

NOTE: DO NOT COVER OR CONCEAL ANY BUILDING, ELECTRICAL, PLUMBING OR MECHANICAL WORK WITHOUT INSPECTOR'S SIGNATURE IN PROPER PLACE.

BUILDING SITE ADDRESS: **6784 Bobbie Bodine Cir** SUITE AREA: **2R**

INSPECTOR: **[Signature]** DATE: **8/17/98** PLAN CHECK NO.: **9105037**

FOUNDATION FORMS: **[Signature]** DATE: **8/17/98** COMMUNITY PLAN NO.: **15626** ZIP CODE: **91604** PHONE NO.: **910-992-6064**

CONCRETE SLAB FORMS: **[Signature]** DATE: **8-4-98** LICENSED CONTRACTOR: **Mark Berry** RA32 CLMONT CT 15626

MECH. UNDER FLOOR/SLAB: **[Signature]** DATE: **8-4-98** PROPERTY OWNER: **ELVERTA CA** ARCH. ENGR.:

ELECT. UNDERGROUND: **[Signature]** DATE: **8-4-98** EBERHARD WANTS: **CITY BOBBIE CT** LICENSE NO.: **1539258**

ELECT. CONDUIT-SLAB: **[Signature]** DATE: **8-4-98** ARCH. ENGR.:

DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED

FLOOR JOISTS OR GIRDERS: **[Signature]** DATE: **8-4-98** NO. OF STORES: **1** NO. OF ROOMS: **2** ROOF COVERING: **CONCRETE** AREA 1ST FLOOR: **200** TOTAL AREA: **260** GARAGE AREA: **0** PATIO AREA: **0** USE ZONE: **R** STREET WIDTH: **20'**

DO NOT INSTALL SUB FLOOR UNTIL ABOVE HAS BEEN SIGNED

INSULATION/WALL/FLOOR: **[Signature]** DATE: **8-4-98** THIS PERMIT IS FOR: BUILDING MECHANICAL PLUMBING ELECTRICAL SITE FIRE

TOP MECHANICAL/WALL/CEIL. **[Signature]** DATE: **8-4-98** NATURE OF WORK IN DETAIL: **ADDITIONS TO REAR OF HOME WHICH EXTENDS EXISTING MAINTENANCE INTO LAKEVIEW W/ BATH & WALK IN CLOSET**

ROUGH ELECTRICAL/WALL/CELL. **[Signature]** DATE: **8-4-98** SPECIAL CONDITIONS ATTACHMENTS: **Not per Department rules**

FRAME: **[Signature]** DATE: **8-4-98** CITY OF SACRAMENTO BUILDING INSPECTION DIVISION 264-5191 WORKERS COMPENSATION DECLARATION

ROOF PLYWOOD NAIL COMM. & APTS: **[Signature]** DATE: **8-19-98** I hereby affirm under penalty of perjury one of the following declarations:

EXTERIOR LATH/SIDING: **[Signature]** DATE: **8-15-98** 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.

DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED

INT. LATH OR WALL BD. NAILING: **[Signature]** DATE: **8-15-98** 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:

DO NOT TAPE PLASTER OR TOP UNTIL ABOVE HAS BEEN SIGNED

SERVICE UNDERGRD CONDUIT: **[Signature]** DATE: **8-15-98** Carrier: **[Signature]** Policy Number: **110**

SEWER SERVICE: **[Signature]** DATE: **8-15-98** 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:

WATER SERVICE: **[Signature]** DATE: **8-15-98** (This section need not be completed if the permit is for one hundred dollars (\$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.)

