

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0509566

Insp Area: 4

Thos Bros: 277G6

Site Address: 271 LAMPASAS AV SAC

Parcel No: 263-0151-014

Sub-Type: ASFR

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

BARRERAS JULIAN R
271 LAMPASAS AV
SACRAMENTO, CA 95815

Nature of Work: 402sf, REAR ADDITION (CONNECTING HOUSE & GARAGE) TO EXISTING SFR. - DESIGN REVIEW AREA -

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, 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 7-15-05 Owner Signature J. Barreras

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 7-15-05 Applicant/Agent Signature J. Barreras

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 7-15-05 Applicant Signature J. Barreras

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

www.cityofsacramento.org  
 Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT  
 Inspection: 1-916-808-7622

Downtown Permit Center  
 1231 I Street, Suite 200  
 Sacramento, CA 95814

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

**SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE**

PARCEL # 263 - 0151 - 014 PERMIT # 0509566  
 SITE ADDRESS 271 LAMPASAS ACREAGE \_\_\_\_\_

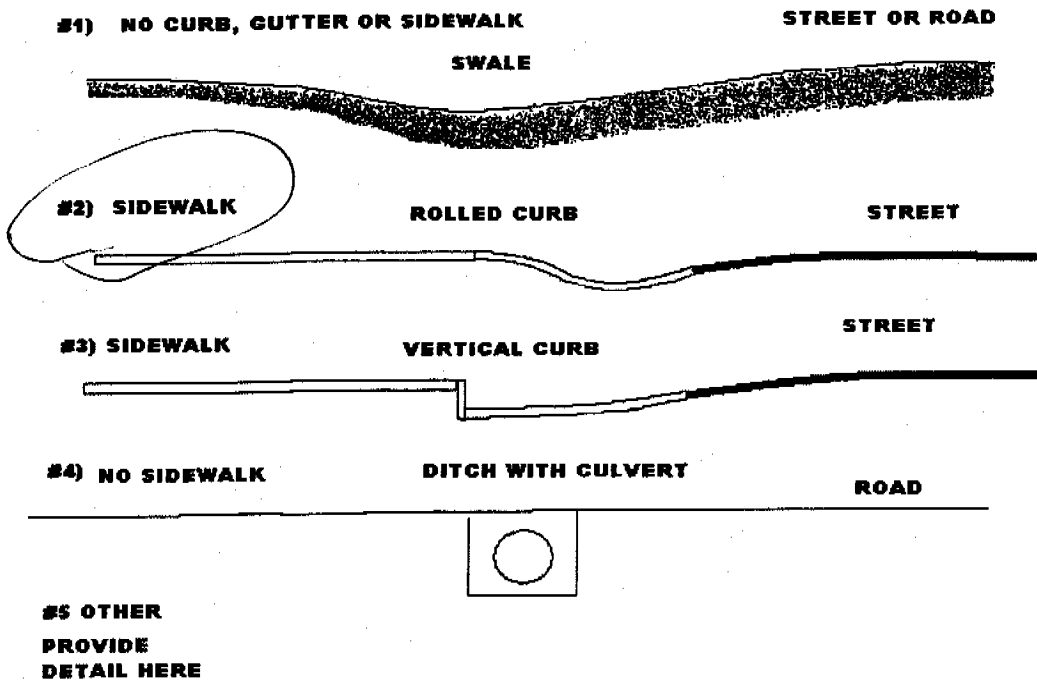
The City of Sacramento requires a building site to be graded to drain correctly and site drainage routed to an approved location. To help us understand the site drainage for your project and determine if a driveway permit or an encroachment permit is required please answer the following questions. All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

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

# SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

- |   |    |        |
|---|----|--------|
| 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.**



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 J. Barrios      DATE 7-15-05  
 TITLE \_\_\_\_\_  
 PHONE NO. \_\_\_\_\_

Site verify drainage to Street

MAR



**CITY OF SACRAMENTO**

www.cityofsacramento.org  
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**SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE**

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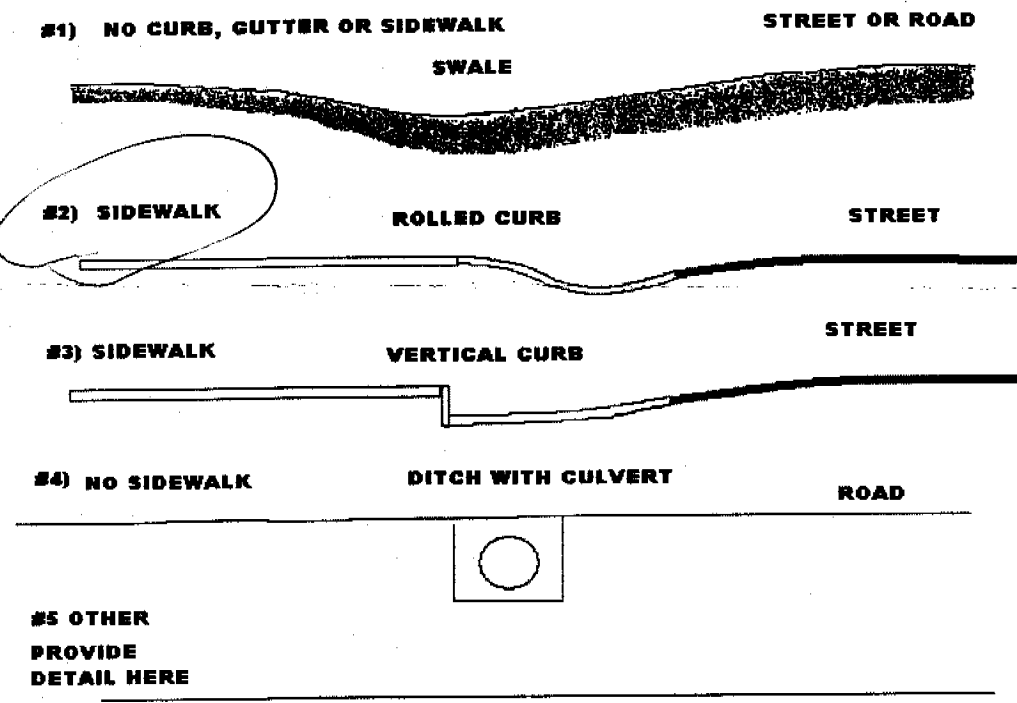
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# SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

