

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0605001  
Insp Area: 4  
Thos Bros: 256G7

**PAID**  
CITY OF SACRAMENTO  
APR 12 2006

Site Address: 4024 CLAREWOOD WY SAC  
Parcel No: 225-1570-064

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

CONTRACTOR

OWNER  
SINGH RAJNESH  
4024 CLAREWOOD WY  
SACRAMENTO, CA 95835  
**NEW CITY HALL**

ARCHITECT

**Nature of Work:** Addition of 520 sq ft attached covered patio at the rear of an existing home

**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);

**7031.5:** 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 4/12/06 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 \_\_\_\_\_ 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 \_\_\_\_\_ 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  
 PLANNING & BUILDING DEPARTMENT  
 BUILDING DIVISION  
 www.cityofsacramento.org

Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT  
 Inspection: 1-916-808-5191



Downtown Permit Center  
 1231 I Street, Suite 200, Sacramento, CA 95814

North Permit Center  
 2101 Arena Blvd., Suite 200, Sacramento, CA 95834

PRELIMINARY RESIDENTIAL APPLICATION

1-916-808-5656 OR 1-866-EZ-PERMIT

4024 Clarewood Way  
 0605001

4024 CLAREWOOD WAY  
 BUILDING SITE ADDRESS SUITE INSP. AREA  
 ASSESSOR'S PARCEL NO. COMMUNITY PLAN NO. PLAN CHECK NO.  
 0605001

NAME OF APPLICANT	ADDRESS	ZIP CODE	PHONE #	FAX #
RAJANESH H SINGH	4024 CLAREWOOD WAY	95835	(916) 214-0648	
PROPERTY OWNER				
RAJANESH SINGH	✓	✓	✓	✓
LICENSED CONTRACTOR LICENSE #:				
owner Builder				
ARCHITECT/ENGINEER				

No. of Stories	No. of Rooms	Roof Covering	Area 1 <sup>st</sup> Floor	Total Area	Garage Area	Patio Area
1		Roller Roofing	<del>540</del>	540		540

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

NATURE OF WORK IN DETAIL  
 Build 540 sq ft Patio

\$ 1621\*  
 VALUATION

12/28/2004

800 999-5099

City of Sacramento Planning Division

PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL

ADDRESS: 4024 Clarewood Way		APN: 225-1570-064	
DRPB AREA / PUD / SPD: Expanded North, Westborough PUD		ZONING: R1-A	
EXISTING LAND USE: Single family home with attached 2 car garage			
PROPOSED USE: Addition of patio on the rear of home. (Approximately 520 sf)			
PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:			
<input type="checkbox"/>	Planning review is NOT required.		
<input type="checkbox"/>	Use is NOT allowed; applicant CANNOT submit for plan check.		
<input type="checkbox"/>	Requires APPLICATION(s): PC      ZA      IR      ER      DR      PB		
Required Planning application must be submitted <i>before</i> project can be submitted for plan check.			
<input type="checkbox"/>	Application(s) IN PROGRESS:		
Applicant may submit for concurrent building permit plan check, at applicant's risk. Building Division must check with Planning staff and/or SITE before issuing building permit.			
<input type="checkbox"/>	Application(s) COMPLETED:		
Building permit must conform to approved plans and comply with all conditions of approval. Do NOT issue building permit prior to end of 10 day appeal period.			
<input checked="" type="checkbox"/>	Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards <i>prior to issuance</i> of building permit.		
<input checked="" type="checkbox"/>	Meets setback & lot coverage requirements as shown on site plan provided.		
<input checked="" type="checkbox"/>	Plans to be submitted have been stamped/signed by Planning counter staff.		
<input type="checkbox"/>	Route to SITE for plan check and inspection.		
<input type="checkbox"/>	Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.		
COMMENTS: Structure is not visible from street therefore in Expanded North, the project does not need to be submitted to Design Review. Setbacks are ok. Lot coverage is approximately 47%. (Home and garage 2279, subtract half of garage and front porch 323, patio 520, on a 5355 sf lot.) In the Westborough PUD, 50% of the homes on a street may exceed the 40% lot coverage requirement.  Applicant is advised that no further structures can be built or added that would increase the total lot coverage. <i>NOTE: per conversation 10/11/2005 with Ryan Donabedian of Affordable Awning and Accessories, there is NO existing patio cover on this property at this time. This is despite the permit issued and finalized in august of 2004 for a 420+/- patio cover listed in APS .mmap 10/11/05.</i>			
DATE: April 6, 2004		BY: Evan Compton	



**CITY OF SACRAMENTO  
DEVELOPMENT SERVICES DEPARTMENT  
BUILDING DIVISION**

North Permit Center  
2101 Arena Blvd., Suite 200  
Sacramento, CA 95834  
Inspection: (916) 808-4677

**OWNER BUILDER VERIFICATION**

1. Check one below - I or my immediate family (parent, spouse, or child) will perform:

- A -  all the work authorized by this permit.
- B -  a portion of the work.
- C -  none of the work.

If B or C is checked, complete 2 or 3 below.

2. A State licensed contractor (\*) will be hired to do:

- all of the authorized work.
- a portion of the authorized work.

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Type of Work \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Type of Work \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Type of Work \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Type of Work \_\_\_\_\_

3.  I will utilize unlicensed person(s) other than my immediate family to perform all or portions of the authorized work. A Certificate of Workers Compensation must be on file at this office.

I declare under penalty of perjury that the above is true and correct. I have read and understand the owner-builder information on the reverse side of this form.

Signed: Property Owner \_\_\_\_\_

Date 4.12.06 Case No. \_\_\_\_\_ Permit No. 0605001

Job Address 4024 CLAREWOOD WAY, SACRA CA. 95835

Note: \* Information regarding unknown contractors or change in subcontractors shall be submitted to the Building Inspection field office.