

NOTE: DO NOT COVER OR CONCEAL ANY BUILDING, ELECTRICAL PLUMBING OR MECHANICAL WORK WITHOUT INSPECTOR'S SIGNATURE IN PROPER PLACE.

INSPECTION	INSPECTOR	DATE
B10 FOUNDATION FORMS	<i>[Signature]</i>	8-15-97
B11 UFER GROUND		
B12 CONCRETE SLAB FORMS		
P40 PLUMB. UNDER FLOOR/SLAB		
M30 MECH/UNDER FLOOR/SLAB		
E61 ELECT. UNDERGROUND		
E62 ELECT. CONDUIT-SLAB		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
B13 FLOOR JOISTS OR GIRDERS		
DO NOT INSTALL SUB FLOOR UNTIL ABOVE HAS BEEN SIGNED		
B14/15 INSULATION/WALL/FLOOR		8-10-97
P41 TOP PLUMBING		
M31 TOP MECHANICAL/WALL/CEIL.		
E63 ROUGH ELECTRICAL/WALL/CEIL.		8-10-97
B19 FRAME		
B17 ROOF PLYWOOD NAIL, COMM & APTS.		
B18 EXTERIOR LATH/SIDING		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
B22 INT. LATH OR WALL BD. NAILING		
DO NOT TAPE PLASTER OR TOP UNTIL ABOVE HAS BEEN SIGNED		
E66 SERVICE UNDERGRD CONDUIT		
P43 SEWER SERVICE		
P42 WATER SERVICE		
P46 SPRINKLER SYSTEM		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
P47M33 GAS TEST		
P48 TEMP GAS ISSUED		
E68 POWER POLE EXPIRES		
E67 TEMP. POWER #		
SWIMMING POOLS ONLY		
P47 GAS TEST		
P51 PLUMBING PRE-GUNITE		
P52 PLUMBING PRE-DECK		
E70 ELECTRICAL PRE-GUNITE		
E71 ELECTRICAL PRE-DECK		
E72 ELECTRICAL UNDERGRD		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
ENERGY COMPLIANCE CERTIFICATE TO BE ON FILE PRIOR TO FINAL APPROVAL.		
DATE: _____ SIGNED: _____		
B29 BUILDING	FINAL INSP. NO.	FINAL APPROVALS
E79 ELECTRICAL		<i>[Signature]</i>
P59 PLUMBING		<i>[Signature]</i>
M39 MECHANICAL		<i>[Signature]</i>

DO NOT OCCUPY BUILDING UNTIL ALL OF THE ABOVE HAVE BEEN SIGNED AND CERTIFICATE OF OCCUPANCY ISSUED
THIS CARD TO BE POSTED ON JOB AT ALL TIMES PRIOR TO FINAL APPROVAL

BUILDING SITE ADDRESS
211 8219 GRAND STREET DR.

ASSESSOR PARCEL NO. 117-1170-013 ADDRESS

LICENSED CONTRACTOR NAME OF APPLICANT WA

PROPERTY OWNER

ARCH. ENGR.

NO. OF STORIES NO. OF ROOMS ROOF COVERING AREA 1ST FLOOR TOTAL AREA GARAGE AREA PATIO AREA USE ZONE R-1-A STREET WIDTH

THIS PERMIT IS FOR: BUILDING MECHANICAL PLUMBING ELECTRICAL SITE FIRE

NATURE OF WORK IN DETAIL

FLOOD STATUS () SPECIAL CONDITIONS ATTACHMENTS:

CITY OF SACRAMENTO INSPECTIONS BUILDING INSPECTION DIVISION 264-5191

WORKERS 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 _____

(This section need not be completed if the permit is for one hundred dollars (\$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: 7-11-97 Applicant: WA (Signature)

VALUATION \$ 20,800.02

ISSUED BY: *[Signature]*

DATE ISSUED: 7-29-97

BUILDING PERMIT FEE \$ 419.00

PLAN CHECK PROC. FEE \$ 141.00

S.M.I. FEE \$ 2.08

CONST. EXCISE TAX \$ 166.44

CITY BUS LICENSE \$

TECH. FEE \$ 22.40

WATER DEV. FEE \$

CITY SEWER DEV. FEE \$

REG. SEWER FEE \$

RESIDENTIAL CONST. TAX \$

TOTAL FEES \$ 10,000.00

FED CODE PERMIT NO. 1A 977

CONSTR. TYPE 1A

OCCUP. GROUP 13



Have been called 7/23/97

PC 2922

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION

EXPRESS PLAN REVIEW

DATES					
1ST REVIEW		RECHECK		2ND RECHECK	
IN	OUT	IN	OUT	IN	OUT
07/21/97	7/23/97	7/24/97	1/1	1/1	1/1

forced compliance 7/23/97 am

PLAN CHECK NO. 2922	COMM.	RES.
CONTACT PERSON: CARLITO R. VIEZAMA	PHONE: 916-567-3000	
PROJECT ADDRESS: 219 Grandstaff Ar.	FAX:	
DESCRIPTION OF WORK: 400 9 Res. Adh.		

