

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0507675

Insp Area: 3

Thos Bros: 318C5

Site Address: 5832 WILKINSON ST SAC

Parcel No: 027-0242-024

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR
OWNER BUILDER

OWNER
LARSEN ROBERT/ALICIA
1042 LAKE GLEN WY
SACRAMENTO CA 95822

ARCHITECT

Nature of Work: NEW 1538 SF SFR W/ 440 SF ATTACHED GARAGE AND 414 SF PORCH/PATIO COVER

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 OWNER 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 C000005935 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 July 27 05 Owner Signature Robert Larsen

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 July 27 05 Applicant/Agent Signature Robert Larsen

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:

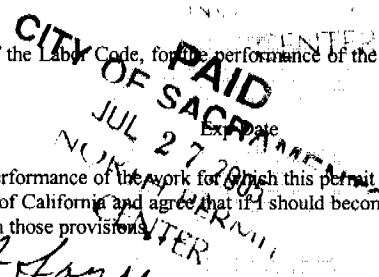
Carrier _____ Policy Number _____

(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.

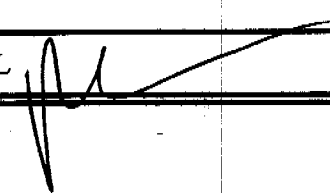
Date July 27 05 Applicant Signature Robert Larsen

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
Development Services Department
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 5832 WILKINSON STREET	APN: 027-0242-024
DRPB AREA / PUD / SPD: CITYWIDE CHECK LIST	ZONING: R-1
EXISTING LAND USE: VACANT	
PROPOSED USE: NEW SFR	
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 approved <i>before</i> project can be submitted for plan check
<input type="checkbox"/>	Application(s) IN PROGRESS: File Number: Application must be approved before project can be submitted for plan check.
<input checked="" type="checkbox"/>	Application(s) COMPLETED: File Number & approval date: ER05-119 (COMPLETED 05-31-2005) Building permit must conform to approved plans and comply with all conditions of approval.
<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 checked="" 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"/>	Route to SITE for inspection only, plan check not required.
CONDITIONS AND COMMENTS:	<u>Building permit must conform to approved plans and comply with all conditions of approval ER05-119.</u> LOT SIZE: 60.9 X 357.75 = 21786 SQ FT. APPROX FOOTPRINT 44 X 62 = 2728 / 21786 = 13% LOT COVERAGE. FRONT SETBACK MINIMUM 25', SIDE YARD MIN. 5' AND REAR MIN. 15'. EAVES MAY OVERHANG A MAX. OF 2'. INTERIOR GARAGE DIMENSIONS MIN. 10 X 20. UNDER 40% MAXIMUM PAVING FOR FRONT SETBACK AREA. ANY TREES THAT NEED TO BE REMOVED MUST GET PRIOR APPROVAL FROM CITY ARBORIST. NO PLANNING ENTITLEMENTS APPARENT.
DATE: 05-31-2005	BY: PCALDWELL 



**CITY OF SACRAMENTO
BUILDING INSPECTION
DIVISION**

PERMIT OFFICES

Downtown (916) 808-5656
1231 I St., Rm. 200, Sacramento 95814
North Natomas (916) 808-5656
2101 Arena Bl. Ste. 200, Sacramento 95834
<http://www.cityofsacramento.org>

PC# 0507675

ADDRESS 5832 WILKINSON ST

- YOUR PROJECT IS LOCATED IN COUNTY SANITATION DISTRICT-1.
- APPROVAL FOR CONNECTION TO THE SEWER LINES IN THIS AREA MUST BE GRANTED BY COUNTY SANITATION DISTRICT-1.
- FEES FOR CONNECTIONS TO SEWER LINES IN THIS AREA MUST BE PAID TO COUNTY SANITATION DISTRICT-1.