SPRINKLER SYSTEM: **[Signature]** DATE: **8-15-98** DATE: **7-27-98** Applicant: **[Signature]** SIGNED: **[Signature]**

DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED

FINAL APPROVALS

DO NOT OCCUPY BUILDING UNTIL ALL OF THE ABOVE HAVE BEEN SIGNED AND CERTIFICATE OF OCCUPANCY ISSUED

THIS CARD TO BE POSTED ON JOB AT ALL

VALUATION \$ **16,965.05** ISSUED BY: **[Signature]** DATE ISSUED: **7/24/98** BUILDING PERMIT FEE \$ **582.00** PLAN CHECK PROC. FEE \$ **125.00** S.M.I. FEE \$ **1.30** CONST. EXCISE TAX \$ **135.72** CITY BUS LICENSE \$ **6.79** TECH. FEE \$ **5.16** WATER DEV. FEE \$ **0** CITY SEWER DEV. FEE \$ **0** REG. SEWER FEE \$ **0** RESIDENTIAL CONSL. TAX \$ **0**

TOTAL \$ **531.37**

FED CODE

CONSTR. TYPE

OCCUP. GROUP

98

9

3

0

5

0

9

9

9

9

9

9

9

9

9

9

9

9

9

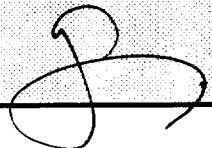
CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION

EXPRESS PLAN REVIEW

SUBMITTAL DATES

| First Review | | 2nd Review | | 3rd Review | |
|--------------|-----|------------|-----|------------|-----|
| IN | OUT | IN | OUT | IN | OUT |
| 6/8/98 | 1/1 | 6/29/98 | 1/1 | 7/9/98 | 1/1 |

PLAN CHECK # 9805039
 ADDRESS: 6784 BODINE CR
 Commercial Residential

ACCEPTED by (Staff):


| DISCIPLINE | 1ST REVIEW | | | 2ND REVIEW | | | 3RD REVIEW | | |
|---------------------|------------|-------|---------|------------|-------|------|------------|-------|------|
| | Status | Staff | Date | Status | Staff | Date | Status | Staff | Date |
| LIFE SAFETY | | | | | | | | | |
| STRUCTURAL | 3k | GT | 6/10/98 | | | | | | |
| MECHANICAL/PLUMBING | | | | | | | | | |
| ELECTRICAL | | | | | | | | | |
| FIRE | | | | | | | | | |
| PLANNING | | | | | | | | | |

STAFF COMMENTS: _____



**City of Sacramento Development Services Division
Planning and Zoning Information Request**

Project Address: 5784 Bodine Ct.

Assessor's Parcel Number: 117-0063-012

Current Land Use: _____

Description of Request/Proposed Use:

Proposed addition

bedroom to rear of existing

single-family

Zoning Designation: R-1

Prior Applications for Project Site(P#,Z#,DRPB#): None

Comments: conform to Z.O. Regs.

