

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0503597

Insp Area: 4

Thos Bros: 277J1

Site Address: 917 BELL AV SAC

Parcel No: 237-0081-046

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR
OWNER BUILDER

OWNER
PLACENCIA RAFAEL C & RUFINA M
917 BELL AV
SACRAMENTO, CA 95838

ARCHITECT

Nature of Work: NEW 1-STORY SFD W/3,066 SF LIVABLE/489 SF ATTACHED GARAGED/230 SF OF PATIO AREA

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 _____ 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 0 _____ 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);

X SP 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).

X SP I am exempt under Sec. _____ B & PC for this reason: _____
Date 3/29/05 Owner Signature Shuu Placencia

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.

X SP Date 3/29/05 Applicant/Agent Signature Shuu Placencia

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:

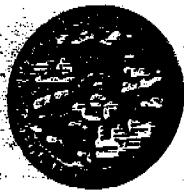
Carrier _____ Policy Number _____ Exp Date _____

X SP (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.

X SP Date 3/29/05 Applicant Signature Shuu Placencia

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.



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 # 237 - 0081 - 046 PERMIT # 0503597
SITE ADDRESS 917 Bell Avenue ACREAGE 1/2 acre

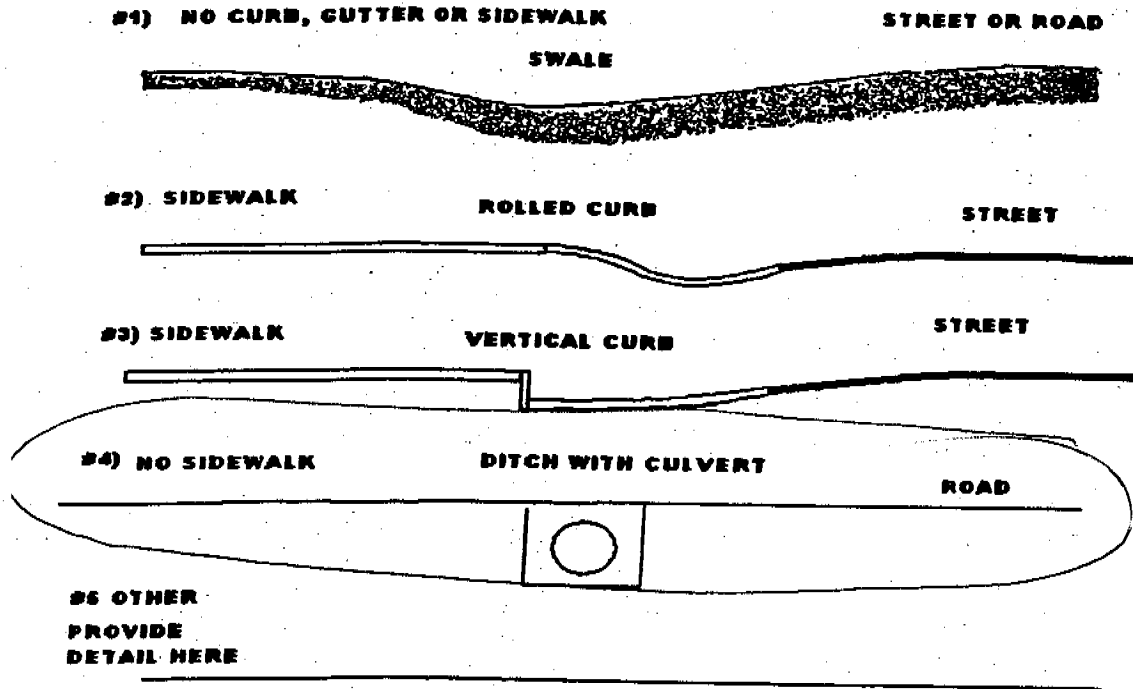
The City of Sacramento requires a building site to be graded to drain correctly and site drainage routed to an approved location. To help us understand the site drainage for your project and determine if a driveway permit or an encroachment permit is required please answer the following questions. All 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? | <input checked="" type="radio"/> Y | *N |
| 6. Is there a curb and gutter at the street level? | *Y | <input checked="" type="radio"/> N |
| 7. Is there a sidewalk with a curb and gutter at the street? | *Y | <input checked="" type="radio"/> N |
| 8. Is the curb at the street square? | *Y | N <input checked="" type="radio"/> N/A |
| 9. Is there a rolled curb at the street? | Y | N <input checked="" type="radio"/> N/A |
| 10. Is there a drainage ditch or culvert at the street? | Y | *N <input checked="" type="radio"/> 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? | 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 |
| 16. Does the drainage swale drain to an adjacent parcel? | *Y | <input checked="" type="radio"/> N <input checked="" type="radio"/> N/A |
| 17. Does the drainage swale drain to the street? | Y | *N <input checked="" type="radio"/> 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 | N <input checked="" type="radio"/> 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 | <input checked="" type="radio"/> N |
| 23. Is this a corner lot? | *Y | <input checked="" type="radio"/> N |
| 24. Is the posted speed limit on this street greater than 25 MPH? | <input checked="" type="radio"/> Y | <input type="radio"/> N |
| 25. Is this parcel located on a four-lane street? | *Y | <input checked="" type="radio"/> N |
| 26. If site is greater than 1/2 acre has an erosion and sediment control plan been submitted? | Y | *N <input checked="" type="radio"/> 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 <input checked="" type="radio"/> 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 <input checked="" type="radio"/> 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.

