

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0514576

Insp Area: 3

Thos Bros: 317F2

Site Address: 3356 33RD ST SAC

Parcel No: 013-0284-017

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR
OWNER BUILDER

OWNER
SERNICH, ANA MARIA
3356 33RD ST
SACRAMENTO CA 95817

ARCHITECT

Nature of Work: R/R KITCHEN CABINETS, SINK, APPLIANCES. R/R BATHROOM FLOOR, TOILET SURROUND, CABINETS.

ISSUED
CITY OF SACRAMENTO

SEP 20 2005

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 _____ DOWNTOWN PERMIT CENTER

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);

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 09/20/05 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 09/20/05 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 _____ 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 09/20/05 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.



0514574

CITY OF SACRAMENTO

www.cityofsacramento.org

Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT
Inspection: 1-916-808-7622

Downtown Permit Center
1231 I Street, Suite 200
Sacramento, CA 95814

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

OWNER BUILDER VERIFICATION

1. Check one below - I or my immediate family (parent, spouse, or child) will perform:

- A - all the work authorized by this permit.
- B - a portion of the work.
- C - none of the work.

If B or C is checked, complete 2 or 3 below.

2. A State licensed contractor (*) will be hired to do:

- all of the authorized work.
- a portion of the authorized work.

Name _____ Phone _____
 Address _____
 Type of Work _____

Name _____ Phone _____
 Address _____
 Type of Work _____

Name _____ Phone _____
 Address _____
 Type of Work _____

Name _____ Phone _____
 Address _____
 Type of Work _____

3. I will utilize unlicensed person(s) other than my immediate family to perform all or portions of the authorized work. A Certificate of Workers Compensation must be on file at this office.

I declare under penalty of perjury that the above is true and correct. I have read and understand the owner-builder information on the reverse side of this form.

Signed: Property Owner *[Signature]*
 Date 20/09/05 Case No. n/a Permit No. 0514576
 Job Address 3356 33rd St. Sacramento.

Note: * Information regarding unknown contractors or change in subcontractors shall be submitted to the Building Inspection field office.

[Handwritten signature]

RECORDING REQUESTED BY
First American Title Company

AND WHEN RECORDED MAIL TO:
Ana Maria Sernich
3356 33rd Street
Sacramento, CA 95817

Space Above This Line for Recorder's Use Only

A.P.N.: 013-0284-017-0000

File No.: 3804-2004890 (AB)

GRANT DEED

The Undersigned Grantor(s) Declare(s): DOCUMENTARY TRANSFER TAX \$339.90; CITY TRANSFER TAX \$849.75;
SURVEY MONUMENT FEE \$

- computed on the consideration or full value of property conveyed, OR
- computed on the consideration or full value less value of liens and/or encumbrances remaining at time of sale,
- unincorporated area: City of Sacramento, and

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, Oscar Linares, an unmarried man

hereby GRANTS to Ana Maria Sernich, a married woman as her sole and separate property

the following described property in the City of Sacramento, County of Sacramento, State of California:

**THE SOUTH 70 FEET OF LOTS 184, 185 AND 186, BLOCK G OF OAK GROVE TRACT,
ACCORDING TO THE OFFICIAL PLAT THEREOF, FILED IN THE OFFICE OF THE RECORDER OF
SACRAMENTO COUNTY, CALIFORNIA ON OCTOBER 4, 1894, IN BOOK 3 OF MAPS, MAP NO.
15.**

Mail Tax Statements To: SAME AS ABOVE

05/4576
SCAN

A.P.N.: 013-0284-017-0000

Grant Deed - continued

File No.: 3804-2004890

(AB)

Date: 08/31/2005

Dated: 08/31/2005


 Oscar Linares

STATE OF CALIFORNIA)
) ss.
 COUNTY OF SAN FRANCISCO)

On _____, before me, _____ personally appeared _____

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies) and that his/her/their signature(s) on the instrument the person(s) or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal. This area for official notarial seal

Signature _____

My Commission Expires: _____

Notary Name: _____ Notary Phone: _____
 Notary Registration Number: _____ County of Principal Place of Business: _____



CITY OF SACRAMENTO
 PLANNING & BUILDING DEPARTMENT
 BUILDING DIVISION

www.cityofsacramento.org

Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT
 Inspection: 1-916-808-5191



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PRELIMINARY RESIDENTIAL APPLICATION

1-916-808-5656 OR 1-866-EZ-PERMIT

BUILDING SITE ADDRESS 3358 - 33 rd ST	SUITE	INSP. AREA 3 0514576
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ASSESSOR'S PARCEL NO. 013-0284-017-0000	COMMUNITY PLAN NO.	PLAN CHECK NO.
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NAME OF APPLICANT	ADDRESS	ZIP CODE	PHONE #	FAX #
Ana Maria Sernich	1000 Valencia ST ^{San Francisco}	94110	415 648-6996	415 970-0338
PROPERTY OWNER				
Ana Maria Sernich				
LICENSED CONTRACTOR				
ARCHITECT/ENGINEER				

2	5	Shingles	1,087	1,087	0	8,400
No. of Stories	No. of Rooms	Roof Covering	Area 1 st Floor	Total Area	Garage Area	Patio Area

THIS PERMIT IS FOR:

- BUILDING MECHANICAL PLUMBING ELECTRICAL SITE FIRE

NATURE OF WORK IN DETAIL

~~Correct Dry Rot throughout where needed~~, remodel Kitchen, and bath, paint

\$ 6,000⁰⁰
 VALUATION

12/28/2004

R/R Cabinets, Sink, Appliances, Repair R/R Bathroom floor, tub surround Cabinets