CITY OF SACRAMENTO 12311 Street, Sacramento, CA 95814

Site Address: 2508 43RD AV SAC

Parcel No:

036-0042-002

CONTRACTOR

<u>OWNER</u> GIN RAY Permit No: 0104898 Insp Area: 3

Sub-Type:

NSFR

Housing (Y/N): N

<u>ARCHITECT</u>

Nature of Work: NSFR 1 STORY 7	RMS
CONSTRUCTION LENDING AGENCY of the work for which this permit is issued (Sec.	Y: Thereby affirm under penalty of perjury that there is a construction lending agency for the performance 3097, $\mathrm{Cor}(\mathrm{C})$
ender's Name	Lender's Address

SACRAMENTO CA 95818

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 (8500.00).

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 banding 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, an 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)

Contractor(s) necessary	
I am exempt under Sec.	B & PC for this reason:
17dic	XOwner Signature Mary Steven
THE PROPERTY OF THE PARTY OF THE PARTY OF	by applicant represents, and the ity relies on the representation of the applicant, that the applicant verifie

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the fity 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.

l 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

	A ripplication is grant of the state of the	
WORKER'S COMPENSATION DECLA	RATION: I hereby affirm under penalty of perjury o	ne of the following declarations:

WUKKEK'S CUMPENSATION DECLARATION: a nereby affirm under property of perjury one of the following acctangeous.

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 assued. My workers' compensation insurance carrier and policy number are:

Carrier	Elizabeth River	Policy Number	Exp Date	
MAThis section need no	ot be completed if the permittee for 30	I certify that in	the performance of the work for which this permit	is issued,1
shah not employ any perso	n in any manner so as to become subje	WICE workers' compe	ensation laws of California and agree that if I shou	ld become
subject to the workers' comp	pensation provisions of Section 3700 of	the Lapor Code, I shall to	intil with comply with those provisions.	
KDate 7.10 C	✓ Applicant Sign	ature Mary	Muranth	

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.

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1.	I personally plan to pro- Improvement (yes or no			onstruction of the proposed
2.				signed an application for
3.	I have contracted with t	he following person	on (firm) to provide th	e proposed construction:
	Name		Address	
	City		_Telephone	
	Contractors License N	o		
4.	Supervise, and provide	the major work.		wing person to coordinate,
	Name			
	City		Telephone	
	Contractors License No	D		
5.	I will provide some of the Work indicated:	he work but I have	e contracted (hired) th	e following to provide the
	Name	Address	Phone	Type of work
	gned May 5	Hurans	E) AVE	
	ermit No: 01048	 98		



DEPARTMENT OF NEIGHBORHOODS, PLANNING AND DEVELOPMENT SERVICES

CITY OF SACRAMENTO CALIFORNIA

123) I STREET ROOM 200 SACRAMENTO, CA 95814-2904

916-264-7619 PAX 916-264-7046

DEVELOPMENT SERVICES DIVISION

EXHIBIT 1

I have read and am familiar with the contents of the City's Standard

Owner-Builder Notification and Owner-Builder Verification, as required by

Culifornia Health and Safety Code Section 19830 and 19831. I authorize my

agent(s) Mury Hernaude Z

to sign the Owner-Builder Verification on my behalf.

