

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0609614

Insp Area: 4

Thos Bros: 257B3

Site Address: 2241 BAY HORSE LN SAC

Parcel No: 201-0960-105

Sub-Type: ASFR

Housing (Y/N): N

CONTRACTOR  
DOUBLE D & D  
5330 BROOKS AV  
LOOMIS, CA 95650

OWNER  
GOODMAN DAVID  
2241 BAY HORSE LN.  
SACRAMENTO, CA 95835

ARCHITECT

Nature of Work: CONSTRUCT NEW 162 SF FREESTANDING LATTICE PATIO COVER @ REAR OF SFD

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 03 License Number 841976 Date 6/27/06 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 6/27/06 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 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 \_\_\_\_\_ Applicant/Agent 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:

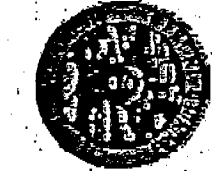
Carrier \_\_\_\_\_ Policy Number \_\_\_\_\_ Exp Date \_\_\_\_\_

(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 6/27/06 Applicant Signature \_\_\_\_\_

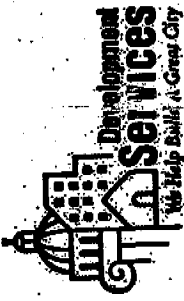
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.



**CITY OF SACRAMENTO**  
**PLANNING & BUILDING DEPARTMENT**  
 BUILDING DIVISION

WWW.CITYOFSACRAMENTO.ORG  
 Help Line: 1-916-808-5656 OR 1-966-EZ-PERMIT  
 Inspection: 1-916-808-7622



Fax # 916-808-8370

North Permit Center  
 2101 Arena Blvd., Suite 200, Sacramento, CA 95834

Downtown Permit Center, New City Hall  
 915 I Street, 3<sup>rd</sup> Floor, Sacramento, CA 95814

Fax # 916-808-1901

**FAXED PERMIT APPLICATION**  
 (certain restrictions apply)

Date: 6.27.06

Activity # 0607614

*Faxed request must be received in this office by 3:00 P.M. to be processed the following workday.  
 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 surd fee.*

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

Job Address: 994 Bayshore Ln     RESIDENTIAL     APARTMENTS (4+ units per building)     COMMERCIAL (limited)    Unit # \_\_\_\_\_    Contract Price \$ 2,800  
 Contact Person: Les    Contract Phone: 916 599 9557  
 Property Owner: David Gordon    Contractor: David Dool    License # 891976  
 Address: 2841 Bayshore Ln    Address: 5530 Woods Ave  
 City/State/Zip: Sac CA 95835    City/State/Zip: Leans CA 95650  
 Phone: 2785-7113    Phone: 916 599 9557    Fax: \_\_\_\_\_

Nature of Work: (Provide detailed description of work & indicate type of work in selections below).  
Removal of Porch

Description of Work: A foundation for a lattice 9x18 freestanding 16238

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: _____ # 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 *Design Review approval may be required.	<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: \$ _____ *Design Review approval may be required.	<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 Termites Damage Repair (Describe Locations Below) *Design Review approval may be required.	<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"/> PG&E ♦ NOTE: Correction Notice items will require an additional building permit.
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City of Sacramento  
Development Services Department  
**PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL**

ADDRESS: 2241 BAY HORSE LANE	APN: 201-0960-105
DRPB AREA / PUD / SPD: EXPANDED NORTH / NORTHBOROUGH PUD	ZONING: R-1A-PUD
EXISTING LAND USE: SINGLE STORY RSF WITH ATTACHED GARAGE	
PROPOSED USE: PATIO COVER ADDITION TO REAR OF EXISTING RSF	
<p><b>PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:</b></p> <p><input type="checkbox"/> Planning review is NOT required.</p> <p><input type="checkbox"/> Use is NOT allowed; applicant CANNOT submit for plan check.</p> <p><input type="checkbox"/> Requires APPLICATION(s):    PC        ZA        IR        ER        DR        PB</p> <p style="margin-left: 40px;">Required Planning application must be approved <i>before</i> project can be submitted for plan check</p> <p><input type="checkbox"/> Application(s) IN PROGRESS:    File Number:</p> <p style="margin-left: 40px;">Application must be approved before project can be submitted for plan check.</p> <p><input type="checkbox"/> Application(s) COMPLETED:    File Number &amp; approval date:</p> <p style="margin-left: 40px;">Building permit must conform to approved plans and comply with all conditions of approval. Do NOT accept applications for a building permit prior to the end of the 10-day appeal period.</p> <p><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.</p> <p><input checked="" type="checkbox"/> Meets setback &amp; lot coverage requirements as shown on site plan provided.</p> <p><input checked="" type="checkbox"/> Plans to be submitted have been stamped/signed by Planning counter staff.</p> <p><input type="checkbox"/> Route to SITE for plan check and inspection.</p> <p><input type="checkbox"/> Route to SITE for inspection only, plan check not required.</p> <p><input type="checkbox"/> Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.</p>	
<p>CONDITIONS AND COMMENTS:    APPROXIMATE LOT AREA = 4800 (NOT VERIFIED THRU METROSCAN)</p> <p>EXISTING FOOTPRINT +2128 + 162 PROPOSED MINUS ALLOWANCES (134 FRONT PROCH + 100 ALLOWANCE) = 2056 / 4800 = 43% TOTAL LOT COVERAGE. MAXIMUM ALLOWABLE LOT COVERAGE FOR SINGLE STORY IN PUD IS 45%. MEETS ALL SETBACK AND LOT COVERAGE REQUIREMENTS. NO ADDITIONAL PLANNING ENTITLEMENTS APPARENT. NO DESIGN REVIEW APPROVAL REQUIRED, NOT VISIBLE FROM STREET VIEW.</p>	
DATE: 06/27/06	BY: BONNIE SURGEON