

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0006222
Insp Area: I

Site Address: 1326 P ST SAC
Parcel No: 006-0284-009

Sub-Type: **NAPT**
Housing (Y/N): **N**

CONTRACTOR
S.W. ALLEN
5946 ROSEBUD LANE #1
SAC CA 95841

OWNER
CAPITOL AREA DEVELOPMENT AUTHORITIES
SACRAMENTO CA
95816

ARCHITECT
RON VRILAKAS
1109 22ND ST
SAC CA 95816

Nature of Work: RELOCATION AND REHAB OF 12 UNIT APT BLDG., ADD PORCHES, RAMPS, LANDSCAPING AND PARKING

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 _____

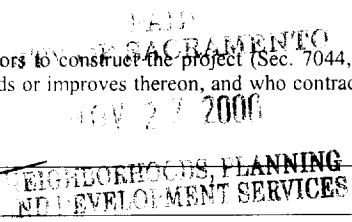
LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class _____ License Number _____ 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 3 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.)

→ **NG** 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 **11/27/2000** 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 **11/27/2000** 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 **CREDIT GENERAL INS. CO.** Policy Number **SWC1709147-00** Exp Date **03/06/2001**

→ **NG** (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 **11/27/2000** 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

30 DAY TEMPORARY
Certificate of Occupancy

For Information Contact (916) 264-5716

Building Address: 1326 P STREET Permit No. 0006222

Building Use: APARTMENT BUILDING Occupancy: R1

Building Owner: CAPITOL AREA DEVELOPMENT Construction Type: V-N

Owner Address: 1522 14TH ST Sprinkled? [] Yes [X] No

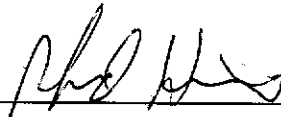
Portion of Building Occupied: ENTIRE Area: 6,581 Sq. Ft.

Specific purpose for temporary occupancy and/or conditions/limitations of temporary occupancy:

4/16/02 RICHARD HEINS

Date

By:Print



Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[TCO approvals:: RCY,SLG,SB,LLS,MJG]

BC 109.4 TEMPORARY CERTIFICATE

If the Chief Building Official finds that no substantial hazard will result from occupancy of any building or portion thereof before the same is completed, a temporary Certificate of Occupancy may be issued for the use of a portion or portions of a building or structure prior to the completion for the entire building or structure.

POST IN A CONSPICUOUS PLACE

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 1326 P ST Permit No. 0006222

Building Use: 12 UNIT APT BLDG Occupancy: R1

Building Owner: CADA Construction Type: VN

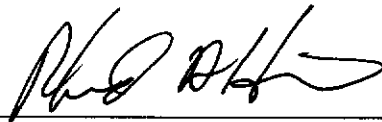
Owner Address: SACRAMENTO, CA Sprinkled? [] Yes [X] No

Portion of Building Occupied: ENTIRE Area: 6581 Sq. Ft.

5/29/02

Date

By:Print



Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[Finald By: GTD,LLS,SLG,SB,MJG]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE

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

APPLICATION NO: _____
 GENERAL INFORMATION
INV 11-27-00

BLDG PERMIT NO: *CITY OF SACRTO*
 THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER

265323 11-27-00
DU

THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION

BUILDING USE

INSPECTION	RESIDENTIAL	SF	MF	UNITS
CSD-1			<input type="checkbox"/>	
SRCSD	12 UNIT APTS		<input type="checkbox"/>	
CONSTRUCTION	64 UNIT DEMO		<input type="checkbox"/>	
IN-LIEU	CR GIVEN		<input type="checkbox"/>	
			<input type="checkbox"/>	
			<input type="checkbox"/>	
TOTAL FEE				14,424 -

APN: *006-0284-009*

DESCRIPTION/
 SUBDIVISION *PLANCHER # 06222* LOT:

PROPERTY ADDRESS *1326 "P" STREET*

OWNER *CITY OF SACRAMENTO*

MAILING ADDRESS *915 I STREET*

CITY-STATE-ZIP *SACTO CA 95814* PHONE _____

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE _____

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____
 INSPECTOR'S COPY

Certification of Compliance

School District Development

Part I - To be completed by the APPLICANT

Owner's Name/Address Capitol Area Improvement District 1922 14th St. S.W. 15811
 Project Address 1326 P. Jackson (1223 Q 31)
 Parcel Number 9, 1223 Q 31 - 221 - 04 Lot No. 4
 Subdivision Name _____ No. of Units 12
 Applicant's Signature [Signature] Title CONSTR. Admin.
 Phone No. (915) 323-4338 Date 11/7/00

Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II - To be completed by the BUILDING DEPARTMENT

Plan Identification Number 000-222
 Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
 Square Feet of Chargeable Building Area 3381
 Signature/Title [Signature] Date 11-6-00

