

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0106240**  
**Insp Area: 1**

**Site Address: 1325 18TH ST SAC**  
Parcel No: 007-0142-023

**Sub-Type: REP**  
**Housing (Y/N): N**

CONTRACTOR

OWNER  
RODRIGUEZ ROSA M  
7141 BRIGGS DR  
SACRAMENTO CA 95828

ARCHITECT

**Nature of Work: REPLACE SHEET ROCK. ELECTRICAL REPAIRS FROM FIRE DAMMAGE;**  
**NO EXTERIOR WORK: ALL WORK IS SUBJECT TO FIELD INSPECTION:**

**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 5-16-01 Owner Signature [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 5-16-01 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 \_\_\_\_\_ 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 5-16-01 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.**

# APPLICATION FOR COMMERCIAL BUILDING PERMIT

**CITY OF SACRAMENTO**  
**DEVELOPMENT SERVICES DIVISION**  
**PERMIT SERVICES SECTION**

1231 I Street, Rm. 200  
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # <u>010 6240</u>	Insp. Area <u>1C</u>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1325 18<sup>th</sup> ST Suite 208  
 PARCEL # 007-0142-023

<p style="text-align: center;"><b>CONTACT</b></p> Name <u>ROSA RODRIGUEZ</u> Street Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> Name <u>TBD</u> Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	<p style="text-align: center;"><b>OWNER</b></p> Name <u>ROSA RODRIGUEZ</u> Address <u>1329 18<sup>th</sup> ST</u> City/State/Zip <u>SAC, CA 95814</u> Phone <u>448-5104</u> FAX _____ E-mail: _____

→ Will permittee have any employees on the jobsite?  No  Yes → INSURANCE CO: \_\_\_\_\_  
 → WORKER'S COMPENSATION POLICY # \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

NATURE OF WORK IN DETAIL: Replace sheet rock ; Electrical Repairs from Fire Damage ; NO EXTERIOR WORK  
ALL WORKS SUBJECT TO FIELD INSPECTION

OCCUPANT/TENANT: \_\_\_\_\_ VALUATION: \$ ADD<sup>nl</sup>

FLOOD STATUS: <u>LIR</u>				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHELL	APT	TI( )	REM( )	SW	<u>FIRE</u>	ADD	OTH
INSPECTION DISCIPLINES			<u>BLDG</u>	MECH	PLUMB	<u>ELEC</u>	SITE	FIRE		
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File	
<u>3</u>		<u>500<sup>sq ft</sup></u>		<u>R1</u>	<u>VN</u>	SPR	ALARM	<u>OK</u>	[H]	[Quad]
<u>B</u>	<u>L</u>	P	M	<u>E</u>	<u>F</u>	S		D	PW	UTIL
<u>NONE</u>	<u>13 yk</u>			<u>R2H</u>	<u>NONE</u>					

COMMENTS: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

REGIONAL SANITATION FEES?  Yes  No      HEALTH DEPARTMENT?  Yes  No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS?  Provided  Faxed

Sacramento Fire Department - Incident Report

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Incident No : 010011547 1 Call# : 1026045 Date: 03/14/01 Time: 19:21  
Address : 1325 18TH ST #208  
Type : 11 BUILDING FIRE  
Action Taken: 15 EXTINGUISHED  
Property : APARTMENTS: APT:9-10 UNITS  
UBC : HOTELS APT HOUSES CONVENTS  
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Weather : 65 Degrees / Clear  
Resources : 4 Engines, 2 Trucks 1 Medic  
2 Other Apparatus  
1 Fire Rescue Unit

Fire Casualties : None

Fire Damage : Confined to part of room or area of origin  
Smoke Damage : Confined to part of room or area of origin  
Property Loss : \$35,000 Contents Loss : \$5,000  
Property Value : \$500,000 Contents Value: \$5,000  
Area of Origin : Insufficient information to classify  
Caused by : No equipment involved  
Form of Heat : Insufficient information  
Ignition Factor : Incendiary, arson, criminal act  
Type of Material : Undetermined  
Form of Material : Undetermined  
Type of Material : Undetermined  
Form of Material : Undetermined  
Other Factors : Acts or Omissions Insufficient information  
Altered device or mechanism

Level: A03

Extinguished by : Water from hydrant,draft,standpipe  
Structure Type : Building with one specific property use  
Structure Status : In use  
Occupied  
Construction Type: Type III - Ordinary  
Roof Type : Composition  
Number of Stories: 3

Detector Type : Smoke detector - photoelectric  
Power : Battery  
Performance : Undetermined/not reported  
Reason Failed : No failure

