

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9905406
Insp Area: 3

Site Address: 1856 46TH ST SAC
Parcel No: 011-0042-011

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

CONTRACTOR

OWNER
SIMMS SHARON JUDITH
1856 46TH ST
SACRAMENTO CA 95819

ARCHITECT

Nature of Work: 220 SQR FT ADDITION ONTO RES

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.

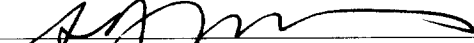
License Class _____ License Number _____ Date _____ Contractor Signature _____

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);

____ 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.)

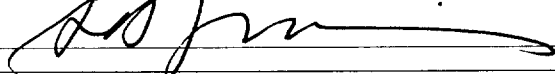
I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

____ I am exempt under Sec. _____ B & PC for this reason: _____

Date 6-7-99 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 6-7-99 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 6-7-99 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.

9905406

3

City of Sacramento Development Services Division
Planning and Zoning Information Request

Project Address: 1856 46th St Sac 95819

Assessor's Parcel Number: 011-0042-011

PREVIOUS USE: Res.

Current Land Use: Res.

Description of Request/Proposed Use: Req. additional
bedroom

IS THIS A CHANGE OF USE? NO -
New room

Zoning Designation: R-1

Prior Applications for Project Site(P#,Z#,DRP#): current permit # 99401R(?)

Comments: addition of approx 150 sq ft bedroom
+ stairs -

No planning requests:
check per R-1 zone

Are There Any Planning Issues?: (Circle One) YES NO

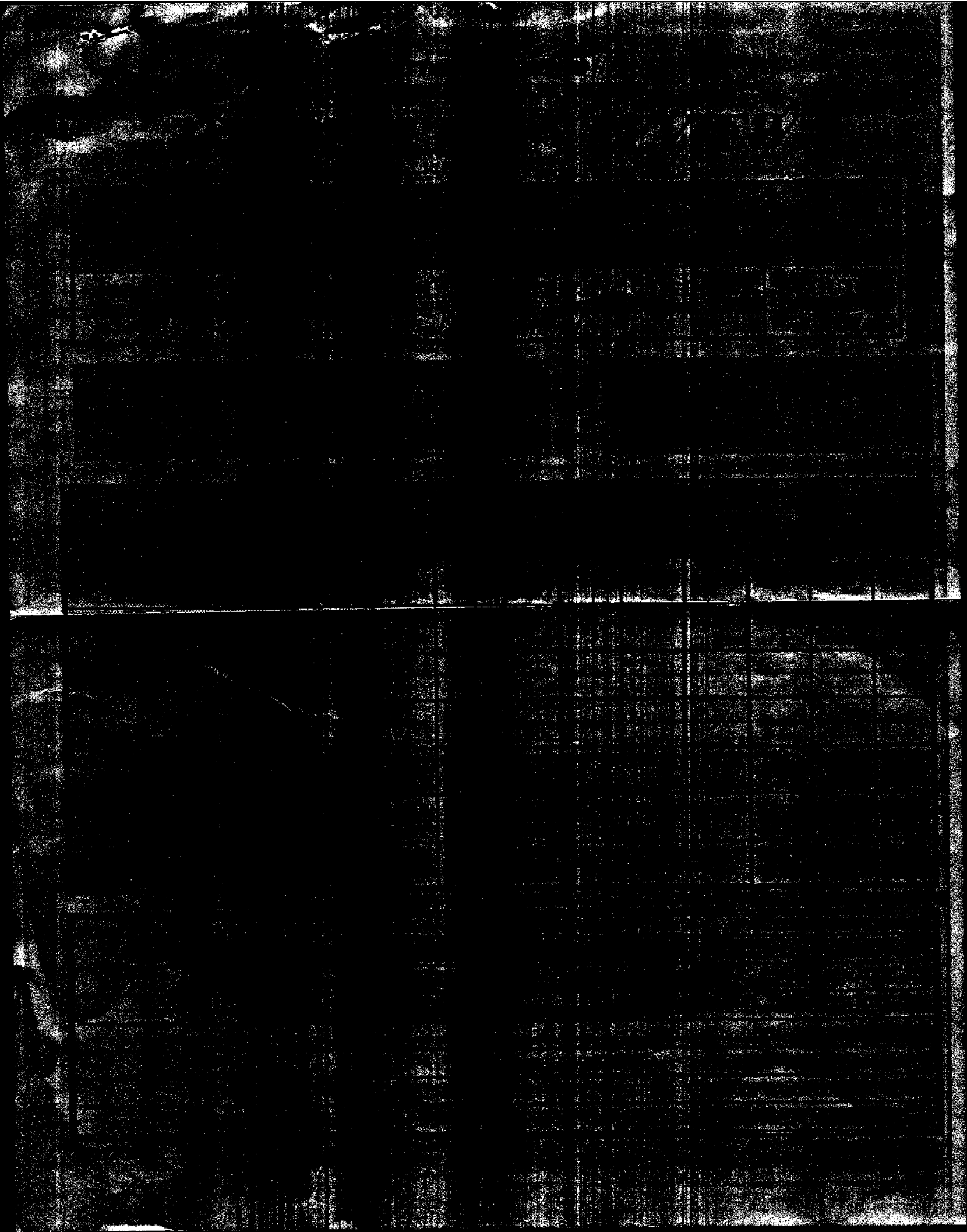
* STAFF Site Plan Check Required? (Circle One) YES NO