Part III - To be completed by the SCHOOL DISTRICT

School District 15811 Certificate No. 6937
 Exempt Comments 3381 sq ft previously exempted - 6581 = 3381 sq ft
 Residential/Apartment/etc. 3381 Square ft. x \$ 1.72 = \$ 5815.32
 Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____
 Total fees collected..... 11-21-00 03:10 PM 2071027 = \$ 5815.32

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 official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature [Signature] Date 11/27/00

White & Canary - School District • Pink - Building Department • Goldenrod - Applicant

**City of Sacramento
Water and Sewer Service Quotation**

FY 99/00

Date: 11/06/00	Time:	Planning No.:	Plan Check No.: 0006222
Address: 1326 P Street		Parcel No.: 006-0284-009	
Description: Relocation of existing CADA 12 unit apartment complex from 1223 Q Street to 1326 P Street.			
Subdivision Map: Old City 212		Water Page No.: 13	
Estimate By: RT		Engineering Firm:	
Sewer Jurisdiction: <input type="checkbox"/> County <input checked="" type="checkbox"/> City		Project Engineer: Paul schmidt Phone No.: 522-2114 Fax No.:	
Comment No.1 2" metered service Comment No.2 Service was already provided to the property line by Capital Park Homes Project Comment No.3 Needs to abandon existng 1" Comment No.4 Existing sewer provided by Caoitl Park Homes Project Comment No.5 Comment No.6			
TOTAL WATER DEV. FEES: \$5,736		9 hrs x \$75 per hour = \$675 or \$300.00 (whichever is greater)	
TOTAL SEWER DEV. FEES: \$124		Total on-site grading and drainage review fee: \$675	

Water Service Quotations

Main Size	Serv. Size			St. Tap	Esmt. Tap	Description	No. of Tap	No. of Meter	Tap Fee/ea.	Meter Fee/ea.	Total Tap cost	Development Fees
	D	I	F									
12	2					meter only		1		\$610	\$610	\$7,642
											\$0	
											\$0	
											\$0	
											\$0	
											\$0	
						4" TAP AND 3" METER					n/a	
											n/a	
						ABANDONMENT						
6	Abandon			1 in.		Ex. service		1			\$510	
	Abandon			in.								
						CREDIT						
6	Credit for			1 in.		Ex. service		1				(\$1,906)
	Credit for			in.								
								0		Fire Hydrant		
Total for Water											\$1,120	\$5,736

Sewer Service Quotations

Main Size	Service Size	Description	QTY	Full St W (FT)	No. OF MH	Total Tap cost	Development Fees
10	4	Development Fee Only	1			\$0	\$124
		Easement Tap + MH + Dev. Fee				\$0	
		Street Tap + MH + Dev. Fee				\$0	
		Credit					\$0
Total for Sewer						\$0	\$124

Note: Total cost = Qty. x Street/2 x Tap Fee + MH Fee, MH Fee is \$1200.00

Robert J. [Signature]
11/7/00

Sewer Tap Construction Charge: \$0
 Water Main Construction Charge: \$1,120
 Total For Address: \$1,120

PLAN CHECK ROUTING PROCEDURE

Date Received: 8/7/00 Plan Check #: 0000222
 Project: CADA APARTMENT RELOCATION
 Address: 1326 P STREET
 Legal Description: RELOCATION AND REHABILITATION OF BUILDING
 Contact Person: PAN VILAKAS Telephone: 441-4685
 Address: 1109 22ND STREET SACRAMENTO, CA 95816
 Architect or Civil Engineer: PAN VILAKAS Telephone: 441-4685

PUBLIC WORKS - DEVELOPMENT SERVICES STREET IMPROVEMENTS

Approved: _____ Date Received: _____
 Total frontage length of New Street Improvements: 40' If
 Comments: REMOVE AND REPLACE DETERIORATED CURB AND
LEAVEL
 Right of Way Dedication : Approved N/A Disapprove _____
 Public Improvement Agreement: Approved N/A Disapprove _____
 Surety Bond, etc. : Approved N/A Disapprove _____
 Staking and Inspection Fee : N/A \$ _____

PUBLIC WORKS - DEVELOPMENT SERVICES DRIVEWAY

Driveway Required: Yes No Date Received: _____
 Approved: _____ Disapproved: _____
 Removal of abandoned driveway: _____
 Comments: _____

PUBLIC WORKS - DEVELOPMENT SERVICES ENCROACHMENT/EXCAVATION PERMIT

Encroachment/Excavation Permit Required: Yes No
 Approved: King W. J. Disapproved: _____
 Comments: _____

DEPT. OF UTILITIES DRAINAGE, SEWER, & WATER

Approved: _____ Date Received: _____
 Comments: _____ Disapproved: _____

PLANNING AND DEVELOPMENT SERVICES SITE CONDITIONS

Approved: _____ Date Received: _____
 Review Zone: _____ Approved with Changes: _____ Disapproved: _____
 Special Permit: _____ Variances: _____
 Parking Spaces Furnished: _____ Parking Spaces Required: _____
 Comments: _____



Sacramento County Regional Sanitation District
 9660 Ecology Lane
 Sacramento, California
 95827-3881

NOVEMBER 14, 2000
RECEIVING FAX: 916-441-1804
SENDING FAX: 916-875-6253

TO: NICHOLAS GALABOV
 CAPITAL AREA DEVELOPMENT AUTHORITY

FROM: DOLORES ROSS
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT

RE: SEWER FACILITY IMPACT FEES
1326 "P" ST.

