

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0316415

Insp Area: 3

Thos Bros: 317 D1

Site Address: 2111 PERKINS WY SAC

Parcel No: 013-0162-031

Sub-Type: NDUP

Housing (Y/N): N

CONTRACTOR

OWNER

OWNER

BERNARD KLEVENS
2121 PERKINS WY
SACRAMENTO CA 95818

ARCHITECT

Bernard Klevens
2121 Perkins Way
Sacramento, CA 95818-4342

Nature of Work: NEW 2400sf 2 STORY DUPLEX, 914sf 4 CAR GAR W/1020sf DWELLING OVER GAR. 420sf DECK/PORCH

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 FIRST NORTHERN BANK Lender's Address 624 2nd ST. DAVIS, CA 95616

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, 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 Nov 25, 2003 Owner Signature Bernard Klevens

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 Nov 25, 2003 Applicant/Agent Signature Bernard Klevens

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 **PAID** in 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 _____

(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 Nov 25, 2003 Applicant Signature Bernard Klevens

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 Planning Division
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 2111/2113/2115 Perkins Way	APN: 013-0162-031
DRPB AREA / PUD / SPD: N/A	ZONING: C-2
EXISTING LAND USE: Vacant	
PROPOSED USE: New 2,400 sq ft duplex & 1,040 sq ft apt	
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:	
<input type="checkbox"/>	Planning review is NOT required.
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.
<input type="checkbox"/>	Requires APPLICATION(s): PC ZA IR ER DR PB Required Planning application must be submitted <i>before</i> project can be submitted for plan check.
<input type="checkbox"/>	Application(s) IN PROGRESS: 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.
<input checked="" type="checkbox"/>	Application(s) COMPLETED: P03-050 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.
<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.
<input checked="" type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.
<input type="checkbox"/>	Route to SITE for plan check and inspection.
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
COMMENTS: Special Permit to allow construction of three residential units in the General Commercial zone. Variance to reduce required tree shading for parking & maneuvering areas. Approved application P03-050, approval given on 9/11/03	
DATE: 10/22/03	BY: Bonnie Surgeon

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO BUILDING DIVISION

PERMIT SERVICES SECTION

NORTH OFFICE: 2101 Arena Blvd., Ste. 200
Sacramento, CA 95834 (916) 808-2534 FAX 808-7046
CENTRAL CITY: 1231 I Street, Rm. 200
Sacramento, CA 95814 (916) 808-2534 FAX 264-5987

ACTIVITY #

Insp. Area

0316415

3R

Applicant **MUST** complete
ALL Unshaded areas

ADDRESS 2111 PERKINS WAY

PARCEL # 013-0162-031

Suite _____

<p>Name <u>Bernard Klevens</u> Street Address <u>2121 Perkins Way</u> City/ State/ Zip <u>Sacramento, CA 95818-4342</u> Phone <u>443-2048</u> FAX <u>443-2048</u> E-mail: <u>bklevens@cwnet.com</u></p>	<p>LICENSED CONTRACTOR Lic No.# _____ Name _____ Address _____ City/ State/ Zip _____ Phone _____ FAX _____ E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>Bernard Klevens</u> Address <u>2121 Perkins Way</u> City/ State/ Zip <u>Sacramento, CA 95818-4342</u> Phone <u>443-2048</u> FAX <u>443-2048</u> E-mail: <u>bklevens@cwnet.com</u></p>	<p style="text-align: center;">OWNER</p> <p>Name <u>Bernard Klevens</u> Address <u>2121 Perkins Way</u> City/ State/ Zip <u>Sacramento, CA 95818-4342</u> Phone <u>443-2048</u> FAX <u>443-2048</u> E-mail: <u>bklevens@cwnet.com</u></p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
→ WORKER'S COMPENSATION POLICY # N/A EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: CONSTRUCT NEW DUPLEX w/ 4 CAR (856sq) GARAGE & APT OVER
Appt 2400, Apt 1040

OCCUPANT/TENANT: _____ VALUATION: \$ _____

FLOOD STATUS: <u>A99</u>		S.C.A.T.								
JOB DESCRIPTION		BLDG	SHELL	APT	TI	REM	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	ELEC		SITE		FIRE	
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code		Vio. File
<u>2</u>	<u>1187</u>	<u>3,394</u>	<u>C2</u>		<u>VN</u>	SPR	ALARM			[H] [Quad]
B	L	P	M	E	F	S		D	PW	UTIL

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

Certification of Compliance
School District Development

Part I—To be completed by the APPLICANT

Owner's Name/Address BERNARD KLEVENS 2121 PERKINS WAY SAC 95518
Project Address 2111 PERKINS WAY SAC 95518
Parcel Number 013-0162-031 Lot No. —
Subdivision Name — No. of Units 3
Applicant's Signature Bernard Klevens Title OWNER
Phone No. 916-443-2048 Date —

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 0316415
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 3420 sq ft
Signature/Title J. H. [unclear] SJ III Date 11/13/03

Part III—To be completed by the SCHOOL DISTRICT

School District SCUSD Certificate No. 7985
 Exempt Comments —
Residential/Apartment/etc. 3420 Square ft. x \$ 214 = \$ 7318.80
Commercial/Industrial — Square ft. x \$ — = \$ —
Total fees collected..... = \$ 7318.80

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 11/20/03