* FIELD INSPECTION REQUIRED (Circle one) YES NO

* Design Review/ Preservation Required?: (Circle One) YES NO

Planning Review by/Date: WJL/6/4/02

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



OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNER

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed improvement (yes) or no) _____

2. I (have) have not) _____ signed an application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name Charles Ross - Framing Address _____
City Sacramento Telephone _____
Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise, and provide the major work.

Name None Address _____
City _____ Telephone _____
Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the work indicated:

Name	Address	Phone	Type of Work
None			
Gubrud Electric Sac			
Diak Framing Sac			

Signed [Signature]
Job Address 1826 46th St Date 6-7-99

Permit No.: _____

SACRAMENTO CITY UNIFIED SCHOOL DISTRICT

CERTIFICATION OF COMPLIANCE

SCHOOL DISTRICT DEVELOPMENT FEES

PROPERTY OWNER'S NAME		Sharon Simms	
OWNER'S ADDRESS		1856 46th St. Sacramento 95819	
PROJECT ADDRESS		Same	
PARCEL NUMBER	LOT NUMBER		
SUBDIVISION NAME			
NUMBER OF UNITS			
APPLICANT'S SIGNATURE		<i>[Signature]</i>	
TITLE OF APPLICANT		Homeowner	
DATE	6-4-99	TELEPHONE NUMBER	916 552-6660 W
BUILDING DEPARTMENT			
PLAN IDENTIFICATION NUMBER		9905406	
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		601	
SIGNATURE		<i>[Signature]</i>	
TITLE		Bldg. Inspector I	
		DATE 5-26-99	
SACRAMENTO CITY UNIFIED SCHOOL DISTRICT			
DISTRICT CERTIFICATION NUMBER		6524	
EXEMPT	COMMENTS		
RESIDENTIAL / APARTMENT / ETC.	601	SQ. FT. X \$ 1.72	= \$ 1033.72
COMMERCIAL / INDUSTRIAL		SQ. FT. X \$	= \$
OTHER FEE		TYPE	SQ. FT. X \$
TOTAL FEES COLLECTED.....		\$ 1033.72	

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 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		<i>[Signature]</i>	
TITLE		CIVIC CENTER PERMITS	
		DATE 6/4/99	

91a:certcomp

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

CERTIFICATE OF COMPLIANCE: Residential

9905406

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CF-1R

Project Title: SIMMS ADDITION
 Project Address: 1856 46TH ST.
 SACTO., CA 95819
 Building Title: SIMMS ADDITION
 Document Author: BRUCE W. O'BRIEN
 Telephone:

Run: 213 22-May-99
 SIMMS ADDITIONS

Building Permit #

Plan Check / Date

Field Check / Date

Compliance Method: CALRES2 1.31a
 Climate Zone: 12

GENERAL INFORMATION

Conditioned Floor Area: 1664 ft2
 Building Type: SFD Single Family Detached
 Building Front Orientation: 90 deg (East)
 Number of Dwelling Units: 1.00
 Floor Construction Type: Raised floor

BUILDING SHELL INSULATION

Component Type	Insul R-value	Assembly U-value	Location/Comments
Door	0	0.330	Outside
Door	0	0.330	Unconditioned
Wall	20	0.050	Outside
Wall	20	0.051	Unconditioned
Floor	30	0.040	Crawlspace
Floor	30	0.046	Crawlspace
Ceiling	51	0.023	Attic
Ceiling	38	0.031	Attic
Ceiling	19	0.058	Outside

RECEIVED
 MAY 26 1999

Building Inspection Division

FENESTRATION

Orientation	Area (ft2)	U-value	Panes	Interior Shading	Exterior Shading	Overhang and Fins	Frame Type
Window East	76.3	0.390	2	Wht Drape	Bug Screen	None	Vinyl
Window North	38.2	0.390	2	Wht Drape	Bug Screen	None	Vinyl
Window West	49.0	0.390	2	Wht Drape	Bug Screen	None	Vinyl
Window South	9.3	1.280	1	Wht Drape	None	None	Metal
Window South	58.5	0.390	2	Wht Drape	Bug Screen	None	Vinyl
Skylight	13.4	0.390	2	OpWht Roll	None	None	Wood
Skylight	13.4	0.390	2	OpWht Roll	None	None	Vinyl