APN: 006-0284-009
Plan Check # 06222

The Sewer Facility Impact Fees due for the placement of a 12-unit apartment complex on the above Assessor's parcel are as follows:

Impact to Sacramento Regional County Sanitation District \$ 14,424

Credit has been given for four units which have been demolished. The above fees are effective through February 28, 2001 and can be paid at 827 Seventh Street, Room 105, Window 11.

If you have any questions regarding the above, please feel free to call me at 875-6679.

cc: Sean Burke
 City of Sacramento

This fee is also subject to adjustment if the data supplied is changed.

www.srcsd.com

e-mail: rossd@pwa.co.sacramento.ca.us

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1231 I Street, Rm. 200
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK # 000 6222 Insp. Area 1

Applicant **MUST** complete ALL Unshaded area this page only

ADDRESS 1326 P St.
 PARCEL # 006-0284-008

Suite Unit 1-12 6/7/00

CONTACT
Name PAUL SCHMIDT / CADA
Address 1522 14TH ST
SACRAMENTO, CA Zip 95814
Phone 522 2114 FAX 441 1804

LICENSED CONTRACTOR Lic No. #
Name [REDACTED]
Address _____
Phone _____ FAX _____

ARCHITECT/ENGINEER
Name PON VILAKAS
Address 1109 22ND ST
SACRTO CA Zip 95814
Phone 441-4635 FAX _____

OWNER
Name CADA C/O PAUL SCHMIDT
Address 1522 14TH ST
SACRTO CA Zip 95814
Phone 522-2114 FAX 441 1804

Will the permittee have any employees on the jobsite? Yes No

If yes, WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NAME OF INSURANCE COMPANY: _____

NATURE OF WORK IN DETAIL: add covered porch & bay windows + site work
1223 Qst BLDG MOVED TO 1326 P. Arbor & Trellis

Site # schmidt

DBA: CADA RELOCATION Project VALUATION: \$105,000

FLOOD STATUS: <u>EXEMPT</u>			S.C.A.T.							
JOB DESCRIPTION: <u>[REDACTED]</u>			SHEL	APT	TI ()	REM ()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES			BEDG	MECH	PLUMB	ELEC	SITE	FIRE		
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N	Fed Code	Viol. Fil		
<u>2</u>	<u>3278</u>	<u>6581</u>		<u>R1</u>	<u>VN</u>	Sp. Alarm	<u>04</u>			
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>	<u>D</u>	<u>CR</u>		

COMMENTS:
 50% FT OF EACH MOVED BLDG
 Reg. SAN FEES
 Water supply report 90"
 5 sets of Plans
 Soils Report
 EXEMPT FROM FLOOD PURCHASE letter

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

BLDGFRM. (REV 05/98) WATER FLOW TEST FOR NEW BLDGS OR ADDITIONS YES NO

CITY OF SACRAMENTO
JOURNAL VOUCHER

PLAN CHECK FEE ONLY

PAGE 1 OF 1
BUDGET FY
 YY

TRANSACTION CODE	MMDDYY	JV NUMBER	JV DATE	MMDDYY	ACCOUNTING PERIOD	MMYY	COMMENTS	DEBIT AMOUNT	CREDIT AMOUNT
1	22	533	830	8340	4700		APD #00062222	1,338.01	
2	31	101	450	4866	3611			1,338.01	1,338.01
3	01	101					1010		
4	01	533					1010		1,338.01
5									
6									
7									
8									
9									
10									
TOTAL								2,676.02	2,676.02

PREPARED BY *CADH* DATE *4/2/00* PHONE#
 APPROVED BY *[Signature]* DATE *4/2/00* PHONE#
 APPROVED BY *[Signature]* DATE
 ACCOUNTING ENTERED BY
 DATE

(Green original journal voucher)
1 New one 15 Dice Fair Backer on fees.

you copy to...

Date of Request: _____

By: _____

**CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST**

Project Address: 1326 P St

Assessor's Parcel Number: 006-0284-009

Previous Use: Residential

Description of Request/Proposed Use: Moving 12 unit Apt from 1223 Q St to this site

Is This a Change of Use? _____

Prior Applications for Project Site(P#, Z#, DRPB#): _____
Zoning Designation: R-5
DR 82-157

Comments: CADA Projects exempt

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: [Signature] 6/7/00

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

MICROFILM AFTER FINAL