

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0010148

Insp Area: 1

Site Address: 1233 RICHARDS BL SAC  
Parcel No: 001-0090-003  
N

1233;1235;1237;1239 RICHARDS BL

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

CONTRACTOR

OWNER

ARCHITECT  
MGRT ARCHITECTS  
1725 J ST  
SACRAMENTO CA 95814

Nature of Work: REHAB:LBP & ASBESTOS ABATEMENT, REPLACE ELECTRICAL PANEL,  
PLUMBING, HVAC, ROOF;REMODEL PORCHES, NEW WINDOWS

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 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).

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

Date 11/6/01 Owner Signature *[Signature]* NOV 15 2000

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of ~~the applicant~~ <sup>the applicant</sup> that all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed is in accordance with all applicable laws 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 above mentioned property for inspection purposes.

Date 11/6/01 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.

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 \_\_\_\_\_ Policy Number \_\_\_\_\_ Exp Date \_\_\_\_\_

(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 11/6/01 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.

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

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/have not) no 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 PAROTAKES CONSTRUCTION Address 901 SUNRISE AVE, SANTA ANA-16  
City ROSEVILLE, CA Telephone (916) 782-9059  
Contractors License No. 712978

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 NA 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
<u>NA</u>			

Signed [Signature]

Job Address ~~72831~~ RICHARDS + LOUISE ST

Permit No: 0010144 - 0010152

# APPLICATION FOR COMMERCIAL BUILDING PERMIT

**CITY OF SACRAMENTO**  
**DEVELOPMENT SERVICES DIVISION**  
**PERMIT SERVICES SECTION**

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

ACTIVITY #

0010148

Insp. Area

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1233, 1235, 1237 & 1239 Richards Blvd Suite \_\_\_\_\_

PARCEL # 001-0090-003

**CONTACT**

Name MIKE Miller

Street Address 320 Commerce Circle

City/State/Zip SACRO, CA 95815

Phone 566-1245 FAX 566-1275

E-mail: \_\_\_\_\_

**LICENSED CONTRACTOR** Lic No. # \_\_\_\_\_

Name To be Bld Out

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_

E-mail: \_\_\_\_\_

**ARCHITECT/ENGINEER**

Name \_\_\_\_\_

Address 320 Commerce Circle

City/State/Zip SACRO, CA 95815

Phone 566-1245 FAX 566-1275

E-mail: \_\_\_\_\_

**OWNER** SAEA

Name SACRO HOUSING & REDEVELOPMENT AGENCY

Address 320 Commerce Circle

City/State/Zip SACRO CA

Phone SAME FAX SAME

E-mail: \_\_\_\_\_

→ Will permittee have any employees on the jobsite?  No  Yes → INSURANCE CO: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

→ WORKER'S COMPENSATION POLICY # \_\_\_\_\_

NATURE OF WORK IN DETAIL: REHAB: LBP Abatement, Asbestos Abatement, Replace existing electrical, plumbing, roof, water service, porches, paint windows (modernize)

OCCUPANT/TENANT: Public Housing Dos Rios Dev. VALUATION: \$ 153,889<sup>00</sup>

FLOOD STATUS: <u>NR</u>		S.C.A.T. <u>X16</u>							
JOB DESCRIPTION	BLDG	SHELL	APT	TI ( )	REM (✓)	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES	<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>ELEC</u>	<u>SITE</u>	<del>MECH</del>	<del>PLUMB</del>	<del>ELEC</del>	<del>SITE</del>
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y <u>N</u>	Fed Code	Vio. File	
<u>2</u>				<u>R1</u>	<u>VN</u>	SPR	ALARM	<u>0A</u>	[H] [Quad]
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>None</u>	<u>S</u>		D	PW UTIL

COMMENTS: Single family & multiple family dwellings  
Mark Dilly Does NOT want to have this routed to him 8-30-00

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS?  Provided  Faxed

Date of Request: \_\_\_\_\_

By: \_\_\_\_\_

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

Project Address: 321 Eliza St

Assessor's Parcel Number: 001-0090-003

Previous Use: public house

Description of Request/Proposed Use: window replacement,  
adding front porch, new roofing, repainting

Is This a Change of Use? no

Zoning Designation: RMX

Prior Applications for Project Site(P#, Z#, DRPB#): DR96-187, DR 97-126, P85-059  
DR 98-119, DR 98-122, DR 98-180

Comments: Requires Design Review Approval - Approved  
thru DR 98-119 and DR 98-122 and DR 98-180. ←

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

- \* 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: Arwen Wacht 7/21/00

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

MICROFILM AFTER FINAL

CTF 01 0011150  
PMT 0001730  
DATE 08/30/2000 11:49AM  
PMT#: R0011150 LG RES BLDG PMT  
Q204PLAN CK-RESID'L  
\$10,487.25

\*\*\*DUPLICATE\*\*\*

PD: 08/30/2000 041 DES  
DATE: 08/30/2000 11:49AM 00001730  
PMT#: R0011150 LG RES BLDG PMT  
Q204PLAN CK-RESID'L  
\$10,487.25  
CC \$10,487.25  
CHANGE \$0.00