DISCIPLINE	1ST REVIEW			RECHECK			2ND RECHECK		
	EPR	OC	APPR	EPR	OC	APPR	EPR	OC	APPR
FIRE SAFETY			JDC						
STRUCTURAL	BRI					BTM			
MECHANICAL/PLUMBING									
ELECTRICAL									
FIRE									
PLANNING	✓		DS						

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

Planning Division COMMERCIAL PRELIMINARY Information Request

BUILDING CHECK ONE:

Over the counter review and issue permit _____
 Will be taken in and reviewed for site conditions _____
 Will be taken in but not reviewed for site conditions _____
 Information only, pre-submittal information _____

Customer Name: _____ Phone Number: _____

Project address: 8219 Grandstaff Dr.
 APN: 117-1170-013 Current site use: SFD

Need to verify AN. Proposed Site use: _____

Describe what is being requested: APPROVAL & COMMENTS
400' Addition, verify setbacks

Requested by: W. Tibone Date: 7/22/97

Zone R-1-A Overlay / SPD / PUD / R-review _____
 Planning staff Review required _____
 Planning Hearing required _____
 Design Review required NO
 No Planning Issues X
 Counter ok review by site cond. _____

Prior Applications on site P# _____ Z# _____

DR# _____ PB# _____ IR# _____

Comments: Addition meets setbacks
has 5' on side. 15' At back.

Planning review by: L. Souza Date: 7-22-97

MUST BE REVIEWED BY PLANNING
 Care Facilities Anything Residential Restaurants
 Churches Day care Sidewalk Cafe
 Drive-through Lot Line adjustments
 Medical Offices Bars

Security gates
 CELLULAR COMMUNICATION FACILITIES

V ROUTING (COUNTER & PLANCHECK)

PLANS DELIVERED TO DESIGN REVIEW
 DATE DELIVERED _____ INIT. NA
 DATE RETURNED _____ INIT. _____

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

VI VERIFICATION (PLANCHECK)

DATE 7-25-94 INIT. JDC

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

FEES CORRECTLY CALCULATED
 ADDRESS

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 (LLA, FINAL MAP, ETC.) REQUIRED PRIOR TO PERMIT ISSUANCE?

YES NO APPROVAL TYPE _____

APPROVAL DATE _____ INIT. _____

VIII PLANS APPROVED OK TO ISSUE PERMIT (PLANCHECK)

DATE 7-25-94 INIT. JDC

	APPROVAL REQ'D.		APPROVAL	
	YES	NO	DATE	INIT.
TITLE 24 ENERGY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>7/25</u>	<u>JDC</u>
LIFE SAFETY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<u>7/25</u>	<u>BN</u>
STRUCTURAL	<input checked="" 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. _____

<input type="checkbox"/> CERTIFICATE OF WORKER'S COMPENSATION	<input type="checkbox"/> TRUSS CALCULATIONS
<input type="checkbox"/> OWNER/BUILDER FORMS	<input type="checkbox"/> SEWER WAIVER FORM
<input type="checkbox"/> EXHIBIT ONE/AUTHORIZATION TO SIGN	<input type="checkbox"/> A-99 FLOOD WAIVER FORM
<input type="checkbox"/> SCHOOL IMPACT FEE RECEIPT	<input type="checkbox"/> TITLE 24 APPROVAL
<input type="checkbox"/> OTHER <u>SIGN WORKER'S COMP.</u>	

X APPLICANT NOTIFICATION (PLANCHECK)

DATE _____ INIT. _____

APPLICANT NAME _____

RESIDENTIAL SCREENING FORM

PLAN CHECK PERMITS

ADDRESS 8219 Grandstaff Dr. P.C.# _____

I APPLICATION COMPLETE (COUNTER)

DATE _____ INIT. _____

- ADDRESS
 - ON PERMIT
 - VERIFIED
- OWNER INFORMATION
- INSPECTION AREA/COMMUNITY NUMBER
- APPLICATION PROPERLY SIGNED
- APPLICATION FILLED OUT CORRECTLY

- ASSESSOR'S PARCEL NUMBER
 - ON PERMIT
 - VERIFIED
- CONTRACTOR/ARCH. INFORMATION
- PLAN CHECK NUMBER ON APPLICATION
- VIOLATION FILE CHECKED
- WORKERS' COMPENSATION ON FILE

NATURE OF WORK LISTED

USE

- DWELLING GARAGE
- DUPLEX PATIO/DECK
- TRIPLEX OTHER

TYPE

- NEW CONST. ADDITION
- REMODEL OTHER

SQUARE FOOTAGE LISTED ON PERMIT

- EXISTING NEW

- CONSTRUCTION TYPE
- OCCUPANCY GROUP
- VALUATION CORRECT
- INFILL SCREENING FORM FILLED OUT
- PERMIT LEGIBLE

II PLANNING APPROVAL (COUNTER)

DATE 7/22/97 INIT. WO

- USE ZONE ON PLAN
- STANDARD SETBACKS ?
- PINK PLANNING ROUTE SHEET FILLED OUT?
 - YES NOT REQUIRED
- PROJECT IN AN INFILL AREA

- IS ADDITIONAL PLANNING REVIEW REQUIRED
- DESIGN REVIEW YES NO
- SITE REVIEW YES NO
- IN RICHARDS BL. REDEV. AREA?
- YES NO

III PLANS ACCEPTABLE (COUNTER)

DATE _____ INIT. _____

- SITE PLAN
- ARCH. AND STRUCT. PLANS

- T-24 ENERGY APPROVAL
- 11" x 17" FLOOR PLAN

IV FLOOD ZONE SCREENING (COUNTER)

DATE _____ INIT. _____

- EXEMPT COST (< \$50,000 AND < 50%)
- EXEMPT MISC.
- ZONE X
- ZONE A-99 (WAIVER ATTACHED)

- ZONE A, AE, AO, OR AH
- ELEVATION CERTIFICATE REQ'D. (HOLD PLACED ON PERMIT)
- CONSTRUCTION VALUED AT LESS THAN 50% OF REPLACEMENT COST BEFORE IMPROVEMENTS

NATOMAS MORATORIUM AREA YES NO

HOLD PLACED ON PERMIT APPROVED APPEAL COPY IN PERMIT JACKET