 35th Avenue 264-5371	<i>BL</i>
FIRE DEPARTMENT 1231 I Street, Room 401 264-5416	<i>Stacy - Fire Trw. Mar. 5, 98</i>
TRAFFIC ENGINEER 1000 I Street 264-5307	
ARBORIST/TREE SERVICE (Downtown and Commercial Buildings) 5730 24th Street 433-6345	

DEPARTMENT OF  
PLANNING AND DEVELOPMENT

CITY OF SACRAMENTO  
CALIFORNIA

1231 I STREET  
ROOM 200  
SACRAMENTO, CA  
95814-2998

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

WRECKING PERMIT # W01-79

## DEMOLITION PERMIT NOTIFICATION

A Demolition Permit for a 1 story building at:

2931 44th St.

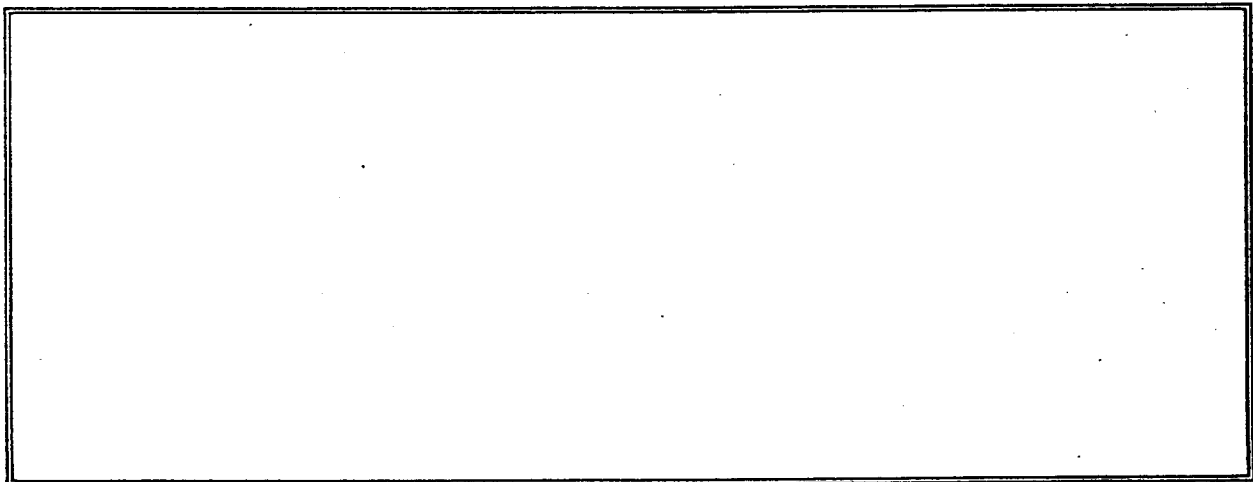
(Address)

Parcel number: 501-0167-028

has been issued on \_\_\_\_\_  
(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  
SOLID WASTE (3141)  
UTILITIES (3350)  
UTIL. BILLING (1125)  
FIRE DEPT. (2510)

INITIAL: \_\_\_\_\_ DATE: \_\_\_\_\_

# Sacramento Metropolitan Air Quality Management District

## ASBESTOS SURVEY AND DEMOLITION NOTIFICATION FORM

NOTE: Please read instructions on the back of this form.

<b>1</b>	Contractor <u>Double B Trucking</u> Address <u>194 Willow Creek Drive</u> City <u>Folsom</u> State/Zip <u>CA 95630</u> Telephone <u>916 983 0700</u>	Owner <u>Sacramento Housing &amp; Redevelopment</u> Address <u>1013 7th Street, Suite 200</u> City <u>Sacramento</u> State/Zip <u>CA 95814</u> Telephone <u>916 264 1516</u>
<b>2</b>	Structure Name <u>Residence</u> Address <u>2931 44th Street</u>	Use <u>Demo for Shopping Center</u> City/Zip <u>Sacramento, CA 95814</u>
<b>3</b>	Structure Age <u>60</u> (years)    Number of floors: <u>1</u> Size: <u>1138</u> sq. ft.	
<b>4</b>	Has RACM reported by the consultant been removed? (circle) <u>YES</u> No N/A If yes, name of asbestos contractor <u>APC Contractors, Inc.</u>	
<b>5</b>	DEMOLITION Start Date <u>03 / 02 / 98</u> Completion Date <u>03 / 02 / 98</u>	
<b>6</b>	Preference for return of form: <input type="checkbox"/> Mail <input checked="" type="checkbox"/> Pick-Up (after 2 working days)	
<b>7</b>	Applicant Name (Print) <u>Arline Parfitt, APC Contractors</u> <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Contractor Applicant's Signature _____ Date <u>02 / 19 / 98</u>	
<p><i>I have read and understand the directions. The information on this form is true and accurate.</i></p> <p>To be completed by CAL-OSHA Consultant (see SMAQMD list or OSHA list)</p> Company Name: <u>ESS Environmental</u> Telephone: <u>916 ) 383 6642</u> Surveyor's Name: <u>Michael L. Horan</u> Survey Date <u>11 / 18 / 97</u> OSHA # <u>92-0107</u> Company Address: <u>5714 Folsom Blvd #146</u> City/State/Zip: <u>Sacramento, CA 95819</u> Amount of RACM: _____ lineal feet <u>421</u> square feet: <u>0</u> cubic feet Amount of Category I: <u>20</u> Amount of Category II: _____ Analytical Procedure: <u>PLM analysis</u> Consultant's Signature: _____ Date ____/____/____		
<b>9</b>	REVISION # <u>1</u> <u>2</u> <u>3</u> <u>4</u> <u>5</u> <u>6</u> <u>7</u> <u>8</u> <u>9</u> (circle)  Old: Start Date ____/____/____ Completion Date ____/____/____  New: Start Date ____/____/____ Completion Date ____/____/____	DEMOLITION PERMIT SHALL NOT BE ISSUED PRIOR TO  <div style="border: 1px solid black; padding: 5px; display: inline-block;">                     FEB 21 1998                 </div>

SMAQMD USE ONLY: PROJ. # \_\_\_\_\_ RECEIVED DATE / POSTMARK \_\_\_\_/\_\_\_\_/\_\_\_\_ NESHAPS: \_\_\_\_\_  
 CK# \_\_\_\_\_ REC'T # \_\_\_\_\_ AMT. PAID \_\_\_\_\_ STAFF \_\_\_\_\_ DATE APPROVED \_\_\_\_/\_\_\_\_/\_\_\_\_