Signature

Print Name

Address

2808 Marshall way

Sacramento CA 95818

Telephone

916-454-2535

City of Sacramento

COMMUNITY DEVELOPMENT BANKING Credit Approval Report

None	Title	Phone #	Dasc	Signa	ture
JAIIMIE	1		anugement		
Paul Shipstead	CM/AVP	DaNet 515-5940	6/29/01	Electronically signed	
Deborah Ruane	CDBG Mgr/SVP	HaNel 515-5829	6/29/01	Electronically signed	
Lindy Hahn	RM/5VP	BaNet 522-1010	7/5/01	Electronically signed	
Lindy Italiti		1			
		Risk Mi	magement		
Cynthia Christian	CRM/S VP	BaNet 988-4827	7/13/01	Gethia a.C.	viction
Cynung Ciristian				0	
					·
		Condition	s to Approval		
Topograms and the first section of the section of			ent Investment	Rationale	
and the property of the second	Commi	DIVATION	adjuiduals, or low and n	noderate income areas, or other	
	This investment benefits for Areas targated for	redevelopment by Supp	orling one or more of the	e following activities:	
) Affordable housing, con	nmunity services or permanent jo	obs for Yes: 🔀	No:		
ow and moderate income		Yes:	No: 🔀		
) Equity or debt firancia,	g Jor small ousiness:		·		
) Area revitalization of st	abilization:	Yes. 🔀	ре: □		
مماسيم مناوليانين	s, or facilities that primarily pron	nute Yes: 🔀	No:		
utile welfare:	2, the Antermis rains luminos have				
BofA Torget Market:	In Market: 🔀 Out	of Market:	Degree of Impact:	High: Medium: 🛛	Low:
	Par Brade English No. No.	or for Profit G	overnment		
Sponsor:	For Profit Entity: No	Entity:	Entity:		
Tax Abatements:	Yes; 🔀 No	o: Rental Sui	willies: Yes: 🗌 🕽	No: Other Subsidies:	Yes: No:
1 az Abutements.		To all Engras Suria and	ents Credit Rating:	4 IGL:	Yes X No
	Syndicator/ Lend Lend Lend Lend Lend Lend Lend Lend	ase Real Estate Investme	ents Cream Monnig.		
Javesior Information	Type of 4%	Total Credit NA	ATHORE NA	Purchase \$0.00	Price/Total NA
For Tax Credit Transctions:	Credits:	Ayvarded:	Date:	Price: 4%) \$463M at 25% complete; 3r	1 ''
Transcrions:	504	Ath Installment (14%	A \$463M at 75% complet	tion: 5th Installment: (9%) \$296	M at take-out; but installment
	(10%) \$331	M at receipt of 8609s at	d 7th Installment \$299M	(9%) after 1.10 DSC for 6 conse	cutive months.
	% AMI served: 30% of the u		Affordable: .00%	% of Units Market.	
B =3 == F5 = 1	70% of the u				
Project Data:	Social Service Component:	The project will offer	an after school program fo	or the children of the project and	also offer a computer lab alon
	Societ Service Component.	with computer training	g apportinities for the pro	picel's residents	

Certification of Compliance School District Development

Part I-To be completed by the APPLICANT	
Owner's Name/Address	
Project Address	
Parcel Number	Lot No
Subdivision Name	
Applicant's Signature	
Phone No	
Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to which you may protest the fees or other payment identified above will begin to run on the date this project is issued or on which they are paid to the district(s) or to another public entity authorithever is earlier. Part II—To be completed by the BUILDING DEPARTMENT	in which the building or installation permit for
Plan Identification Number	
Building Type (check one) Residential Apartment/Condom	
Signature/Title / / / / / / / / / / / / / / / / / / /	Date ////////
Part III – To be completed by the SCHOOL DISTRICT	
School District	Certificate No
☐ Exempt Comments	
Residential/Apartment/etc. Square ft. x \$	<u> </u>
Commercial/Industrial Square ft. x \$	= \$
Total fees collected	<u> </u>
This certification covers only the amount of square footage indicated above. A footage for this project will require an amendment to the Certificate of Comp.	ny additions or corrections to the square liance.
As the authorized school official, I hereby certify that the requirements of Go other authorized requirements have been complied with by the above signed	overnment Code Section 65995 and any applicant.
Signature	Date

Date of Request:_	4/20/1
By: <u>*</u>	

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION PLANNING AND ZONING INFORMATION REQUEST

Project Address: 2508 43cd Av	
Assessor's Parcel Number: 036 - 6042 - 002	
Previous Use:	
Description of Request/Proposed Use: SFR	
Is This a Change of Use?	
Zoning Designation: R Prior Applications for Project Site(P#, Z#, DRPB#): Nove	
Comments: Front Setback, Side a vear setbacks Or	RAY
Lot coverage okay	`
Are There Any Planning Issues?: (circle one) YES NO	
* Staff Site Plan Check Required? (Circle one) * Field Inspection Required? (Circle one) * Design Review/Preservation Required?: (Circle one) YES NO YES NO	
Planning Review by/Date: 4-20-0) \

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

MICROFILM AFTER FINAL