

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0514572
Insp Area: 4
Thos Bros: 257C5

Site Address: 5397 CALABRIA WY SAC
Parcel No: 201-0690-016

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

CONTRACTOR
MARCHAL GEN CONTR
P O BOX 211
PENRYN, CA 95663

OWNER
GAGE ROY/KRISTI
5397 CALABRIA WY
SACRAMENTO, CA 95835

ARCHITECT

Nature of Work: REPAIR OF VEHICULAR DAMAGE TO FRONT PILLAR & ADJACENT WALL @ FRONT ENTRANCE

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 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class BL License Number 448169 Date 9-20-05 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).

PAID
CITY OF SACRAMENTO

I am exempt under Sec. _____ B & PC for this reason: _____
Date _____ Owner Signature SEP 20 2005

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the accuracy of the information provided by the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the proposed improvements do 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 9-20-05 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.

GPA 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 STATE FUND Policy Number 713-0009555 Exp Date 06/01/2006

(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 9-20-05 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.

City of Sacramento
Development Services Department
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 5397 calabria way	APN: 201-0690-016
DRPB AREA / PUD / SPD: Northpointe park p.u.d. & exp. No. drd	ZONING: R1-PUD
EXISTING LAND USE: Single family home with attached garage	
PROPOSED USE: Repair stucco pillar (porch column) at front porch (damaged by vehicle) – Repair to match existing.	
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 approved <i>before</i> project can be submitted for plan check
<input type="checkbox"/>	Application(s) IN PROGRESS: File Number: Application must be approved before project can be submitted for plan check.
<input type="checkbox"/>	Application(s) COMPLETED: File Number & approval date: 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.
<input checked="" type="checkbox"/>	Plans may be submitted for plan check, or permit can be issued over the counter, whichever is appropriate. See condition of approval below. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.
<input type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.
<input 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"/>	Route to SITE for inspection only , plan check not required.
<input type="checkbox"/>	Preliminary review ONLY ; the information on this form must be reviewed again and confirmed at the time of building permit submittal.
CONDITIONS AND COMMENTS: This is in a design review area. Condition of Approval: Match existing (other, undamaged) pillar.	
DATE: 9/20/2005	BY: Monica May

MM
9.20.05

02/11/1999 13:43 5109358941

ALTA BUILDING MAT

PAGE 01/01

LA HABRA STUCCO

A Division of La Habra Products Inc.

P.O. Box 3700, Anaheim, CA 92803-3700
(714) 774-2266 FAX: (714) 774-2079

LA HABRA WALL APPROVED APPLICATORS INFORMATION SHEET

2-11-99

Date

Contractor: Terry Murphy Lath & Plaster 916-721-9371
Company Name Phone #

Address: PO Box 7803
Citrus Heights
Ca 95621
(Please Print)

630106
State Contractor's License #

Job Address: 4111 Jan Drive
Rocklin Ca

Material Applied: La Habra Wall

Method Used: Hand

I have been instructed in the proper application of La Habra Wall fiber reinforced cement plaster including maximum sand ratios, mixing instructions, water curing, weather barrier, and weep screed requirements. I have received a copy of La Habra's ICBO Report #4228.

Terry Murphy
Contractor's name (Please Print)

Terry Murphy
Contractor's signature

[Signature]
Instructor's signature

Issued La Habra Wall Approved Applicator # 640

* Mel Souza 1-800-555-4090
Bill Johnson