Are There Any Planning Issues?: (Circle One) YES NO

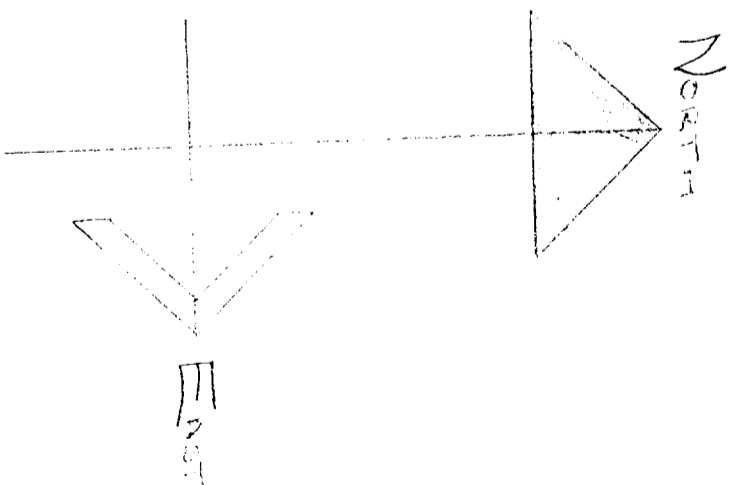
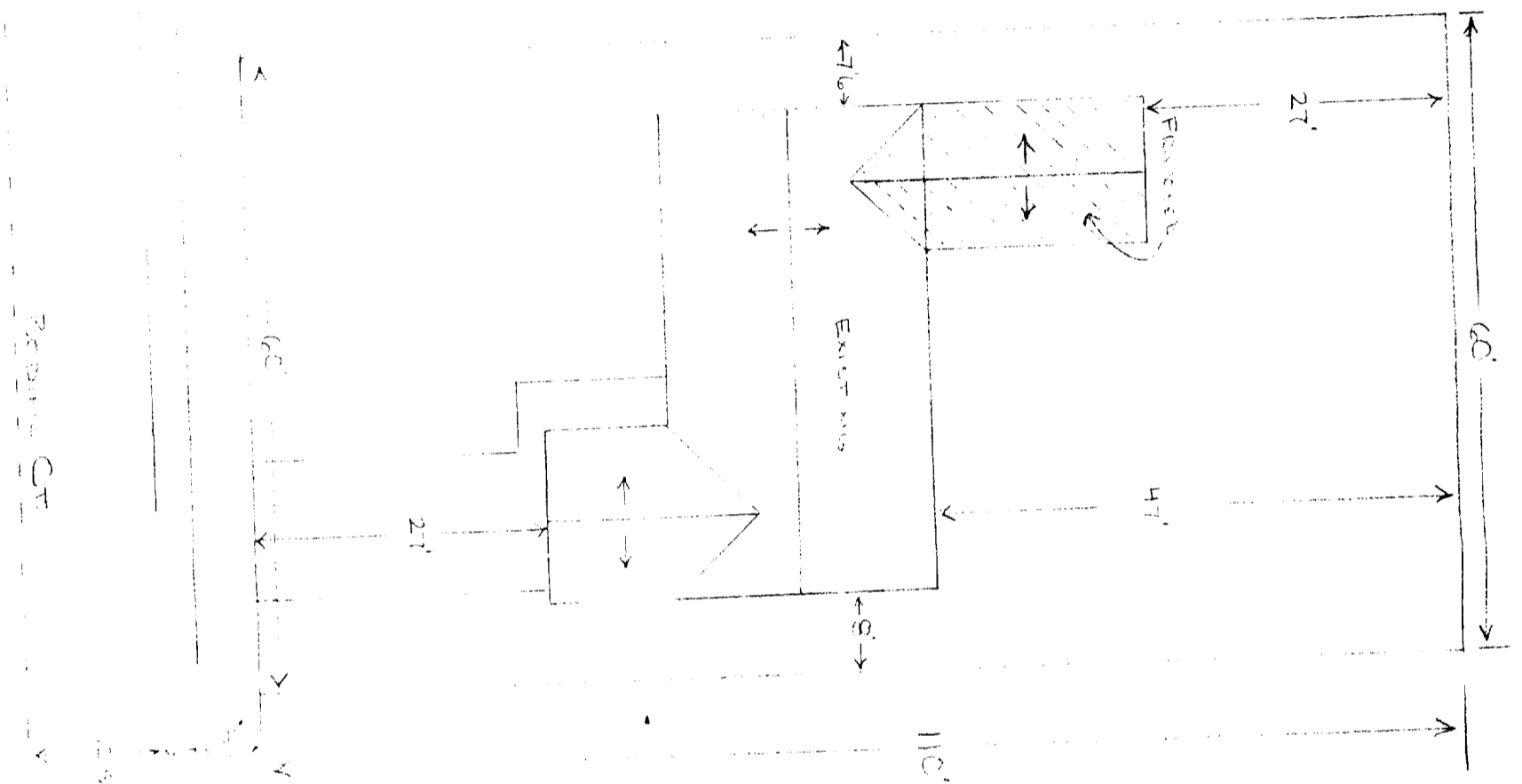
Site Plan Check Required? (Circle One) YES NO

