

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9712870
Insp Area: 4

Site Address: 1157 ATHENA AV SAC
Parcel No: 2250325008

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

CONTRACTOR

OWNER

ARCHITECT

SCHLEETER JOSEPH L/PAMELA J
1157 ATHENA AV
SACRAMENTO CA 95833
Phone: 921-0644

Phone:

Phone:

Nature of Work: ADD MASTER BEDROOM, BATHROOM AND WALK-IN CLOSET. SHALL PROVIDE INTERIOR (PRIMARY) ACCESS TO MAIN PORTION OF HOUSE. EXTERIOR MATERIALS SHALL MATCH EXISTING. ROOF 25 YR DI

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 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 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 or 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 or 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 9/18/97 Owner Signature Pamela Schleeter

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.

Date 9/18/97 Applicant/Agent Signature Pamela Schleeter

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 none NO employees Policy Number _____

____ (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 9/18/97 Applicant Signature Pamela Schleeter

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.

9773-870R

4

DATE: 01/15/15 TIME: 11:51 AM ADDRESS: 264-5191

151 A. THEN

ORDER FOR PL 9

INSPECTOR REQUESTED

THE UNDERSIGNED: BUILDING PLUMBING MECHANICAL ELECTRICAL INSPECTOR HAS THIS DAY INSPECTED THIS STRUCTURE FOR THE REQUESTED INSPECTION AND FOUND THE FOLLOWING VIOLATIONS OF CITY AND/OR STATE LAWS GOVERNING SAME

F

- ① Under Floor Plumbing
connected up with concrete slab
- ② Provide 2 way cleanout capwood
TYPED OUTSIDE BLDG (WITHIN 2 FT)
- ③ CALC FIXTURE UNITS on water
PIPING ALL THE WAY TO STREET
- ④ COMPLETE your ELECTRIC SERVICE
CHANGE - HAZARDOUS SITUATION now
(1ST PRIORITY)
- ⑤ LOOKS LIKE YOU'LL NEED
ENGINEER'S REVIEW BECAUSE YOU
DID NOT FOLLOW SHARD DETAIL OR
PLAN
- ⑥ PROVIDE MIN. 4 PER FOOT GROUND
SUPPORT LINES

INSPECTOR _____ DATE 1/15/15

CITY OF SACRAMENTO
1231 L ST. ROOM 200

BUILDING INSPECTIONS DIVISION

PERMIT NO.

9772820A

CORRECTION NOTICE

AREA NO.

4

WHEN CORRECTIONS HAVE BEEN MADE CALL 264-5191 FOR REINSPECTION OF WORK

1159 AFRA 20A

COND. P.L.R. PL-9

INSPECTION REQUESTED

THE UNDERSIGNED BUILDING PLUMBING MECHANICAL ELECTRICAL

INSPECTOR THIS DAY INSPECTED THIS STRUCTURE FOR THE REQUESTED INSPECTION AND FOUND THE FOLLOWING VIOLATIONS OF CITY AND/OR STATE LAWS GOVERNING SAME

① Not Ready

INSPECTOR

WJ

DATE

11/16/98

BUILDING INSPECTIONS 264-5716

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION

*Plans per sheet
Per sheet
Per sheet
Approved*

2999 X

EXPRESS PLAN REVIEW

DATES					
1ST REVIEW		RECHECK		2ND RECHECK	
IN	OUT	IN	OUT	IN	OUT

PLAN CHECK NO.	COMM.	RES.
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CONTACT PERSON: _____ PHONE: _____
 PROJECT ADDRESS: _____ FAX: _____
 DESCRIPTION OF WORK: _____

DISCIPLINE	1ST REVIEW			RECHECK			2ND RECHECK		
	EPR	OC	APPR	EPR	OC	APPR	EPR	OC	APPR
LIFE SAFETY	<i>APPR</i>								
STRUCTURAL			<i>STN</i>						
MECHANICAL/PLUMBING									
ELECTRICAL									
FIRE									
PLANNING									

