

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0508518

Insp Area: 3

Thos Bros: 317G2

Site Address: 3716 42ND ST SAC

Parcel No: 014-0272-007

OAK PARK DESIGN REVIEW

Sub-Type: REP

Housing (Y/N): N

CONTRACTOR

ADC CONSTRUCTION
5322 2ND AVENUE
SACRAMENTO, CALIFORNIA 95817

OWNER

ROSSMAN IRMA
3716 42ND ST
SACRAMENTO, CA 95820

ARCHITECT

Nature of Work: DRY ROT REPAIR - Exterior dry rot repair as per Design review approval. Minor dry rot repair @ kitchen sink area.

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 823426 Date 6/14/05 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: UNLICENSED

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 above mentioned property for inspection purposes.

Date 6/14/05 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:

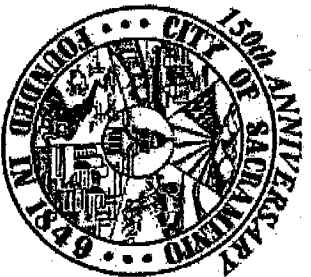
Carrier NO EMPLOYEES Policy Number _____ Exp Date _____

(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 6/14/05 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.



**CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
FAXED PERMIT APPLICATION (certain restrictions apply)**

Fax # 916-264-1901

Faxed request must be received in this office by 3:00 p.m. to be processed the following work day.
Note: Contractors must have a current certificate of Worker's Compensation Insurance.

DATE: 6/13/05

RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

JOB ADDRESS: 3716 42nd Street UNIT # _____ CONTRACT PRICE \$ 3700.00

CONTACT PERSON: Paul Cruz CONTRACT PHONE: 916 837-0729

Property Owner: Terre Rossman Sewel Contractor: ADL Construction License # 823426

Address: 3716 42nd St Address: 5322 2nd Ave

City/State/Zip: _____ City/State/Zip: Sacramento, CA 95817

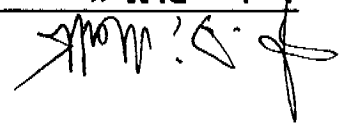
Phone: _____ Phone: 916 870-9185 FAX: 916 451-1177

NATURE OF REQUEST: _____ Indicate from the selections below & provide details under description of work.

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHET <input type="checkbox"/> HOUSE <input type="checkbox"/> GARAGE <input checked="" type="checkbox"/> # STB RIE'S : #SQUARES Material: <input type="checkbox"/> SIDING <input type="checkbox"/> wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> vinyl <input type="checkbox"/> stucco Note: Design Review approval may be required in certain areas.	<input type="checkbox"/> HVAC INSTALLATIONS (residential ONLY) <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> NEW <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: Equipment: \$ Cut-in: \$ Note: Design Review approval may be required for rooftop units.	<input type="checkbox"/> WATER HEATER (residential ONLY) <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input checked="" type="checkbox"/> DRY ROT OR TERMITTE DAMAGE REPAIR (Describe locations below) <u>Side of house & under kitchen</u> Note: Design Review approval may be required in certain areas.	<input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING (residential ONLY) <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Water Service Replacement <input type="checkbox"/> Sewer Service Replacement <input type="checkbox"/> Gas Line Replacement <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> PGE *NOTE: Correction Notice items will require an additional building permit
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DESCRIPTION OF WORK:

Andrea Di Matteo
Planning Technician
Design Review



1. Repair dry rotted area at front and Left elevation.
2. Provide stucco finish to match existing.
3. Paint entire house, all gutters, exposed wood and trim shall be painted a complementary accent color.
4. The scope of exterior work is limited to the above listed items. Any changes are subject to Design Review staff approval.

Staff has reviewed the proposed project, and approves it with the following conditions of approval:

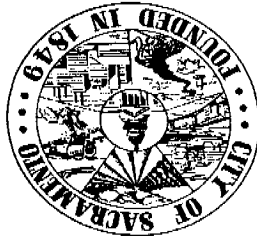
STAFF ACTION AND CONDITIONS OF APPROVAL:

Address: 3716 42nd Street
Description: Dry Rot Repairs
Applicant: Jillian Cruz
Date Approved: June 14, 2005
Staff Contact: Andrea Di Matteo, Planning Technician, 808-1928

Over-The-Counter Project Review

PLANNING AND
BUILDING
DEPARTMENT
PHONE 916-264-5381

CITY OF SACRAMENTO
CALIFORNIA



1231 I STREET, ROOM 200
SACRAMENTO, CA
95814-2998
FAX 916-264-7046

**City of Sacramento
Development Services Department
PLANNING REVIEW FOR BUILDING PERMIT SUBMITTAL**

ADDRESS: 3716 42nd Street APN: 014-072-007 ZONING: R-1

DRPB AREA / PUD / SPD: Oak Park Design Review

EXISTING LAND USE: SFR

PROPOSED USE: SFR-Dry rot repairs

PLANNING STAFF WILL CHECK ONE OR MORE OF THE ITEMS BELOW:

Planning review is NOT required.

Use is NOT allowed; applicant CANNOT submit for plan check.

Requires APPLICATION(s): PC ZA IR ER DR PB

Required Planning application must be approved *before* project can be submitted for plan check.

Application(s) IN PROGRESS: File Number:

Application must be approved before project can be submitted for plan check.

Applications) COMPLETED: File Number & approval date:

Building permit must conform to approved plans and comply with all conditions of approval. Do NOT accept applications for a building permit prior to the end of the 10-day appeal period.

Plans may be submitted for plan check. Plan checker(s) shall confirm compliance with Zoning Ordinance requirements and all applicable development standards *prior to issuance of building permit.*

Meets setback & lot coverage requirements as shown on site plan provided.

Plans to be submitted have been stamped/signed by Planning counter staff.

Route to SITE for plan check and inspection.

Route to SITE for inspection only; plan check not required.

Preliminary review ONLY; the information on this form must be reviewed again and confirmed at the time of building permit submittal.

CONDITIONS AND COMMENTS: Applicant shall repair dry rotted area at left and front elevation, and provide stucco finish to match existing. Foot print and set backs remain unchanged. 10 day appeal period shall be waived because there was no noticing.

DATE: 6-14-05 BY: Andrea Di Matteo