

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9909128
Insp Area: 4

Site Address: 3730 MODELL WY SAC
Parcel No: 250-0331-031

Sub-Type: NOTHR
Housing (Y/N): N

CONTRACTOR
ARKAD DEVELOPMENT CORP
2100 PROFESSIONAL DR #200
ROSEVILLE CA 95661

OWNER
TOWNHOUSE VILLAS CO
255 W. JULIAN ST #301
SAN JOSE CA 95110

ARCHITECT

Nature of Work: (N)SWIMMING POOL,EQUIPMT ROOM&CONVERT(E) STORAGE/LAUNDRY RM TO RESTROOMS(PER HEALTH)

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: Frank 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: 16 126 Date: 1 10 99 Contractor Signature: [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 herefrom 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):

_____ 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.)

_____ 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: _____ Owner Signature: [Signature]

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: 1 10 99 Applicant/Agent Signature: [Signature]

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: STATE FUND Policy Number: 1508933-99 Exp Date: 03/01/2000

(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: 1 10 99 Applicant Signature: [Signature]

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.

Date of Request: _____
By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 3730 Modell Ave

Assessor's Parcel Number: 250-0331-031

Previous Use: APT COMPLEX

Description of Request/Proposed Use: _____

ADD NEW SWIMMING POOL

Is This a Change of Use? _____

Zoning Designation: R-3

Prior Applications for Project Site(P#, Z#, DRPB#): _____

Comments: Reqs. a Staff Design Review Appl. (Strawberry Manor) (No appl. noticing reqd. per LUIS S.)

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: W. J. Moor 8/13/99

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

MICROFILM AFTER FINAL

CITY OF SACRAMENTO

APPLICATION FOR COMMERCIAL BUILDING PERMIT

99-09128

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1231 I Street, Rm. 200
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY 79-087	Insp. Area <u>4C</u>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 3730 Modell Way Suite _____
PARCEL # 250-0331-031

<p style="text-align: center;">CONTACT</p> <p>Name <u>DAN Clift</u> <i>Roseville</i> Address <u>2130 Professional Drive Ste. 200</u> Phone <u>(916) 791-0400</u> FAX <u>791-6545</u> E-mail _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>763026</u></p> <p>Name <u>ARKAD Development Cev P.</u> Address <u>3429 Evergreen Cir. W. Sac.</u> Phone <u>(916) 374-9616</u> FAX _____ E-mail <u>SAME ADDRESS AS OWNER</u></p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>Dan Clift (ARKAD DEV. CORP.)</u> Address <u>2130 Professional Dr. Ste 200</u> Phone <u>916 791-0400</u> FAX <u>791-6545</u> E-mail _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>NORTHLAND VILLAGE</u> Address <u>2130 Professional Drive Ste 200 R.V.</u> Phone <u>(916) 791-0400</u> FAX <u>791-6545</u> E-mail _____</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State Compensation Insurance Fund
→ WORKER'S COMPENSATION POLICY # 1508933-99 EXPIRATION DATE: 03-01-00

NATURE OF WORK IN DETAIL: Swimming Pool & EQUIPMENT ROOM
W/ heated storage room
Convert laundry room into restrooms

OCCUPANT/TENANT: NORTHLAND VILLAGE VALUATION: \$ 43,000

FLOOD STATUS:				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 fl Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N	Fed Code	Vio. File		
		<u>900</u>		<u>R1</u>		SPR	ALARM	<u>20</u>	[H]	[Quad]
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	PW	UTIL	

COMMENTS: Check Regional San Fee Fees FAXED 8/14/99
Provide load calc for house panel for pool. + HEALTH DEPT

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



Customer Service Group
 PWA Water Quality Engineering for
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

REQUEST FOR SEWER FEE QUOTE

99-09128C

DATE 8/16/99	REQUESTOR BARBARA LARSEN	NUMBER OF PAGES 1
FROM City of SACRAMENTO	FAX 264-7646	PHONE
TO SRCSD Customer Service	RESPONDER DOLORIS ROSS	FAX 875-6253

URGENT -- Applicant is in office or ready to pay permit
 If urgent, call 875-6820 to notify an Engineering employee that you faxed a request.
 Press zero to speak to the operator.

NOT URGENT -- Applicant has requested informal quote.

Applicant	NAME DAN CLIFT BIB	PHONE 791-0400
Property	ASSESSOR'S PARCEL NUMBER(S) 250-0831-031	PROPERTY ADDRESS 3730 MODELL WAY
Project	PLAN CHECK # BUILDING PERMIT NO. 99-09128C	<input checked="" type="checkbox"/> New construction <input type="checkbox"/> Remodel <input checked="" type="checkbox"/> Change in use
	USE	CURRENT // PREVIOUS Apts. w/ ABANDONED LAUNDRY BLDG. PLANNED NEW SWIMMING POOL & REMODEL LAUNDRY TO SHOWER + RESTROOM
	SQUARE FOOTAGE	CURRENT // PREVIOUS PLANNED NEW POOL

9660 ECOLOGY LANE • SACRAMENTO, CALIFORNIA • 95827-3881
 ENGINEERING (916) 875-6820 • FAX (916) 875-6253