Legend
 EPR = OK for Express Plan Review
 OC = OK for Over the Counter Recheck
 APPR = Approved as submitted

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) _____

2. I (have/have not) _____ 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 _____ 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
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Signed _____

Job Address _____ Date 9/18/97

Permit No.: _____

RESIDENTIAL SCREENING FORM
PLAN CHECK PERMITS

ADDRESS 1657 Athena RD P.C.# 2999

I APPLICATION COMPLETE (COUNTER) DATE 9-16-99 INIT. J

<input type="checkbox"/> ADDRESS	<input checked="" type="checkbox"/> ASSESSOR'S PARCEL NUMBER	
<input checked="" type="checkbox"/> ON PERMIT	<input type="checkbox"/> ON PERMIT	
<input type="checkbox"/> VERIFIED	<input type="checkbox"/> VERIFIED	
<input type="checkbox"/> OWNER INFORMATION	<input checked="" type="checkbox"/> CONTRACTOR/ARCH. INFORMATION	
<input type="checkbox"/> INSPECTION AREA/COMMUNITY NUMBER	<input checked="" type="checkbox"/> PLAN CHECK NUMBER ON APPLICATION	
<input type="checkbox"/> APPLICATION PROPERLY SIGNED	<input type="checkbox"/> VIOLATION FILE CHECKED	
<input type="checkbox"/> APPLICATION FILLED OUT CORRECTLY	<input type="checkbox"/> WORKERS' COMPENSATION ON FILE	
<input type="checkbox"/> NATURE OF WORK LISTED		
<u>USE</u>		
<input type="checkbox"/> DWELLING	<input type="checkbox"/> GARAGE	
<input type="checkbox"/> DUPLEX	<input type="checkbox"/> PATIO/DECK	
<input type="checkbox"/> TRIPLEX	<input type="checkbox"/> OTHER	
<u>TYPE</u>		
<input type="checkbox"/> NEW CONST.	<input checked="" type="checkbox"/> ADDITION	
<input type="checkbox"/> REMODEL	<input type="checkbox"/> OTHER	
<input type="checkbox"/> SQUARE FOOTAGE LISTED ON PERMIT	<input type="checkbox"/> EXISTING	<input type="checkbox"/> NEW
<input checked="" type="checkbox"/> CONSTRUCTION TYPE	<input type="checkbox"/> OCCUPANCY GROUP	<input type="checkbox"/> VALUATION CORRECT
<input type="checkbox"/> INFILL SCREENING FORM FILLED OUT	<input checked="" type="checkbox"/> PERMIT LEGIBLE	

II PLANNING APPROVAL (COUNTER) DATE _____ INIT. J

<input type="checkbox"/> USE ZONE ON PLAN	IS ADDITIONAL PLANNING REVIEW REQUIRED
<input type="checkbox"/> STANDARD SETBACKS	DESIGN REVIEW <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
PINK PLANNING ROUTE SHEET FILLED OUT?	SITE REVIEW <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
<input type="checkbox"/> YES <input type="checkbox"/> NOT REQUIRED	IN RICHARDS BL. REDEV. AREA?
<input type="checkbox"/> PROJECT IN AN INFILL AREA	<input type="checkbox"/> YES <input type="checkbox"/> NO

III PLANS ACCEPTABLE (COUNTER) DATE _____ INIT. J

<input type="checkbox"/> SITE PLAN	<input checked="" type="checkbox"/> T-24 ENERGY APPROVAL
<input type="checkbox"/> ARCH. AND STRUCT. PLANS	<input type="checkbox"/> 11" x 17" FLOOR PLAN