Design Review/ Preservation Required?: (Circle One) YES NO

Planning Review by/Date: W. Westman 6-5-95

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

Plot Plan



Plot Plan 6784 Bodine Ct

RECEIVED
JUN 08 1998

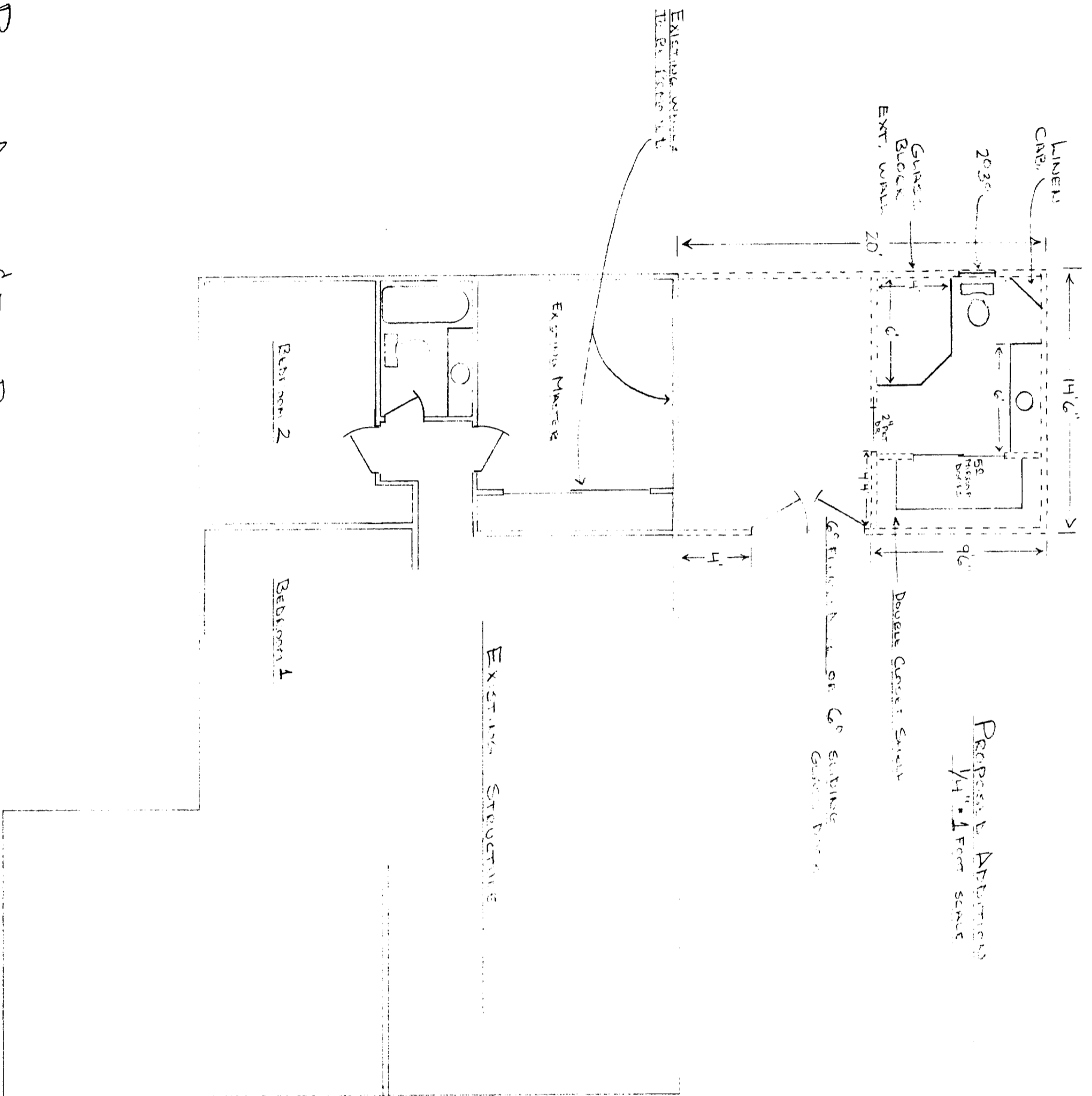
Building Inspection Division

ISSUED

JUL 27 1998

SALEMAN Building Division

Proposed Addition & Floor Plans



Proposed Addition
14' x 11' Foot Scale

ISSUED

JUL 27 1998

Santa Ramo Building Division

OWNER'S NAME: BARBARA WAITS
 PROJ. ADDRESS: 117-0063-012
 A.P.N.: 6784 BODINE CR
 BUILDING PERMIT #: _____
 NEW PLAN #: _____
 AREAS: _____