

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9906858
Insp Area: 2

Site Address: 7736 SILVA RANCH WY SAC
Parcel No: 031-0129-035

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

CONTRACTOR
NEW CASTLE HOMES
PO BOX 990
DAVIS CA 95617

OWNER
NEW CASTLE HOMES

ARCHITECT

Nature of Work: NEW SFR

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 B License Number 752759 Date 8-4-99 Contractor Signature Brian K. Gripe

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):

_____, 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.)

_____, 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 _____ 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 8-4-99 Applicant/Agent Signature Brian K. Gripe

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 2501 17 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 8-4-99 Applicant Signature Brian K. Gripe

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.

PC
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CHA

City of Sacramento Development Services Division Planning and Zoning Information Request

Project Address: SILVA RAICH WAY

Assessor's Parcel Number: 031-0129-036

PREVIOUS USE _____

Current Land Use: _____

Description of Request/Proposed Use: _____

New CONSTRUCTION Single Family Res.

IS THIS A CHANGE OF USE? _____

Zoning Designation: R-1

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

Comments: _____

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] 6/28/99

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

ELEVATION CERTIFICATE
FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
 Expires July 31, 1999

ATTENTION: Use of this certificate does not provide a waiver of the flood insurance purchase requirement. This form is used only to provide elevation information necessary to ensure compliance with applicable community floodplain management ordinances, to determine the proper insurance premium rate, and/or to support a request for a Letter of Map Amendment or Revision (LOMA or LOMR). You are not required to respond to this collection of information unless a valid OMB control number is displayed in the upper right corner of this form.

Instructions for completing this form can be found on the following pages.

SECTION A PROPERTY INFORMATION		FOR INSURANCE COMPANY USE
BUILDING OWNER'S NAME <u>X Newcastle Homes Inc.</u>		POLICY NUMBER
STREET ADDRESS (Including Apt., Unit, Suite and/or Bldg. Number) OR P.O. ROUTE AND BOX NUMBER <u>7736 SILVA RANCH WAY</u>		COMPANY NAIC NUMBER
OTHER DESCRIPTION (Lot and Block Numbers, etc.) <u>APN 031-0129-035</u>		
CITY <u>SACRAMENTO</u>	STATE <u>CA</u>	ZIP CODE

SECTION B FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

Provide the following from the proper FIRM (See Instructions):

1. COMMUNITY NUMBER <u>060266</u>	2. PANEL NUMBER <u>0030</u>	3. SUFFIX <u>F</u>	4. DATE OF FIRM INDEX <u>July 6, 1998</u>	5. FIRM ZONE <u>AR</u>	6. BASE FLOOD ELEVATION (in AO Zones, use depth) <u>19</u>
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7. Indicate the elevation datum system used on the FIRM for Base Flood Elevations (BFE): NGVD '29 Other (describe on back)
8. For Zones A or V, where no BFE is provided on the FIRM, and the community has established a BFE for this building site, indicate the community's BFE: feet NGVD (or other FIRM datum—see Section B, Item 7).

SECTION C BUILDING ELEVATION INFORMATION

- Using the Elevation Certificate Instructions, indicate the diagram number from the diagrams found on Pages 5 and 6 that best describes the subject building's reference level 8.
- (a). FIRM Zones A1-A30, AE, AH, and A (with BFE). The top of the reference level floor from the selected diagram is at an elevation of feet NGVD (or other FIRM datum—see Section B, Item 7).
- (b). FIRM Zones V1-V30, VE, and V (with BFE). The bottom of the lowest horizontal structural member of the reference level from the selected diagram, is at an elevation of feet NGVD (or other FIRM datum—see Section B, Item 7).
- (c). FIRM Zone A (without BFE). The floor used as the reference level from the selected diagram is feet above or below (check one) the highest grade adjacent to the building.
- (d). FIRM Zone AO. The floor used as the reference level from the selected diagram is feet above or below (check one) the highest grade adjacent to the building. If no flood depth number is available, is the building's lowest floor (reference level) elevated in accordance with the community's floodplain management ordinance? Yes No Unknown
- Indicate the elevation datum system used in determining the above reference level elevations: NGVD '29 Other (describe under Comments on Page 2). (NOTE: If the elevation datum used in measuring the elevations is different than that used on the FIRM [see Section B, Item 7], then convert the elevations to the datum system used on the FIRM and show the conversion equation under Comments on Page 2.)
- Elevation reference mark used appears on FIRM: Yes No (See Instructions on Page 4)
- The reference level elevation is based on: actual construction construction drawings
(NOTE: Use of construction drawings is only valid if the building does not yet have the reference level floor in place, in which case this certificate will only be valid for the building during the course of construction. A post-construction Elevation Certificate will be required once construction is complete.)
- The elevation of the lowest grade immediately adjacent to the building is: feet NGVD (or other FIRM datum—see Section B, Item 7).

SECTION D COMMUNITY INFORMATION

- If the community official responsible for verifying building elevations specifies that the reference level indicated in Section C, Item 1 is not the "lowest floor" as defined in the community's floodplain management ordinance, the elevation of the building's "lowest floor" as defined by the ordinance is: feet NGVD (or other FIRM datum—see Section B, Item 7).
- Date of the start of construction or substantial improvement _____

SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

CERTIFICATION OF COMPLIANCE

SCHOOL DISTRICT DEVELOPMENT FEES

PROPERTY OWNER'S NAME		NewCastle Homes Inc	
OWNER'S ADDRESS		7736 Silver Birch Way	
PROJECT ADDRESS		1046 Olive Dr.	
PARCEL NUMBER	031-129-45	LOT NUMBER	9
SUBDIVISION NAME		Carriage Estates	
NUMBER OF UNITS		1	
APPLICANT'S SIGNATURE		Brenda Jensen	
TITLE OF APPLICANT		President	
DATE	8-5-99	TELEPHONE NUMBER	530-759-9184
PLAN IDENTIFICATION NUMBER		9906858	
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		3102	
SIGNATURE		Klan Duke	
TITLE		BUILDING INSPECTOR	
		DATE 6-28-99	
DISTRICT CERTIFICATION NUMBER		6625	
EXEMPT	COMMENTS		
RESIDENTIAL / APARTMENT / ETC.	3102	SQ. FT. X \$ 1.72	= \$ 5335.44
COMMERCIAL / INDUSTRIAL		SQ. FT. X \$	= \$
OTHER FEE	TYPE	SQ. FT. X \$	= \$
TOTAL FEES COLLECTED.....			\$ 5335.44
			- 407.00
Credit Mello-Kees			
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 4428.44			
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.			
SIGNATURE		Mannon K. Lopez	
TITLE		Office Technician III	
		DATE 8/5/99	

91a:certcomp

Distribution: Original--School District; 1st Copy--School District; 2nd Copy--Building Department; 3rd Copy--Applicant