IV FLOOD ZONE SCREENING (COUNTER) DATE _____ INIT. J

<input type="checkbox"/> EXEMPT COST (< \$50,000 AND < 50%)	<input type="checkbox"/> ZONE A, AE, AO, OR AH
<input type="checkbox"/> EXEMPT MISC.	<input type="checkbox"/> ELEVATION CERTIFICATE REQ'D. (HOLD PLACED ON PERMIT)
<input type="checkbox"/> ZONE X	<input type="checkbox"/> CONSTRUCTION VALUED AT LESS THAN 50% OF REPLACEMENT COST BEFORE IMPROVEMENTS
<input checked="" type="checkbox"/> ZONE A-99 (WAIVER ATTACHED)	

NATOMAS MORATORIUM AREA YES NO

HOLD PLACED ON PERMIT APPROVED APPEAL COPY IN PERMIT JACKET

ROUTING (COUNTER & PLANCHECK)

PLANS DELIVERED TO DESIGN REVIEW
DATE DELIVERED 7-16-97 INIT. _____
DATE RETURNED 7-16-97 INIT. _____

PLANS DELIVERED TO SITE REVIEW
DATE DELIVERED _____ INIT. _____
DATE RETURNED _____ INIT. _____

VI VERIFICATION (PLANCHECK) DATE _____ INIT. _____

SQUARE FOOTAGE VERIFIED FEES CORRECTLY CALCULATED
 SCHOOL IMPACT FEE FORM COMPLETED ADDRESS
 WATER & SEWER FEES VERIFIED FOR INFILL CREDITS AND EXISTING TAPS

VII SPECIAL APPROVALS (PLANCHECK) DATE _____ INIT. _____

DOES INFILL SCREENING FORM REQUIRE A GRADING PERMIT TO BE ISSUED?
 YES NO GRADING PERMIT NUMBER _____

ARE OTHER SPECIAL APPROVALS (LEA, FINAL MAP, ETC.) REQUIRED PRIOR TO PERMIT ISSUANCE?
 YES NO APPROVAL TYPE _____
APPROVAL DATE _____ INIT. _____