Extinguishing Sys: No extinguishing system

Report Author : P776

FIRE

\*\* FIRE INCIDENT SYSTEM -- MASTER RECORD INFORMATION \*\*

INC-NO 010011547 Supp-Exp \_\_\_\_\_ Inc-Date 031401 Inc-Type 11 CALL 01026045  
 Act-Take 15 Prop-Use 42 Pro-Clas 424 Inv-Act Y I-Case 01136  
 Inc-Adr 1325 18TH ST #208 City SAC County 34 St CA  
 Zip \_\_\_\_\_ Mli 1128166 Map 18A DBA \_\_\_\_\_  
 EDP 746 AA-MA 3 FPD SCR Disp-Grp S1 Pat-Nam \_\_\_\_\_  
 Occupant VANDYKE, KATHYRN Oc-Phone \_\_\_\_\_ Pat-DOB \_\_\_\_\_  
 Rept-By GARDINER, GREGORY Re-Phone 446\*6537  
 Owner RODRIQUEZ, ROSA Ow-Phone 9164485104  
 Own-Adr 924 STERN CR O-City SACRAMENTO O-St CA O-Zip \_\_\_\_\_  
 Manager \_\_\_\_\_ Ma-Phone \_\_\_\_\_  
 Man-Adr \_\_\_\_\_ M-City \_\_\_\_\_ M-St \_\_\_\_\_ M-Zip \_\_\_\_\_

Res-Dis \_\_\_\_\_ (tenths) Alr-Srce 1 Alr-Code 1 Fin-Unit T02 Trans FID  
 Staffing 035 Staf-Hrs 49.3 Duration 20.6 Fm-Date 031401 To-Date 031501  
 Rcv-Tim 192122 Dis-Tim 192134 Arr-Tim 192436 Ctl-Tim \_\_\_\_\_ Clr-Tim 155602  
 Res-Tim 302 Batalion 1 Shift A Rpt-Unit E02 Juris \_\_\_\_\_ Priority 1 Amb 2  
 Rescue? \_\_\_\_\_ Count \_\_\_\_\_ Next \_\_\_\_\_ Control F516010316194608 Mast-RN 631646

NCFR

\*\* FIRE INCIDENT SYSTEM -- INCIDENT INFORMATION REPORT \*\* Mast-RN 631646

Inc-No 010011547 Supp-Exp \_\_\_\_\_ Inc-Date 031401 Inc-Type 11  
 Address 1325 18TH ST #208 MA-Id SCR0100011547

\*Situations\* A2 A3 A4 \*Fire\* Act-Tak2 Act-Tak3 Act-Tak4  
 \*Environ\* A5 1 A6 065 A7 A8 \*Resources\* R1 R2 01 R3  
 \*Casualties\* F-Inj F-Ftl \*Civilian Fire\* C-Inj C-Ftl  
 \*Property\* P1 42 P2 424 P3 1 P4 P5 R1 P6 1 P7 2 P8 1  
 \*EMS Calls\* E1 E2 E3 E4 E5 E6 E7 E8 E9  
 \*EMS Situ.\* S1 S2 S3 S4 Act1 Act2 Act3 Act4  
 \*Extent of Damage\* Fire 2 Smoke 2 Prop-Dam 000035000 Cont-Dam 000005000  
 Pro-Val 500000 Cont-Val 5000 Prop-Ins Cont-Ins  
 \*Location and Cause\* L1 00 L2 A03 L3 L4 60 L5 11 Sex1 Age1  
 \*Material, Travel\* T1 00 T2 00 T3 00 T4 00 T5 Sex2 Age2  
 \*Contrib Factors\* Cf1 200 Cf2 211 Fuel-Mod Acres Ext-Mtd 6  
 \*Equip\* Typ 98 Model Make M-Yr  
 Ser \_\_\_\_\_ \*Veh/Mobil\* Veh-Typ 98 V-Make \_\_\_\_\_  
 Mod \_\_\_\_\_ DOT VIN \_\_\_\_\_  
 VL St Yr DL DL-St  
 \*Structure\* Con-Typ 3 Roof 2 Stories 3 Det-Typ 2 Power 1 Perf 0 Fail 7  
 Ext-Typ 98 Ext-Perf Ext-Fail Sprk-Typ Num-Act  
 Auth-Id P776010314222926 Next Control 8954010316095014 Recno 478536

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

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)  (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 \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ Telephone \_\_\_\_\_

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 \_\_\_\_\_ Address \_\_\_\_\_  
City \_\_\_\_\_ Telephone \_\_\_\_\_

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 \_\_\_\_\_

Signed Ken [Signature]  
Job Address 1325 18th St # 208  
Permit No: 0106240