SIGNED Steve Placencia DATE 3/29/05

TITLE _____

PHONE NO. _____

917 Bell Av
05 035917

City of Sacramento Planning Division

PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 917 BELL AVE		APN: 237-0081-046
DRPB AREA / PUD / SPD: EXPANDE NORTH		ZONING: R-1
EXISTING LAND USE: VACANT		
PROPOSED USE: NEW SFR WITH ATTACHED GARAGE		
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 before 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: ER05-051 (COMPLETED 03-16-2005) 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 prior to issuance 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"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.	
COMMENTS: LOT: 20340 SQ FT. 62 X 74.2 = 4598 + 96 = 4694 / 20340 = 23% LOT COVERAGE. SETBACKS OKAY. FRONT SETBACK AT 64' IS OKAY AS LONG AS IT DOESN'T VARY MORE THAN 5' FROM ADDRESS 923 BELL AVENUE. SETBACKS OKAY. UNDER 40% PAVING IN FRONT SETBACK. MEETS MINIMUM INTERIOR GARAGE DIMENSIONS. ANY TREES THAT NEED TO BE REMOVED MUST GET PRIOR APPROVAL FROM CITY ARBORIST. Building permit must conform to approved plans and comply with all conditions of approval ER05-051.		
DATE: 03/16/05	BY: PCALDWELL	



1983507

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
FAXED PERMIT APPLICATION (certain restrictions apply)

Fax # 916-264-1901

Faxed request must be received in this office by 3:00 p.m. to be processed the following work day.
Note: Contractors must have a current certificate of Worker's Compensation Insurance.

Note: Work started before a Building Permit is issued will be subject to a queue fee

DATE: 3/16/05

IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDED:

RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)
JOB ADDRESS: 917 Bell Avenue UNIT # _____ CONTRACT PRICE \$ 198,401.97

CONTACT PERSON: Rafael Placeria CONTACT PHONE: _____

Property Owner: Pete Placeria

Contractor: _____ License # _____

Address: 372 Delaguna Way

Address: _____

City/State/Zip: Sacramento CA 95838

City/State/Zip: _____

Phone: 916 927 8130

Phone: _____ FAX: 0113

NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE <input type="checkbox"/> GARAGE # SQUARES: _____ Material: _____ <input type="checkbox"/> SIDING <input type="checkbox"/> wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> vinyl <input type="checkbox"/> stucco Note: Design Review approval may be required in certain areas.	<input type="checkbox"/> HVAC INSTALLATIONS (residential ONLY) <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> NEW <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: _____ Equipment: \$ _____ Cut-in: \$ _____ Note: Design Review approval may be required for rooftop units.	<input type="checkbox"/> WATER HEATER (residential ONLY) <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITE DAMAGE REPAIR (Describe locations below) Note: Design Review approval may be required in certain areas.	<input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING (residential ONLY) <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Water Service Replacement <input type="checkbox"/> Sewer Service Replacement <input type="checkbox"/> Gas Line Replacement <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> PGE *NOTE: Correction Notice items will require an additional building permit
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DESCRIPTION OF WORK:

New 1-story SFD w/3,000sq ft livable, 489 SF attached garage & 230 SF of patio

fax permit form (rev online 3/1/00/00)

[Handwritten signature]

Certification of Compliance School District Development Fees

PART 1 To be completed by APPLICANT

Owner's Name & Address Pedro and Sheri Hernandez
 Project Address 117 B-N AVE SANTA CL. 95833
 Parcel Number 237-0081-046-0000 Lot No. _____
 Subdivision Name _____ Number of Units _____
 Applicant's Signature & Title [Signature]
 Date 4/2/05 Phone No. (916) 997-0739

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 2 To be completed by BUILDING DEPARTMENT

Plan Identification Number 0503597 Building Type (CHECK ONE)
 Square Feet of Chargeable Building Area 3066 sq ft Residential
 Signature Jay [Signature] Apartment/Condominium
 Title Building Inspector Commercial/Industrial
 Date 4-7-05

PART 3 To be completed by SCHOOL DISTRICTS

Grant Joint Union High School District	
District Certification No.	<u>05-1198</u>
EXEMPT	<u>1528 sq ft</u>
Comments	<u>RESIDENTIAL / APARTMENT / CONDOMINIUM</u>
	<u>1538 Sq.Ft. x \$ 119 = \$ 1830.22</u>
COMMERCIAL / INDUSTRIAL	
	<u>Sq.Ft. x \$ = \$</u>
OTHER FEE TYPE	
	<u>Sq.Ft. x \$ = \$</u>
TOTAL FEES COLLECTED	<u>\$ 1830.22</u>

Robla Elementary School District	
District Certification No.	<u>05-051</u>
EXEMPT	
Comments	<u>RESIDENTIAL / APARTMENT / CONDOMINIUM</u>
	<u>1528 Sq.Ft. x \$ 96 = \$ 1466.88</u>
COMMERCIAL / INDUSTRIAL	
	<u>Sq.Ft. x \$ = \$</u>
OTHER FEE TYPE	
	<u>Sq.Ft. x \$ = \$</u>
TOTAL FEES COLLECTED	<u>\$ 1466.88</u>

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 district 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.

GRANT	ROBLA
Authorized School District Official	
Signature <u>[Signature]</u>	Signature <u>Cindi Jones</u>
Title _____	Title <u>Acct Tech</u>
Date <u>4/8/05</u>	Date <u>4/8/05</u>

Original: Grant Joint Union High School District/
 Robla Elementary School District
 1st Copy: Building Department
 2nd Copy: Applicant

GJUHSD: Facilities Planning and Construction Department
 Certificate of Compliance Form (rev. 10/02) bep

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

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SITE DRAINAGE AND ENCROACHMENT QUESTIONNAIRE

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