

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0109415

Insp Area: 2

Thos Bros: 337C3

Site Address: 1786 MATSON DR SAC

Parcel No: 048-0072-019

Sub-Type: NSFR

Housing (Y/N): N

CONTRACTOR

DYNAMIC CONSTRUCTION
PO BOX 161779
SACRAMENTO CA 95816

OWNER

ZIVAN RADIN
P O BOX 161779
SACRAMENTO CA 95816

ARCHITECT

Nature of Work: NSFR - 1468 SF LVNG, 525 SF ATTCHD GAR

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 Selzer Home Loans Lender's Address Ukiah

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 297371 Date 10-29-01 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 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 _____ 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 10-29-01 Applicant/Agent Signature [Signature]

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following conditions:

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:

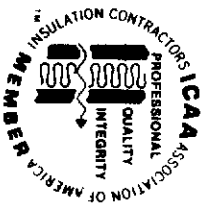
Carrier STATE COMPENSATION INS FUND Policy Number 0773238 - 00 Exp Date 08/30/2002

(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.

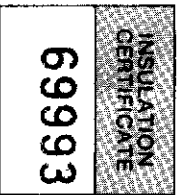
Date 10-29 Applicant Signature [Signature]

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.



**INSULATION CONTRACTORS
ASSOCIATION
OF AMERICA**



1321 DUKE STREET, SUITE 303 • ALEXANDRIA, VA 22314 • (703) 739-0356

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:

DALLAS

LOT # _____

TRACT # _____

STREET **1786 Matsen**

CITY **SLC**

EXTERIOR WALLS:

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____ R- _____

CEILING:

BATTS: _____ THICKNESS/TYPE _____ VALUE _____ R- _____

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____ R- _____

BLOWN IN: *Fiberglas* MINIMUM THICKNESS *14 1/2"* VALUE *38*

SQUARE FOOTAGE COVERED *1117* NUMBER OF BAGS USED *35*

FLOORS: _____ THICKNESS/TYPE _____ VALUE _____ R- _____

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____ R- _____

SLAB ON GRADE: _____ THICKNESS/TYPE _____ VALUE _____ R- _____

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____ R- _____

WIDTH OF INSULATION _____ INCHES

FOUNDATION WALLS: _____ THICKNESS/TYPE _____ VALUE _____ R- _____

MANUFACTURER _____ THICKNESS/TYPE _____ VALUE _____ R- _____

GENERAL CONTRACTOR _____ DATE _____

CALIFORNIA CONTRACTORS LICENSE # _____

SIGNATURE _____

TITLE _____

INSULATION CONTRACTOR **ARCADE INSULATION**

CALIFORNIA CONTRACTORS LICENSE #283784 **5-8-02** DATE _____

SIGNATURE _____

TITLE _____

Department of Planning and Development
Building Inspection Division

Grading and Erosion Control Questionnaire

To be completed for all residential new construction and additions

PART I (To be completed by applicant)

Site Address 1786 MATSON DR. A.P.N. 048-0072-019

Applicant Information

Name Zivan Radin
Address PO Box 161779
Sacto, Ca 95816
Phone 916-731-4005

Project Information (Check One)

Single Family Dwelling Y
Duplex N
Triplex N
Deep Lot Development N

PART II (To be completed by the applicant when the project is not a part of a larger subdivision)

Are there existing structures on site? Y N
Does the site front on a paved road? Y N *
Is the site higher than the crown of adjacent road? Y N *
Is the proposed building site higher than the back of the sidewalk or curb? Y N *

Describe existing frontage improvements along road.

Ditch * Curb and Gutter Curb, Gutter, and Sidewalk

The direction of drainage on this site is:

Front to Rear * Rear to Front

Does an adjacent site drain across this parcel?

Side to Side * N

Does this site have an existing low area or drainage swale?

Y * N

Will construction require cut or fill on site? (* >50FT3 or >2FT)

Y * N

- How much cut? _____ Yards
- How much fill? _____ Yards

Depth
Depth

Has building site been previously been filled?

Y * N don't know

Will existing drainage be re-routed?

Y * N

Do you plan to construct or modify culverts or drainage ditches?

Y * N

Print Name Zivan Radin DYNAMIC CONSTR. Title OWNER

Signature [Signature] Date 10-29-01
Owner or Contractor

PART III (To be completed by staff)

What is the acreage of the parcel to be built on? 0.14 Acres.

If greater than 1/2 acre has an approved erosion and sediment control plan been provided? Y N

If greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP? Y N

Is the parcel to be built on part of a larger subdivision? Y N

Subdivision Name: _____

If yes has an approved erosion and sediment control plan been provided? Y N

If the original subdivision is greater than 5 acres has the applicant provided a copy of the State General Permit NOI and the SWPPP? Y N

Is grading and drainage approval required prior to permit issuance? Y N

Approved by: _____ Date: _____

Building permit #: 0109415 R

White Copy - Permit Jacket
Yellow - Utilities
Pink - Bldg. Div.

Date of Request: _____
By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 1786 Matson Dr.

Assessor's Parcel Number: 048-0072-019

Previous Use: vacant residential property

Description of Request/Proposed Use: new S.F.R.

Is This a Change of Use? YES

Prior Applications for Project Site(P#, Z#, DRPB#): none Zoning Designation: R-1

Comments: meets all setback & lot coverage requirements as shown on site plan

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: Phil Reed 7/24/01

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

MICROFILM AFTER FINAL

Certification of Compliance
School District Development Fees

Part I—To be completed by the APPLICANT

Owner's Name/Address Zivan Radin
Project Address 1786 Matson Dr.
Parcel Number 048-0072-019-0000 Lot No. _____
Subdivision Name Ayres Est. No. of Units _____
Applicant's Signature [Signature] Title _____
Phone No. 916 731 4005 Date 9-12-01

Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II—To be completed by the BUILDING DEPARTMENT

Plan Identification Number 0109415
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 1464
Signature/Title [Signature] BLDG TECH Date 9/12/01

Part III—To be completed by the SCHOOL DISTRICT

School District SCUSD Certificate No. 7204

Exempt Comments _____

Residential/Apartment/etc. 1464 Square ft. x \$ 1.72 = \$ 2,518.08

Commercial/Industrial _____ Square ft. x \$ _____ = \$ _____

Total fees collected = \$ 2,518.08

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.

As the authorized school 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 [Signature] Date 10/10/01