**THE SACRAMENTO COUNTY REGIONAL SANITATION DISTRICT
PERMIT SERVICES UNITS ARE LOCATED AT;**

10545 Armstrong Ave. Ste #1
Mather, CA 95655
(916) 876-6100

827 7TH St. Rm #102
Sacramento, CA 95814
(916) 874-6544

**THE PERMIT FOR THIS PROJECT WILL NOT BE ISSUED
UNTIL THIS DEPARTMENT HAS RECEIVED
DOCUMENTED PROOF OF PAYMENT OF ALL FEES TO
SACRAMENTO COUNTY.**

CITY OF SACRAMENTO
CALIFORNIA

PLANNING AND
BUILDING DEPARTMENT
PLANNING DIVISION

1231 I STREET, ROOM 200
SACRAMENTO, CA
95814-2998

WATER DEVELOPMENT FEE WAIVER

Applicant: Robert Larson Phone: 392-5054

Property Address: 5832 Wilkinson St

APN: 027-0242-024 Zoning: R-1 No. of Units: 1

This project qualifies for the fee waiver because it is in a:

- REDEVELOPMENT AREA; or
 DESIGNATED INFILL AREA; or
 QUALIFIED INFILL AREA, meeting all of the following requirements:

1. The site is located in a neighborhood where the median year of housing construction is 1965 or earlier as shown on the Neighborhood Statistics Boundary Map, or the applicant has proof to the satisfaction of the Planning Director that the median age of housing within 500 feet of the site was developed prior to 1965; and
2. The lot is surrounded on three sides by existing or approved development; and
3. The project is consistent with the General Plan or more specific plan designation; and
4. The site is no more than 5 acres in size for single family development, or 2 acres in size for multiple family development; and
5. The site has City sewer, water, and drainage services, or is within proposed or existing assessment district for these services; and the services provided are capable of serving the proposed development to the satisfaction of the Public Works Director.

by: _____

Date: _____

by: Emilee J. Lamer

Date: 6/21/05

WD No: _____

COUNTY SANITATION DISTRICT 1
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

7/11 II
SEWER IMPACT FEE *City of Sacramento*
March 2, 2005 PERMIT AND CALCULATION

APPLICATION NO: _____ BLDG PERMIT NO. *SN071005-10273*

GENERAL INFORMATION
Additional fees may be assessed resulting from "difficult conditions" as determined by Maintenance and Operations during site inspection and/or construction.

Applicant Signature

THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER
PAID
MAR 30 2005
Per... *[Signature]*
3233 ✓
THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input checked="" type="checkbox"/>	MF <input type="checkbox"/>
CSD-1	<i>100% AD CREDIT</i>	COMMERCIAL USE	
SRCSD / ESDs	<i># 2314</i>		
CONSTRUCTION			
IN-LIEU			
TOTAL FEE	# 2314		

APN: *027-0242-024*

DESCRIPTION/ SUBDIVISION _____ LOT: _____

PROPERTY ADDRESS *5832 WILKINSON STREET*

OWNER *LEONARD SUZANNE BERMUDEZ*

MAILING ADDRESS *SAME*

CITY-STATE-ZIP *SACRAMENTO, CA 95824* PHONE _____

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE *Robert Louren*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

RECEIPT

COUNTY SANITATION DISTRICT 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

7X10 III
April 1, 2005 **SEWER IMPACT FEE** *City of Sacramento*
 PERMIT AND CALCULATION

APPLICATION NO: _____ BLDG PERMIT NO. *SND2005-00273*

GENERAL INFORMATION

THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER

PAID
APR 01 2005
 Per.....

THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION

BUILDING USE

INSPECTION		RESIDENTIAL SF <input checked="" type="checkbox"/> MF <input type="checkbox"/>
CSD-1		COMMERCIAL USE
SRCSD		
CONSTRUCTION	<i>\$4680</i>	<i>4 RESIDENTIAL SERVICE</i>
IN-LIEU		
TOTAL FEE	<i>\$4680</i>	

APN: *027-0242-024*

DESCRIPTION/
 SUBDIVISION _____ LOT: _____

PROPERTY ADDRESS *5832 WILKINSON STREET*

OWNER *LEONARD SUZANNE BERMUDEZ*

MAILING ADDRESS *SAME*

CITY-STATE-ZIP *SACRAMENTO, CA. 95824* HOME _____

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE *Robert Lauer*

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

RECEIPT

CITY OF SACRAMENTO
 NORTH PERMIT
 CENTER

JUN 01 2005

RECEIVED

Insulation Certificate

This is to certify that insulation has been installed in conformance with the current energy regulations, California Administration code. Title 24, State of California, in the building located at:

Site Address: 5832 Wilkinson St. Sacramento CA.
Number Street City State

Ceilings:

Blow: Manufacturer Greenfiber Thickness 10.59" R / Value R-38
Square Feet 904 # Bags / Lbs. Per Bag 40

Batts: Manufacturer Johns Manville Thickness 13" R / Value R-38

Batts: Manufacturer Johns Manville Thickness N/A R / Value N/A

Exterior Walls:

Manufacturer Johns Manville Thickness 3.5" R / Value R-13

Manufacturer Johns Manville Thickness N/A R / Value N/A

Floor Insulation:

Manufacturer Johns Manville Thickness N/A R / Value N/A

Air Infiltration: (Title 24)

Yes No

Other: _____

General Contractor: Bob Larsen Lic. # _____

By: _____ Title: _____ Date: _____

Insulation Contractor: Gold Star Insulation, Inc. Lic. # 797510

By: Patrice May Title: Admin Assistant Date: 3/2/06

Form 290

Certification of Compliance School District Development

Part I - To be completed by the APPLICANT

Owner's Name/Address Robert Lee ...
 Project Address 5822 ...
 Parcel Number 014-0127-181 Lot No. _____
 Subdivision Name Wilkinson No. of Units 1
 Applicant's Signature Robert Lee Title _____
 Phone No. ... 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 0507675
 Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
 Square Feet of Chargeable Building Area 1538
 Signature/Title Jay Gill Building Inspector Date 6-20-05

Part III - To be completed by the SCHOOL DISTRICT

School District SWSD Certificate No. 10694
 Exempt Comments demod 1300A
 Residential/Apartment/etc. 238 Square ft. x \$ 0.24 = \$ Ø
 Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____
 Total fees collected..... = \$ Ø

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 Yvonne ... Date 6/21/05

White & Canary - School District • Pink - Building Department • Goldenrod - Applicant

This form is to be filled out completely & signed by applicant/owner/contractor responsible for Title 24 Energy Compliance & returned to the field inspector at final.

INSTALLATION CERTIFICATE

(Page 1 of 13)

CF-6R

Site Address 0.5832 Wilkinson St Permit Number 027-0242-024

An installation certificate is required to be posted at the building site or made available for all appropriate inspections. (The information provided on this form is required; however, use of this form to provide the information is optional.) After completion of final inspection, a copy must be provided to the building department (upon request) and the building owner at occupancy, per Section 10-103(b).

HVAC SYSTEMS:

Heating Equipment

Equip. Type (pkg. heat pump)	CEC Certified Mfr Name and Model Number	# of Identical Systems	Efficiency (AFUE, etc.) [CE-1R value]	Duct Location (attic, etc.)	Duct or Piping R-value	Heating Load (Btu/hr)	Heating Capacity (Btu/hr)
pack	York		92%	Attic		48,000	

Cooling Equipment

Equip. Type (pkg. heat pump)	CEC Certified Compressor Unit Mfr Name and Model Number	# of Identical Systems	Efficiency (SEER, etc.) [CE-1R value]	Duct Location (attic, etc.)	Duct R-value	Cooling Load (Btu/hr)	Cooling Capacity (Btu/hr)
pack			92%	Attic		19,500	

1. \geq reads greater than or equal to.
 I, the undersigned, verify that equipment listed above is: 1) the actual equipment installed, 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings, and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

[Signature]
 Signature, Date

Installing Subcontractor (Co. Name)
 OR General Contractor (Co. Name) OR Owner

WATER HEATING SYSTEMS:

Heater Type	CEC Certified Mfr Name & Model Number	Distribution Type (Std. Point-of-Use)	If Recirculation, Control Type	# of Identical Systems	Rated Input (kW or Btu/hr)	Tank Volume (gallons)	Efficiency (EF, RE)	Standby Loss (%)	External Insulation R-value
gas					40,000				

2. For small gas storage (rated input of less than or equal to 75,000 Btu/hr), electric resistance and heat pump water heaters, list Energy Factor. For large gas storage water heaters (rated input of greater than 75,000 Btu/hr), list Recovery Efficiency, Standby Loss and Rated Input.
 3. R-12 external insulation is mandatory for storage water heaters with an energy factor of less than 0.58.

Faucets & Shower Heads:

All faucets and showerheads installed are certified to the Commission, pursuant to Title 24, Part 6, Section 111.

I, the undersigned, verify that equipment listed above my signature is: 1) the actual equipment installed; 2) equivalent to or more efficient than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) equipment that meets or exceeds the appropriate requirements for manufactured devices (from the Appliance Efficiency Regulations or Part 6), where applicable.

[Signature] 4-6-06
 Signature, Date

Installing Subcontractor (Co. Name) OR
 General Contractor (Co. Name) OR Owner

COPY TO: Building Department
 HERS Provider (if applicable)
 Building Owner at Occupancy

[Signature]

Site Address

Permit Number

FENESTRATION/GLAZING:

Manufacturer/Brand Name (GROUP LIKE PRODUCTS)	Product U-Factor ¹ (≤ CF-1R value) ²	Product SHGC ¹ (≤ CF-1R value) ²	# of Panes	Total Quantity of Like Product (Optional)	Square Feet	Exterior Shading Device or Overhang	Comments/Location/Special Features
1. Front	0.600	0.65	2		24.6	24"	FRONT
2. Left	0.600	0.65	2		1.6	18"	WEST SOUTH
3. Left	0.600	0.65	2		1.6	18"	SOUTH
4. Right	0.600	0.65	2		4.0	18"	NORTH
5. Right	0.600	0.65	2		4.0	18"	NORTH
6. Right	0.600	0.65			1.6		NORTH
7. Rear	0.600	0.65			4.0	24"	WEST
8. Rear	0.600	0.65			4.0	24"	WEST
9. Left	0.600	0.65			2.5	18"	SOUTH
10.							
11.							
12.							
13.							
14.							
15.							

¹ Manufactured fenestration products use the values from the product label. Field fabricated fenestration products use the default values from Section 116 of the Energy Efficiency Standards.

² Installed U-Factor must be less than or equal to values from CF-1R. Installed SHGC must be less than or equal to values from CF-1R, or a shading device (exterior or overhang) is installed as specified on the CF-1R. Alternatively, installed weighted average U-Factors for the total fenestration area are less than or equal to values from CF-1R.

I, the undersigned, verify that the fenestration/glazing listed above my signature: 1) is the actual fenestration product installed; 2) is equivalent to or has a lower U-Factor and lower SHGC than that specified in the certificate of compliance (Form CF-1R) submitted for compliance with the Energy Efficiency Standards for residential buildings; and 3) the product meets or exceeds the appropriate requirements for manufactured devices (from Part 1), where applicable.

Item #s
(if applicable)

Signature, Date

R. Jones
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner
OR Window Distributor

Item #s
(if applicable)

Signature, Date

owner
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner
OR Window Distributor

Item #s
(if applicable)

Signature, Date

BETTER BUILT
Installing Subcontractor (Co. Name) OR
General Contractor (Co. Name) OR Owner
OR Window Distributor

COPY TO: Building Department
HERS Provider (if applicable)
Building Owner at Occupancy



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

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

SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

PARCEL # 027-0242-024 PERMIT # 0507675
 SITE ADDRESS 5832 Wilkinson St. ACREAGE _____

