CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Site Address: 2175 56TH AV SAC

Parcel No:

CONTRACTOR

035-0262-014

<u>OWNER</u>

Sub-Type:

NOTHR

2

0012971

Housing (Y/N): N

Permit No:

Insp Area:

ARCHITECT
CAROLYN DOSTY
G GANYON BOAD

WYATT/CAROLYN DOSTY 5355 LONG CANYON ROAD FAIR OAKS, CA. 95628

Nature of Work: INSTALL FIRE ALARM PULL STATION AND BELL. FOR RES. CARE FACILITY, SIX BEDS.

		Lender'sAddres	ess	
LICENCED CONTENT CTO			y of perjury that I am licensed under provisions of C	hapter '
(commencing with section 7000)	of Division 3 of the Busine	ss and Professions Code and m	ny license is in full force and effect.	
			Contractor Signature	
following reason (Sec. 7031.5, E any structure, prior to its issuance of the Contractors License Law	Business and Professions Conce, also requires the applicant (Chapter 9 (commencing was for the alleged exemption).	de; any city or county which re it for such permit to file a signe with Section 7000) of Division	y that I am exempt from the contractors License Larequires a permit to construct, alter, improve, demolish ed statement that he or she is licensed pursuant to the permit by the Business and Professions Code) or that he so by any applicant for a permit subjects the applicant	rovision or she i
for sale (Sec. 7044, Business at thereon, and who does such wor sale. If, however, the building on not build or improve for the purp	nd Professional Code: The rk himself or herself or thro or improvement is sold with pose of sale.)	 Contractors License Law doe ugh his/her own employees, pr nin one year of completion, the 	on, will do the work, and the structure is not intended of the sest of apply to an owner of property who builds or provided that such improvements are not intended or of e owner-builder will have the burden of proving that the second of the	ffered for e/she di
I, as owner of the prope Code: The Contractors License contractor(s) licensed pursuant to	: Law does not apply to an o	owner of property who builds o	s to construct the project (Sec. 7044, Business and Proor improves thereon, and who contracts for such project.)	ofession ets with
1 am exempt under Sec	B & PC	for this reason:	0-1-2-11-64	
Date //-	Owner	Signature CV	Cy)	
- 11 a sumamameta and lauatione	shown on the application or permissible or prohibited lo	 accompanying drawings and to cations for such improvements. 	on the representation of the applicant that the applicate that the improvement to be constructed does not violate. This building permit does not authorize any illegal liments.	c ally la
relating to building construction	and herby authorize represe	entative(s) of this city to enter u	te to comply with all city and county ordinances and upon the abovementioned property for inspection purp	state law oses.
	—OV Applier	ant/Agent Signatute	ewy / post	
Date				
WORKER'S COMPENSA i have and will maintain performance of work for which	a certificate of consent to se the permit is issued.	elf-insure for workers' compensation	ty of perjury one of the following declarations: sation as provided for by Section 3700 of the Labor Co	
WORKER'S COMPENSA i have and will maintain performance of work for which	a certificate of consent to se the permit is issued.	ourance, as required by Section	sation as provided for by Section 3700 of the Labor Co in 3700 of the Labor Code, for the performance of the	
WORKER'S COMPENSA i have and will maintain performance of work for which the large and will maintain	a certificate of consent to se the permit is issued.	ourance, as required by Section	sation as provided for by Section 3700 of the Labor Co in 3700 of the Labor Code, for the performance of the	

Date of Request:	
By:	

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION PLANNING AND ZONING INFORMATION REQUEST

Project Address: 1/5 () () () () () () () () () (
Assessor's Parcel Number: 20000
Previous Use: Scarch land to the Confermer
Description of Request/Proposed Use: / range to the Proposed Use: / range
John Timberger
Con fawer
Is This a Change of Use?
Prior Applications for Project Site(P#, Z#, DRPB#): Zoning Designation:
Comments: a Residential Care Facility
with 6 or fewer inhabituals
is OK if lecensed by Ho
Sate of Cales
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 YES NO
Planning Review by/Date: 17.00

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

MICROFILM AFTER FINAL

TO:	BUILDING	G DEPARTMENT	DATE:	12-11-00
FROM:	Troy Malas Fire Marsha			
SUBJECT:	FIRE SYST	TEM INSPECTION		
A final inspec	ction of the ne	wly installed fire system	at:	
	X1 13	56 th me		
Has been cond	ducted by Insp	pector		
	14,	Cooke		
On	11-7-			·
00-129	7/-100	194	Fire	Merm Final
Permit Numbe	er	Square Footage	Type of Insp	
They system is	s acceptable b	y this department.		
Rh	a lun	~		
	. Woodman, evention Office	cer II		
	413	_		
F.D. Reference	Number			

BUILDING DEPARTMENT

TO:

FROM:	Troy Malaspino Fire Marshal	
SUBJECT:	FIRE SYSTEM INSPECTION	
A final inspe	ction of the newly installed fire system a	
Has been con	nducted by Inspector	
	7 Cooke	en e
On	-8-00	
00-12	971-100 per 194 Square Footage	Fire Harin
Permit Numb	per /// Square Footage	Type of Inspection
They system	is acceptable by this department.	
2 W	ordin_	
-	L. Woodman, Prevention Officer II	
00	-412	
F.D. Referen	ice Number	