THERMAL MASS

Type	Exposed?	Area (ft2)	Thick (in)	Location/Comments
None				

Project Title: SIMMS ADDITION

Run: 213

22-May-99

HVAC SYSTEMS

Type	Efficiency	Duct Location and R-value
Furnace	0.78 AFUE	Attic R-4.2
Air cond. -- central split	10.00 SEER	Attic R-4.2

WATER HEATING SYSTEMS

System Name	Distrib Type	Water Heater Name	Water Heater Type	# of Htrs	Energy Factor	Volume (gal)	Wrap R-val
Standard_Gas	Standard	StandardGas	Storage gas	1	0.53	50	0

WATER HEATING SYSTEMS MISC

System Name	Solar savings fraction	Solar system type	Wood stove boiler?	Wood stove boiler pump?
Standard_Gas	--	--	No	No

WATER HEATER/BOILER DETAILS

Water Heater Name	Recovery Efficiency	AFUE	Rated Input (kBtuh)	Standby Loss	Tank R-value	Pilot Light (Btuh)
StandardGas	76%	--	36.00	--	--	--

HYDRONIC DISTRIBUTION AND TERMINALS

System/Name	Type	Number	Pipe run (ft)	Pipe diam (in)	Insul thck (in)	Insul R-value
None						

SPECIAL FEATURES, REMARKS, AND NOTES

None

**CITY OF SACRAMENTO - BUILDING INSPECTION DIVISION
SPECIAL PACKAGE D/E FOR RESIDENTIAL ADDITIONS IN CLIMATE ZONE 12
100 TO 999 SQUARE FEET**

NOTE: ADDITIONS OF 100 SQUARE FEET OR L WITH 50% OR LESS GLAZING NEED MEET ONLY APPLICABLE FEATURES OF MANDATORY MEASURES CHECKLIST ON BACK OF THIS FORM.

CERTIFICATE OF COMPLIANCE OF IR ADDITION

Project Title Addition 220 SF Date 6-7-99
 Project Address 1856 46th St
 Total Floor Area Addition 220 Addition and existing total _____
 Total Glazing Area Addition 365F Glazing removed existing 0

REQUIREMENTS THAT APPLY TO NEW AREA: BUILDING SHELL INSULATION:

COMPONENT	TYPE (BATT OR BLOWN)	100 SQUARE FEET R VALUE MINIMUM	101 - 999 SQUARE FEET R VALUE MINIMUM
Ceiling	<u>R 38</u>	R - 19	R - 38
Wall	<u>R 13</u>	R - 13	R - 13
Raised Floor	<u>R 19</u>	R - 13	R - 19
Shading			
North/South Facing Glazing	0.66 maximum	Enter Shading Device: _____	
East/West Facing Glazing	0.40 maximum	Enter Shading Device: _____	
Fenestration (Glazing)	DOUBLE REQUIRED		<u>+ 1690 U = .75 MAX</u>

Maximum Glazing Area of New Addition 16% (Example: New Glazing (-) Removal of Existing Glazing + Total Area Additional Square Footage)

Thermal Mass: Package D = 20 per cent _____ **COMPLETE ATTACHED WORKSHEET**
 See Worksheet Package E = 05 per cent _____

NEW HEATING, COOLING OR DOMESTIC WATER HEATING:

Systems installed in conjunction with addition must comply with the appliance standards applicable to new residences. Complete the following standards if new equipment is being installed in conjunction with the room addition; cannot add electric resistant heat:

HVAC SYSTEMS Type (Furnace, air conditioner, heat pump)	Minimum Efficiency (SE, SEER, HSPF)	Duct Insulation	Output (Btuh)	Manufacturer/Model # (Or approved equal)
	<u>78% / 6.8</u>	<u>R - 4.2</u>		
	<u>10.0 / 9.7</u>	<u>R - 4.2</u>		

HOT WATER SYSTEMS System Type (Storage gas, etc.)	Type Capacity	Manufacturer/Model # (or approved equal)	Special Features

COMPLIANCE STATEMENT

This certificate of compliance lists the building features and performance specifications needed to comply with Title 24, Parts 1 and 6, of the California Code of Regulations, and the administrative regulations to implement them. This certificate has been signed by the individual with overall design responsibility. When this certificate of compliance is submitted for a single building plan to be built in multiple orientations, any shading feature that is varied is indicated in the Special Features/Remarks section.

Designer or Owner (per Business & Professions Code)

Documentation Author

Name: Sharon Simms
 Title/Firm: Homeowner/Builder
 Address: 1856 46th St
Sac 95819
 Telephone: 452 6785 H / 552 6660W
 Lic. #: _____

Name: _____
 Title/Firm: _____
 Address: _____
 Telephone: _____

(signature) [Signature] (date) 6/7/99 (signature) _____ (date) _____

Enforcement Agency
 Name: _____
 Title: _____
 Agency: _____
 Telephone: _____

(signature/stamp) _____ (date) _____