VIII PLANS APPROVED OK TO ISSUE PERMIT (PLANCHECK) DATE _____ INIT. _____

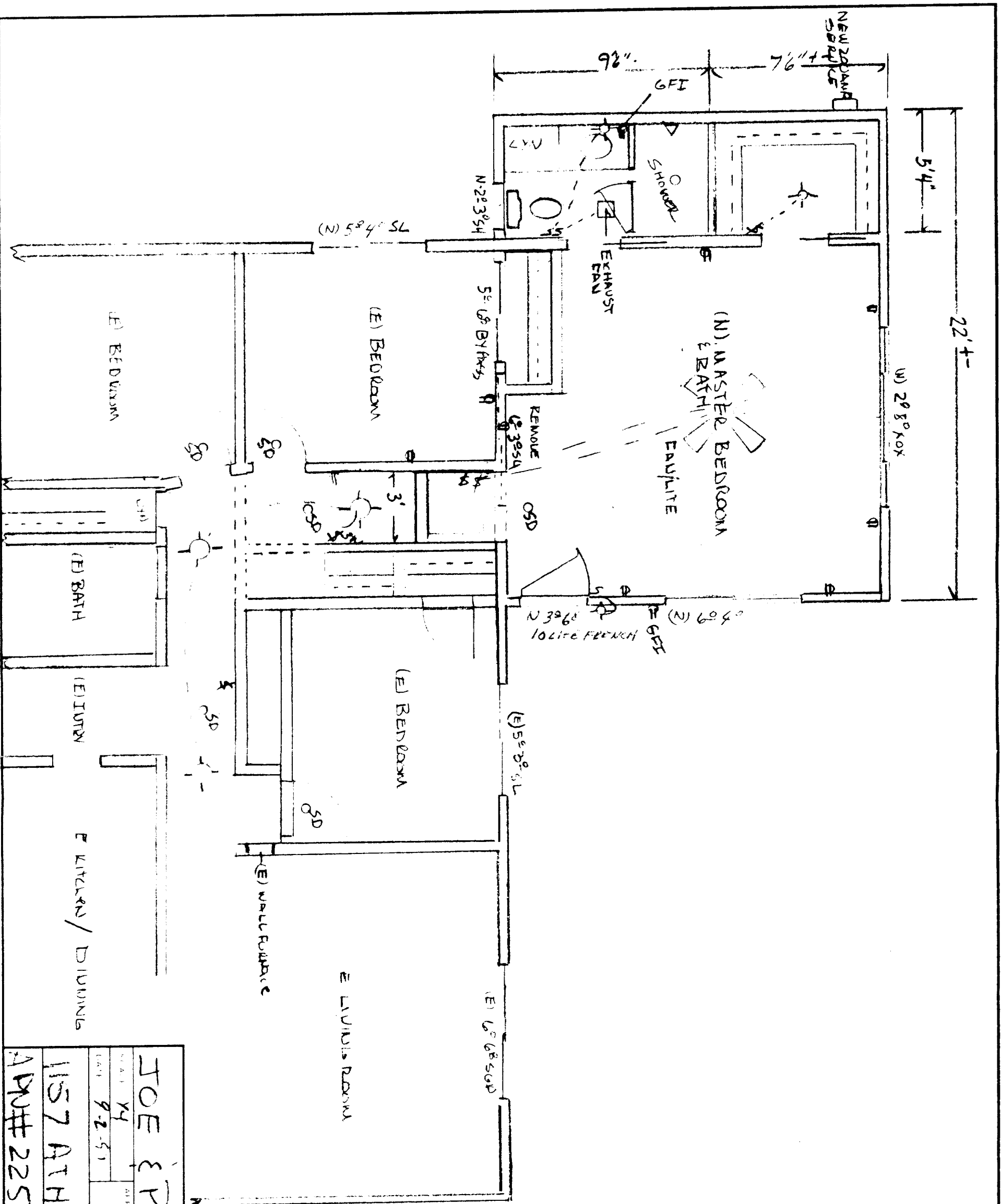
	APPROVAL REQ'D.		APPROVAL	
	YES	NO	DATE	INIT.
TITLE 24 ENERGY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>9/19/97</u>	<u>J.D.C.</u>
LIFE SAFETY	<input checked="" type="checkbox"/>	<input type="checkbox"/>		
STRUCTURAL	<input type="checkbox"/>	<input type="checkbox"/>		
DESIGN REVIEW	<input type="checkbox"/>	<input type="checkbox"/>		
MITIGATION MONITORING PLAN	<input type="checkbox"/>	<input type="checkbox"/>		
SPECIAL PERMIT CONDITIONS	<input type="checkbox"/>	<input type="checkbox"/>		
SPECIAL CONDITION ATTACHMENT ITEMS	<input type="checkbox"/>	<input type="checkbox"/>		

IX DEFERRED APPROVAL ITEMS (PLANCHECK) DATE _____ INIT. _____

___ CERTIFICATE OF WORKER'S COMPENSATION ___ TRUSS CALCULATIONS
___ OWNER/BUILDER FORMS ___ SEWER WAIVER FORM
___ EXHIBIT ONE/AUTHORIZATION TO SIGN ___ A-99 FLOOD WAIVER FORM
___ SCHOOL IMPACT FEE RECEIPT ___ TITLE 24 APPROVAL
___ OTHER 11X17 PL.PL.

X APPLICANT NOTIFICATION (PLANCHECK) DATE _____ INIT. _____

APPLICANT NAME _____



RECEIVED
 SEP 18 19

Building Inspection Division

JOE & PAW Schleeter		DRAWN BY	02
SCALE	Y4	PROJECT NO.	
DATE	9-2-51	REVISION	
1157 ATHENA AVE SACRAMENTO		DRAWING NUMBER	
APR# 225-0225-008		2 of 4	