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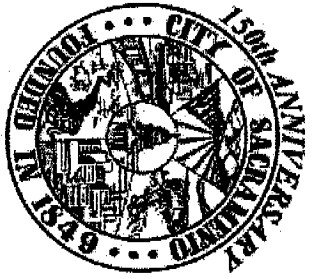
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SIGNED J. Barrios      DATE 7-15-05  
 TITLE \_\_\_\_\_  
 PHONE NO. \_\_\_\_\_

*Site verify drainage to Street*      MAR

**City of Sacramento Planning Division**  
**PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL**

ADDRESS: 271 LAMPASAS AVENUE	APN: 263-0151-014
DRPB AREA / PUD / SPD: EXPANDED NORTH	ZONING: R-1
EXISTING LAND USE: ONE STORY SFR WITH DETACHED GARAGE/LAUNDRY ROOM	
PROPOSED USE: ADDITION TO REAR OF SFR TO ATTACH TO DETACHED GARAGE: MASTER SUITE, HALL/LAUNDRY	
<p><b>PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:</b></p> <p><input type="checkbox"/> Planning review is NOT required.</p> <p><input type="checkbox"/> Use is NOT allowed; applicant CANNOT submit for plan check.</p> <p><input type="checkbox"/> Requires APPLICATION(s):    PC        ZA        IR        ER        DR        PB</p> <p>Required Planning application must be submitted <i>before</i> project can be submitted for plan check.</p> <p><input type="checkbox"/> Application(s) IN PROGRESS:</p> <p>Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.</p> <p><input type="checkbox"/> Application(s) COMPLETED:</p> <p>Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.</p> <p><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 <i>prior to issuance</i> of building permit.</p> <p><input checked="" type="checkbox"/> Meets setback &amp; lot coverage requirements as shown on site plan provided.</p> <p><input checked="" type="checkbox"/> Plans to be submitted have been stamped/signed by Planning counter staff.</p> <p><input type="checkbox"/> Route to SITE for plan check and inspection.</p> <p><input type="checkbox"/> Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.</p>	
<p>COMMENTS: LOT 6600 SQ FT., FOOTPRINT 550 + 608 + 800 + 120 = 2078 / 6600 = 31% LOT COVERAGE. ATTACHING ADDITION TO DETACHED GARAGE MEETS SETBACKS ON ALL SIDES. ADDITION IS IN THE REAR AND NOT VISIBLE FROM STREET VIEWS AND DOESN'T REQUIRE DESIGN REVIEW. IF VISIBLE MATERIALS AND DESIGN MUST MATCH EXISTING SFR. NO PLANNING ENTITLEMENTS APPARENT.</p>	
DATE: 03-23-2005	BY: PCALDWELL



**CITY OF SACRAMENTO  
DEVELOPMENT SERVICES DIVISION  
FAXED PERMIT APPLICATION (certain restrictions apply)**

Fax # 916-264-1901

Faxed request must be received in this office by 3:00 p.m. to be processed the following work day.  
Note: 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

DATE: 6/30/05

05209566

RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (Qualified)

JOB ADDRESS: 271 Lampasas Ave UNIT # \_\_\_\_\_ CONTRACT PRICE \$ \_\_\_\_\_

CONTACT PERSON: Miriam Torres  CONTACT PHONE: (916) 208-2848

Property Owner: Juliana Barrios Contractor: Woodruff Brothers License # \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Phone: (916) 294-8464 City/State/Zip: \_\_\_\_\_  
Phone: (916) 459-0209 FAX: \_\_\_\_\_

NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE <input type="checkbox"/> GARAGE <b># SQUARES:</b> 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 Note: Design Review approval may be required in certain areas.	<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: \$ _____ Note: Design Review approval may be required for rooftop units.	<input type="checkbox"/> WATER HEATER (residential ONLY) <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <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 (Describe locations below) Note: Design Review approval may be required in certain areas.	<input type="checkbox"/> MINOR ELECTRIC and/or MINOR 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"/> PGE *NOTE: Correction Notice items will require an additional building permit
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DESCRIPTION OF WORK:



Downtown Permit Center  
 1231 I Street, Suite 200  
 Sacramento, CA 95814  
 Help Line: 1-916-264-5656

**CITY OF SACRAMENTO**  
 DEVELOPMENT SERVICES DEPARTMENT  
 BUILDING DIVISION  
[www.cityofsacramento.org](http://www.cityofsacramento.org)

North Permit Center  
 2101 Arena Blvd., Suite 200  
 Sacramento, CA 95834  
 Inspection: 1-916-808-4677

**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

*Antonio Ferreras*

Date

*7/15/05*

Case No.

Permit No.

*05095660*

Job Address

*271 Campasas Ave Sacramento CA 95815*

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