

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9912766
Insp Area: 2

Site Address: 7475 SHELBY ST SAC

Parcel No: 117-1350-013
N

LOT 13 LAGUNA VEGA NORTH UNIT 1

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

CONTRACTOR
D. R. HORTON INC.
111 BLUE RAVINE RD STE. 209
FOLSOM CA 95630

OWNER

ARCHITECT

Nature of Work: NSFR MP2124 9 RMS 2 STORY

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 2 License Number 70470 Date 11/15/99 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 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 _____ Owner Signature _____

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all encumbrances, 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 11/15/99 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 ARGONAUT INS. CO. Policy Number WC62600115505 Exp Date 07/01/2000

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 11/15/99 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.

CERTIFICATION OF COMPLIANCE
SCHOOL DISTRICT DEVELOPMENT FEES

(Print or Type)

PART I TO BE COMPLETED BY APPLICANT

PROPERTY OWNER'S NAME DK Horton
 OWNER'S ADDRESS 110 Blue Ravine Rd Suite 209 Folsom CA 95620
 PROJECT ADDRESS 117 1350 013
 PARCEL NO. 7475 Shelby St LOT NO. 13
 SUBDIVISION NAME LAUREL VEGA
 NUMBER OF UNITS 3.5 - house
 APPLICANT'S SIGNATURE [Signature]
 TITLE OF APPLICANT OWNER
 DATE 10-12-99 TELEPHONE NUMBER 916-255-1224

PART II TO BE COMPLETED BY BUILDING DEPARTMENT

PLAN IDENTIFICATION NO. 99 12766
 BUILDING TYPE (CHECK ONE)
 RESIDENTIAL (X) APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL ()
 SQUARE FEET OF CHARGEABLE BUILDING AREA 2124
 SIGNATURE [Signature]
 TITLE Bldg Insp DATE 11/6/99

PART III TO BE COMPLETED BY SCHOOL DISTRICT

SCHOOL DISTRICT 261151
 DISTRICT CERTIFICATION NO. 24354
 FEES COLLECTED

RESIDENTIAL	(1)	2124	SQ. FT. X \$	1.92	= \$	4,099.22
APARTMENT/CONDOMINIUM	(1)	2124	SQ. FT. X \$	1.34	= \$	2,846.16
COMMERCIAL/INDUSTRIAL	(1)	2124	SQ. FT. X \$	3.27	= \$	6,945.48

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 have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL
 SIGNATURE [Signature]
 TITLE [Signature] DATE PAID

- Original School District
- 1st Copy School District
- 2nd Copy Building Department
- 3rd Copy Applicant

PAID
 NOV 10 1999
 Facilities Planning
 Elk Grove Unified School District

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
 PERMIT AND CALCULATION SHEET

APPLICATION NO:		BLDG PERMIT NO: <u>014</u>	
GENERAL INFORMATION		THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER	
<ul style="list-style-type: none"> - DEPT 26 \$2,855.00 - # TRAN 401179 11/10/99 - RECEIPT 725485 091 \$2,855.00 		<p style="text-align: center;"><u>2855.00</u> <u>11/10/99</u></p> <p style="text-align: center;">THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE</p>	
FEE CALCULATION		BUILDING USE	
INSPECTION	<u>1</u>	RESIDENTIAL SF <input type="checkbox"/>	MF <input type="checkbox"/>
CSD-1	<u>117</u>	COMMERCIAL USE	UNITS
SRCSD	<u>0,355</u>		
CONSTRUCTION			
IN-LIEU			
TOTAL FEE	<u>2,855</u>		
APN: <u>117-1350-013</u>			
DESCRIPTION/ SUBDIVISION		LOT: <u>13</u>	
<u>LAGUNA VEOA</u>			
PROPERTY ADDRESS <u>7475 SHELBY ST SAC</u>			
OWNER <u>D. R. HORTON</u>			
MAILING ADDRESS <u>110 BLUE RAINE RD.</u>			
CITY-STATE-ZIP		PHONE	
<u>FOLSOM</u>		<u>355-1234</u>	
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.			
APPLICANT SIGNATURE <u>[Signature]</u>			
CONSOLIDATED UTILITY BILLING USE ONLY			
ACCT _____	INPUT _____	START _____	

INSPECTOR'S COPY

RESIDENTIAL BUILDING PERMIT APPLICATION

- New Construction Addition Remodels Other

Project Address: 7475 SHELBY STREET Assessor Parcel # 117-1350-013

Lot Number: 13
OWNER INFORMATION:

Legal Property Owner: D.R. Horton Phone # (916) 355-1234
 Owner Address: 110 Blue Ravine Road #209 City Folsom State CA Zip 95630

CONTRACTOR INFORMATION:

Contractor: D.R. Horton Lic. # 750190 Phone # 355-1234 Fax # 355-8077

PROJECT INFORMATION: PLAN 4 w/BONUS ROOM MP# 2124

Land Use Zone RIA Occupancy Group R3 Construction Type VN Fed Code 1A
 No. of stories: 2 No. of rooms: 9 Street width: 44' ROW
 1st Floor Area 1060 2nd Floor Area 1064 Basement _____ Roof Material CONC. TILE

AREA IN SQUARE FOOT OF:

	EXISTING	NEW
Dwelling/Living	_____	<u>2124</u>
Garage/Storage	_____	<u>436</u>
Decks/Balconies	_____	<u>75</u>
Carports	_____	_____

SCOPE OF WORK: New Construction

FOR OFFICE USE ONLY:

- | | | |
|---|---|---|
| <input type="checkbox"/> Information above complete | <input type="checkbox"/> AR Flood Waiver required | <input type="checkbox"/> Planning Approval |
| <input type="checkbox"/> Violation files checked | <input type="checkbox"/> Flood Elevation Certificate Required | <input type="checkbox"/> Design Review Approval |
| <input type="checkbox"/> Standard setbacks | <input type="checkbox"/> Water Development Infill Area | <input type="checkbox"/> Special Fee Districts Apply: _____ |
| <input type="checkbox"/> County Sewer | | |

NEW STRUCTURES & ADDITIONS

❖ THE FOLLOWING MUST BE PROVIDED IN ORDER TO SUBMIT FOR PLAN REVIEW

- | | |
|---|---|
| <input type="checkbox"/> 2 COMPLETE PLANS, LEGIBLE & DRAWN TO SCALE | ❖ Plans to include: site plan, floor plan, elevations, roof/ceiling plan, foundation and structural framing details, and structural calculations for non-conforming structures. |
| <input type="checkbox"/> 3 SETS IF PROJECT IS IN A DESIGN REVIEW AREA | |
| <input type="checkbox"/> Title 24 Energy Compliance documentation | <input type="checkbox"/> 11" x 17" copy of floor plan for County Assessor |
| <input type="checkbox"/> Grading and Erosion Control Questionnaire | <input type="checkbox"/> Plan Review Fees |

Date: _____

Received by: (staff) _____

ACTIVITY/PERMIT # _____