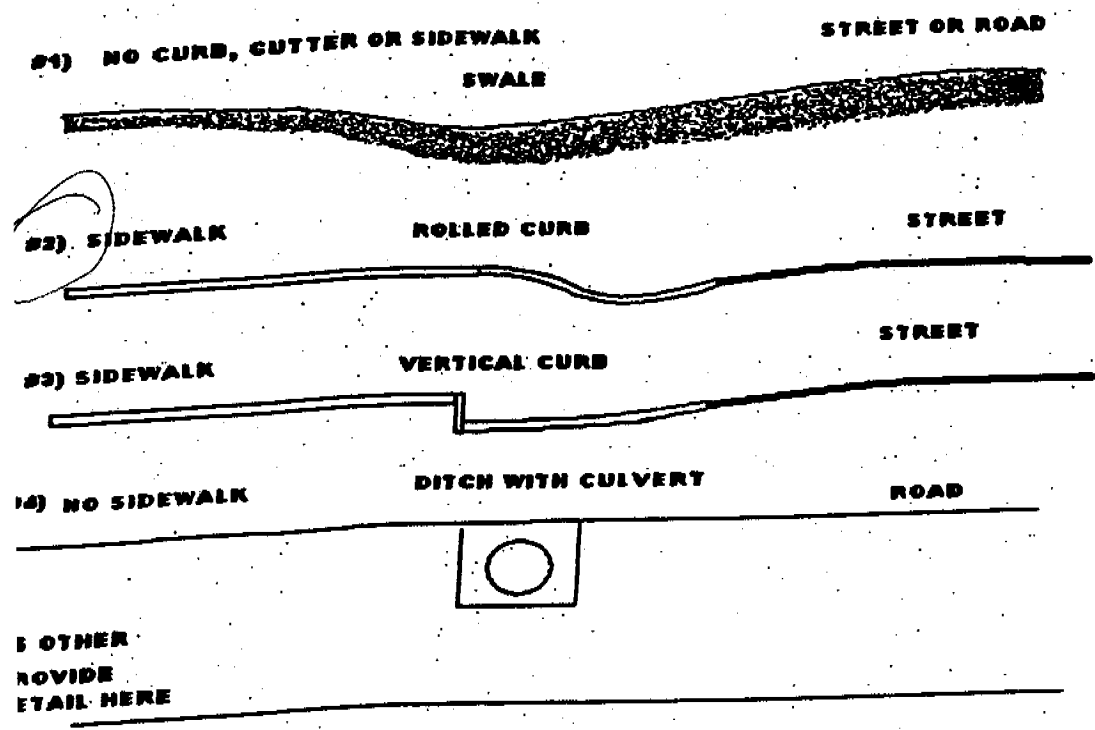
The City of Sacramento requires a building site to be graded to drain correctly and site drainage routed to an approved location. To help us understand the site drainage for your project and determine if a driveway permit or an encroachment permit is required please answer the following questions. All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

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

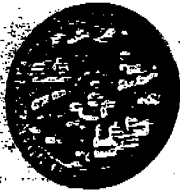
CIRCLE THE DRAWING NUMBER BELOW THAT BEST ILLUSTRATES THE EXISTING CONDITION AT THE LOCATION OF THE PROPOSED DRIVEWAY OR SITE ACCESS.



Information provided on this document is accurate. I understand that if this form is incomplete, 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.

By Robert Louie DATE June 21 05

NO. 916-392-5054



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

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DEPARTMENT
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2101 Arena Blvd., Suite 200
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Inspection: 1-916-808-4677

SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

PARCEL # 027-0242-024 PERMIT # 0507675
SITE ADDRESS 5832 Wilkinson St. ACREAGE _____

