

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 9911525**  
**Insp Area: 1**

**Site Address: 3117 OCCIDENTAL DR SAC**  
Parcel No: 079-0152-016

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

CONTRACTOR  
LANE CONSTRUCTION  
5802 ROBERTSON AV  
SACRAMENTO CA 96608

OWNER  
MARVIN/JEAN DELFENDAHL FAMILY TRUST  
SACRAMENTO CA  
95860-1921

ARCHITECT

**Nature of Work: REBUILD ROOF STRUCTURE REPAIR & REPLACE PLBG,HVAC ELECT AS  
NEEDED FROM FIRE DAMAGE/APT 2,3,4**

**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 [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 a 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 am 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 am 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 licensed pursuant to the Contractors License Law.

PLANNING  
DEPARTMENT SERVICE

I am exempt under Sec. \_\_\_\_\_ B & PC for this reason: \_\_\_\_\_

Date \_\_\_\_\_ 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 \_\_\_\_\_ 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: GOLDEN EAGLE INS Policy Number NWC420388-02 Exp Date 12/05/1999

(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 \_\_\_\_\_ 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  
APPLICATION FOR COMMERCIAL BUILDING PERMIT**

DEVELOPMENT SERVICES DIVISION  
PERMIT SERVICES SECTION

ACTIVITY # 991525 Insp. Area 1C

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

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 317 Occidental Drive <sup>14P</sup> 2,344 Suite \_\_\_\_\_  
PARCEL # \_\_\_\_\_

<b>CONTACT</b>		<b>LICENSED CONTRACTOR</b> Lic No. # <u>726918</u>	
Name <u>Mr. [unclear]</u>		Name <u>L &amp; M Construction</u>	
Address <u>202 Robertson Ave</u>		Address <u>2562 Robertson Ave</u>	
Phone _____ FAX <u>916 311 1818</u>		Phone <u>916 460 1900</u> FAX <u>415 311 1818</u>	
E-mail _____		E-mail _____	
<b>ARCHITECT/ENGINEER</b>		<b>OWNER</b>	
Name _____		Name <u>Paul Arnoldy</u>	
Address _____		Address <u>317 Occidental Dr</u>	
Phone _____ FAX _____		Phone _____ FAX _____	
E-mail _____		E-mail _____	

→ Will permittee have any employees on the jobsite?  No  Yes → INSURANCE CO: \_\_\_\_\_  
→ WORKER'S COMPENSATION POLICY # 100420388 02 EXPIRATION DATE: 8/31/00

NATURE OF WORK IN DETAIL: rebuild roof structure repair & replace dry rot as needed from fire damage

OCCUPANT/TENANT: \_\_\_\_\_ VALUATION: \$ 102,000

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		<input checked="" type="checkbox"/> BLDG	<input type="checkbox"/> SHELL	<input type="checkbox"/> APT	<input type="checkbox"/> TI ( )	<input type="checkbox"/> REM ( )	<input type="checkbox"/> SW	<input checked="" type="checkbox"/> FIRE	<input type="checkbox"/> ADD	<input type="checkbox"/> OTH
INSPECTION DISCIPLINES			<input checked="" type="checkbox"/> BLDG	<input checked="" type="checkbox"/> MECH	<input checked="" type="checkbox"/> PLUMB	<input checked="" type="checkbox"/> ELEC	<input type="checkbox"/> SITE	<input type="checkbox"/> FIRE		
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File	
				<u>R</u>		SPR	ALARM	<u>04</u>	[H]	[Quad]
<input checked="" type="checkbox"/> B	<input checked="" type="checkbox"/> L	<input type="checkbox"/> P	<input type="checkbox"/> M	<input type="checkbox"/> E	<input type="checkbox"/> F	<input type="checkbox"/> S	<input type="checkbox"/> D	<input type="checkbox"/> PW	<input type="checkbox"/> UTIL	

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No  
WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS?  Provided  Faxed

# ENGEL INSULATION, INC.

CALIFORNIA CONTRACTOR'S LICENSE #745646  
460 Roseville Road • Roseville, CA 95678  
(916) 786-2088 / (916) 969-6191

THIS IS TO CERTIFY THAT INSULATION HAS BEEN INSTALLED IN CONFORMANCE WITH CURRENT ENERGY REGULATIONS. CALIFORNIA ADMINISTRATIVE CODE, TITLE 24, STATE OF CALIFORNIA, IN THE BUILDING LOCATED AT:

TRACT \_\_\_\_\_ LOT UNITS 1, 2, 3 + 4

STREET 3117 OCCIDENTAL DR. CITY RANCHO CERRITOS

EXTERIOR WALLS: WALLS 2, 3, 4

MANUFACTURER \_\_\_\_\_ THICKNESS CT R-VALUE 3

CEILING AREA: BATT

MANUFACTURER \_\_\_\_\_ THICKNESS \_\_\_\_\_ R-VALUE \_\_\_\_\_

CEILINGS: BLOWN IN Blow in THICKNESS 1 1/2 R-VALUE 3

MANUFACTURER MADE WITH THICKNESS \_\_\_\_\_ R-VALUE 3

SQUARE FOOTAGE 1767 NUMBER OF BAGS USED 14 3/4

FLOOR AREA 1000 THICKNESS 1 1/2 R-VALUE 3

MANUFACTURER \_\_\_\_\_ THICKNESS \_\_\_\_\_ R-VALUE \_\_\_\_\_

EXTERIOR KNEEWALL \_\_\_\_\_ THICKNESS \_\_\_\_\_ R-VALUE \_\_\_\_\_

MANUFACTURER \_\_\_\_\_ THICKNESS \_\_\_\_\_ R-VALUE \_\_\_\_\_

INTERIOR KNEEWALL \_\_\_\_\_ THICKNESS \_\_\_\_\_ R-VALUE \_\_\_\_\_

MANUFACTURER \_\_\_\_\_ THICKNESS \_\_\_\_\_ R-VALUE \_\_\_\_\_

APPLIED CAULK & SEALANT TO ALL EXTERIOR OPENINGS & PENETRATIONS

YES  NO

GENERAL CONTRACTOR Acme Construction & Sewer

CALIFORNIA CONTRACTORS LICENSE # 713423 DATE 8/15/00

[Signature] SIGNATURE TIME Managers

INSULATION CONTRACT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Project: Occidental Dr.

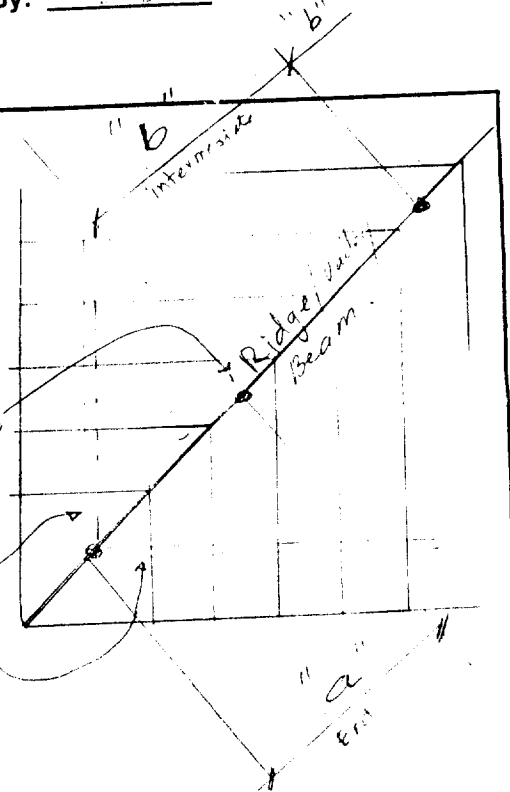
Client: L.C. Date: 11/99

By: S.D. Sheet No. — of —

Calculations/Details For: Ridge/Valley Beams.

— Indicates point of support at Ridge/Valley Beams (typ)

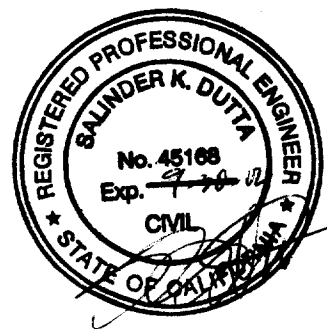
Ext. Wall typ.



Alternative to Plans (Optional):

Allowable maximum spans for 2x6 DF#2 ridge/valley beams at the Occidental Dr. project shall be as follows:

Beam Type	"a"	"b"
2x6 DF#2 or BR	8ft	6ft



Calculations/Details For: \_\_\_\_\_

## Response of Correction Notice (see attachment)

1. Contractor to comply
2. Contractor to comply
3. Contractor to comply
4. Contractor to comply
5. Contractor to comply
6.  $\frac{1}{2}$ " OSB or  $1\frac{5}{8}$ " OSB acceptable for sheathing
7. Contractor to comply
8. 2-2x8 are acceptable instead of 4x8 or plans.
9. 3 min equally spaced over 16" on each side of ceiling beam acceptable instead of a 4x8 header shown in B/S4
10. Contractor to comply.

