

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

ITEM	INSPECTION	INSPECTOR	DATE
B10	FOUNDATION FORMS		
E60/B11	UFER GROUND		
B12	CONCRETE SLAB FORMS	<i>[Signature]</i>	
P40	PLUMB. UNDERFLOOR/SLAB		
M30	MECH/UNDERFLOOR/SLAB		
E61	ELECT. UNDERGROUND		
E62	ELECT. CONDUIT-SLAB		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED			
B13	FLOOR JOISTS OR GIRDERS		
DO NOT INSTALL SUB FLOOR UNTIL ABOVE HAS BEEN SIGNED			
B14/15	INSULATION/WALL/FLOOR	<i>[Signature]</i>	11-2-99
P41	TOP PLUMBING		
M31	TOP MECHANICAL/WALL/CEIL.		
E63	ROUGH ELECTRICAL/WALL/CEIL.		
B19	FRAME		
B17	ROOF PLYWOOD NAIL, COMM. & APRTS		
B18	EXTERIOR LATH/SIDING	<i>[Signature]</i>	10-30-99
	STEVE MAIL	<i>[Signature]</i>	10-21-99
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED			
B22	INT. LATH OR WALL BD. NAILING		
DO NOT TAPE PLASTER OR TOP UNTIL ABOVE HAS BEEN SIGNED			
E66	SERVICE UNDERGRD CONDUIT		
P43	SEWER SERVICE		
P42	WATER SERVICE		
P46	SPRINKLER SYSTEM		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED			
P47/M33	GAS TEST		
P48	TEMP GAS	ISSUED	
E68	POWER POLE	EXPIRES	
E67	TEMP POWER #		
SWIMMING POOLS ONLY			
P47	GAS TEST		
P51	PLUMBING PRE-GUNITE		
P52	PLUMBING PRE-DECK		
E70	ELECTRICAL PRE-DECK		
E71	ELECTRICAL PRE-DECK		
E72	ELECTRICAL UNDERGRD		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED			
ENERGY COMPLIANCE CERTIFICATE TO BE ON FILE PRIOR TO FINAL APPROVAL			
DATE		SIGNED	

FINAL APPROVALS

FINAL INSP. NO. *[Handwritten]*

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 TIMES (UNTIL FINAL APPROVAL)

BUILDING SITE ADDRESS: 1339 44th St 1339-44th St

ASSESSOR PARCEL NO: 008-0571-009-0000

LICENSED CONTRACTOR: [Blank]

PROPERTY OWNER: [Blank]

ARCH. ENGR: [Blank]

NO. OF STORIES: 2 NO. OF ROOMS: 210 ROOF COVERING AREA: 485 1ST FLOOR: 210 TOTAL AREA: 485

GARAGE AREA: [Blank] PATIO AREA: [Blank] USE ZONE: [Blank] STREET WIDTH: [Blank]

THIS PERMIT IS FOR: BUILDING MECHANICAL PLUMBING ELECTRICAL? SITE FIRE

NATURE OF WORK IN DETAIL: *Replace existing stairs and install new stairs in existing room into a small room plus powder room. Remodel room into a small room plus powder room. Additions to existing building. Additions to existing building. Additions to existing building.*

FLOOD STATUS: [Blank] SPECIAL CONDITIONS ATTACHMENTS: [Blank]

CITY OF SACRAMENTO BUILDING INSPECTION DIVISION INSPECTIONS 264-5191

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: [Blank]

Policy Number: [Blank]

(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.

Date: [Blank] Applicant: [Blank] (Signature)

VALUATION	\$ 44 376.30	ISSUED BY:	<i>[Signature]</i>
DATE ISSUED	1-12-99	BUILDING PERMIT FEE	\$
PLAN CHECK/PROC. FEE	\$	S.M.I. FEE	\$
CITY BUS LICENSE	\$	CONST. EXCISE TAX	\$
TECH. FEE	\$	CITY SEWER DEV. FEE	\$
WATER DEV. FEE	\$	REG. SEWER FEE	\$
CITY SEWER DEV. FEE	\$	RESIDENTIAL CONST. TAX	\$
TOTAL FEES	\$		

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

City of Sacramento Development Services Division
Planning and Zoning Information Request

Project Address: 1539 44th Street, SACTO 95819

Assessor's Parcel Number: 008-0271-009-0000

PREVIOUS USE _____
Current Land Use: RESIDENCE

Description of Request/Proposed Use: - Remove an existing 10x12 room
Replace with an 18x18 Room - 2 story; remodel
a downstairs room to make a powder room; change out tub
and sink in an upstairs bath.
IS THIS A CHANGE OF USE? _____

Zoning Designation: R-1

Prior Applications for Project Site(P#,Z#,DRPB#): _____

Comments: see map - lot coverage

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] 4.21.99

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

MICRO FILM AFTER FINAL

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNER

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed improvement (yes or no) (no)
2. I (have) signed an application for a building permit for the proposed work.
3. I have contracted with the following person (firm) to provide the proposed construction:

Name Out to bid Address _____
City _____ Telephone _____
Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise, and provide the major work.

Name _____ Address _____
City _____ Telephone _____
Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the work indicated:

Name	Address	Phone	Type of Work

Signed Maxine Feldman
Job Address 1351 44th St Date 6/3/99
Permit No.: 5607 71819

SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

CERTIFICATE OF COMPLIANCE

SCHOOL DISTRICT DEVELOPMENT FEES

PROPERTY OWNER'S NAME		MARJORIE KOLDINGER	
OWNER'S ADDRESS	1339 44 th Street Sacramento	95819	
PROJECT ADDRESS	1339-44 th St	SACRAMENTO	95819
PARCEL NUMBER	007-1271-009	LOT NUMBER	0000
SUBDIVISION NAME			
NUMBER OF UNITS			
APPLICANT'S SIGNATURE <i>[Signature]</i>			
TITLE OF APPLICANT <i>Owner</i>			
DATE	4-21-99	TELEPHONE NUMBER	455-8506
BUILDING DEPARTMENT			
PLAN IDENTIFICATION NUMBER		9903825	
BUILDING TYPE (CHECK ONE)			
<input checked="" type="checkbox"/> RESIDENTIAL		<input type="checkbox"/> APARTMENT/CONDOMINIUM	
<input type="checkbox"/> COMMERCIAL/INDUSTRIAL			
SQUARE FEET OF CHARGEABLE BUILDING AREA		685	
SIGNATURE <i>[Signature]</i>			
TITLE <i>Building Fee</i>		DATE 4-21-99	
UNIFIED SCHOOL DISTRICT			
DISTRICT CERTIFICATION NUMBER		12103	
EXEMPT	COMMENTS		
RESIDENTIAL / APARTMENT / ETC.	685	SQ. FT. X \$ 1.72	= \$ 1178.20
COMMERCIAL / INDUSTRIAL		SQ. FT. X \$	= \$
OTHER FEE	TYPE	SQ. FT. X \$	= \$
TOTAL FEES COLLECTED.....			\$ 1178.20
<p><i>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.</i></p> <p><i>As the authorized school district 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.</i></p>			
SIGNATURE <i>[Signature]</i>			
TITLE <i>CIVIC CENTER PERMITS</i>		DATE <i>4/21/99</i>	