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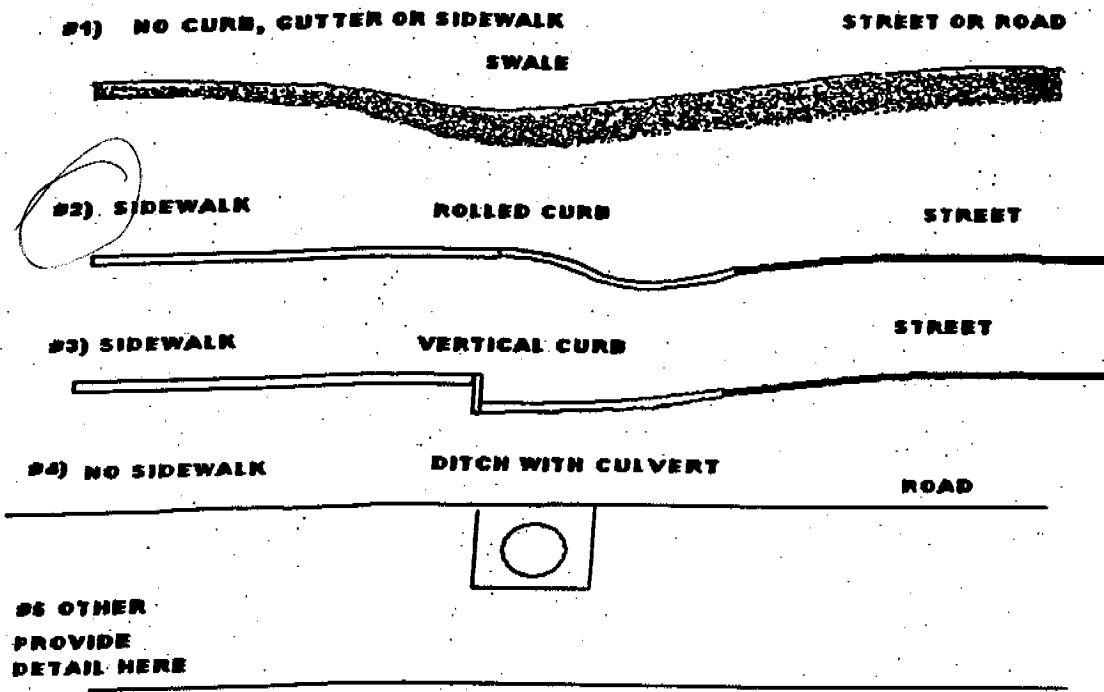
- | | | | |
|--|------------------------------------|------------------------------------|-----|
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| 7. Is there a sidewalk with a curb and gutter at the street? | *Y | <input checked="" type="radio"/> N | N/A |
| 8. Is the curb at the street square? | <input checked="" type="radio"/> Y | N | N/A |
| 9. Is there a rolled curb at the street? | Y | <input checked="" type="radio"/> N | N/A |
| 10. Is there a drainage ditch or culvert at the street? | <input checked="" type="radio"/> Y | *N | |
| 11. Does the lot drain from back to front? | <input checked="" type="radio"/> Y | *N | |
| 12. Does the lot drain from front to rear? | *Y | <input checked="" type="radio"/> N | |
| 13. Does another lot drain across this parcel? | *Y | <input checked="" type="radio"/> N | |
| 14. Does the lot drain from side to side? | *Y | <input checked="" type="radio"/> N | |
| 15. Does the site have an existing low area or drainage swale? | *Y | <input checked="" type="radio"/> N | N/A |
| 16. Does the drainage swale drain to an adjacent parcel? | <input checked="" type="radio"/> Y | *N | N/A |
| 17. Does the drainage swale drain to the street? | *Y | <input checked="" type="radio"/> N | |
| 18. Will existing drainage be re-routed? | *Y | <input checked="" type="radio"/> N | N/A |
| 19. Will drainage ditches or culverts be constructed or modified? | *Y | <input checked="" type="radio"/> N | |
| 20. Did this project require approval from the Zoning Administrator? | *Y | <input checked="" type="radio"/> N | |
| 21. Did the project require approval from the Planning Administrator? | *Y | <input checked="" type="radio"/> N | |

ISSUED
City of Sacramento
JUL 27 2005
NORTH PERMIT
CENTER

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.

DESIGNED BY Robert Loran DATE June 21 05

PROJECT NO. 916-392-5054