

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9909951
Insp Area: 2

Site Address: 78 TRISTAN CR SAC
Parcel No: 118-0051-005

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

CONTRACTOR
MITCHELL HALL FERMITE
820 ATLANTIC ST
RSMT CA

OWNER
PUGH ROBERT A
78 TRISTAN CR
SACRAMENTO CA 95823

ARCHITECT

Nature of Work: NEW HOT MOP SHOWER/REPAIR DRYROT DAMAGE BENEATH

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.

X License Class: PRMOR License Number: 275882 Date: 9-3-99 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: _____ 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 abovementioned property for inspection purposes.

X Date: 9-3-99 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.

X Date: 9-3-99 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.

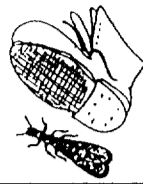
THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

WOOD DESTROYING PESTS AND ORGANISMS INSPECTION REPORT

This is an inspection report only -- not a Notice of Completion
ADDRESS OF PROPERTY INSPECTED

BUILDING NO.	STREET	CITY	ZIP	COUNTY CODE	DATE OF INSPECTION	NUMBER OF PAGES
78	TRISTAN CIRCLE	SACRAMENTO	95823	34	08/31/99	3

MITCHELL HALL TERMITE CONTROL
820 Atlantic Street
Roseville, CA 95678
(916) 782-2303 (916) 772-8483 FAX



STATE OF CALIFORNIA
DEPARTMENT OF
CONSUMER AFFAIRS
**STRUCTURAL PEST
CONTROL BOARD**
REPORT OF INSPECTION



2752193V

REGISTRATION #	PR 2158	REPORT #	991499	STAMP #	2752193V	ESCROW #	
----------------	---------	----------	--------	---------	----------	----------	--

ORDERED BY: BETTY SCROGGINS 78 TRISTAN CIRCLE SACRAMENTO Ca 95823
428-4591

REPORT SENT TO: BETTY SCROGGINS 78 TRISTAN CIRCLE SACRAMENTO Ca 95823
428-4591

PROPERTY OWNER: BETTY SCROGGINS 78 TRISTAN CIRCLE SACRAMENTO Ca 95823
428-4591

PARTY IN INTEREST: _____

ORIGINAL REPORT <input type="checkbox"/> LIMITED REPORT <input checked="" type="checkbox"/> SUPPLEMENTAL REPORT <input type="checkbox"/> * REINSPECTION REPORT <input type="checkbox"/> *	*Original Stamp #	Date
GENERAL DESCRIPTION: <u>LIMITED TO THE WOOD MEMBERS DIRECTLY BENEATH THE STALL SHOWER</u> INSPECTION TAG POSTED: _____ OTHER INSPECTION TAGS: _____	IN ACCESSIBLE AREAS NOT INSPECTED FURTHER INSPECTION SUBSTRANEA TERMITES DRYWOOD TERMITES FUNGUS OR DRY ROT OTHER WOOD PESTS DAMPWOOD TERMITES EARTHWOOD CONTACTS FAULTY GRADING LEVELS CELLULOSE DEBRIS EXCESSIVE MOISTURE SHOWER LEAKS	
1. SUBSTRUCTURE AREA		
2. STALL SHOWER <u>SEE BELOW</u>		<u>See 2A</u>
3. FOUNDATIONS		
4. PORCHES - STEPS		
5. VENTILATION		
6. ABUTMENTS		
7. ATTIC SPACES		
8. GARAGES		
9. DECKS - PATIOS		
10. OTHER - INTERIOR		
11. OTHER - EXTERIOR		

DIAGRAM AND EXPLANATION OF FINDINGS (This report is limited to structure or structures shown on diagram)

IS TOPHER KINSMAN

License No. FR25771

Signature _____

or problems concerning the above report should be directed to the manager of the company. Unresolved questions or problems with ad may be directed to the Structural Pest Control Board at (916) 263-2533, or (800) 737-8188.
to obtain copies of all reports and completion notices on this property filed with the Board during the preceding two years upon 2.00 search fee to: The Structural Pest Control Board, 1418 Howe Ave., Ste. 18, Sacramento, California 95825-3280.

78	TRISTAN CIRCLE	SACRAMENTO
BLDG. NO.	STREET	CITY
2752193V	08/31/1999	991499
STAMP NO.	DATE OF INSPECTION	CO. REPORT NO.

A WOOD-DESTROYING PEST AND ORGANISM INSPECTION REPORT CONTAINS FINDINGS AS TO THE PRESENCE OR ABSENCE OF WOOD-DESTROYING PESTS AND ORGANISMS IN VISIBLE AND ACCESSIBLE AREAS AND CONTAINS RECOMMENDATIONS FOR CORRECTING ANY INFESTATIONS OR INFECTIONS FOUND. THE CONTENTS OF WOOD-DESTROYING PEST AND ORGANISM INSPECTION REPORTS ARE GOVERNED BY THE STRUCTURAL PEST CONTROL ACT AND REGULATIONS. SOME STRUCTURES DO NOT COMPLY WITH BUILDING CODE REQUIREMENTS OR MAY HAVE STRUCTURAL PLUMBING, ELECTRICAL, HEATING, AIR CONDITIONING OR OTHER DEFECTS THAT DO NOT PERTAIN TO WOOD-DESTROYING ORGANISMS. A WOOD-DESTROYING PEST AND ORGANISM INSPECTION REPORT DOES NOT CONTAIN INFORMATION ON SUCH DEFECTS, IF ANY, AS THEY ARE NOT WITHIN THE SCOPE OF THE LICENSES OF EITHER THE INSPECTOR OR THE COMPANY ISSUING THE REPORT.

AREAS NOT INSPECTED - SPECIAL NOTE TO ALL PARTIES REGARDING THIS PROPERTY

THE FOLLOWING AREAS WERE NOT INSPECTED, AS INDICATED IN SECTION #1990, PARAGRAPH (J) OF THE STRUCTURAL PEST CONTROL ACT AND RULES AND REGULATIONS: FURNISHED INTERIORS, INACCESSIBLE ATTICS, INSULATED ATTICS, AND PORTIONS THEREOF; THE INTERIOR OF HOLLOW WALLS: SPACES BETWEEN A FLOOR OR PORCH DECK AND THE CEILING OR SOFFIT BELOW: STALL SHOWERS OVER FINISHED CEILINGS: SUCH STRUCTURAL SEGMENTS AS PORTE COCHERES, ENCLOSED BAY WINDOWS, BUTTRESSES AND SIMILAR AREAS TO WHICH THERE IS NO ACCESS WITHOUT DEFACING OR TEARING OUT LUMBER, MASONRY AND FINISHED WORK, BUILT-IN CABINET WORK: FLOOR BENEATH COVERINGS, AREAS WHERE STORAGE CONDITIONS OR LOCKS MAKES INSPECTION IMPRACTICAL.

THE EXTERIOR SURFACE OF THE ROOF WILL NOT BE INSPECTED. IF YOU WANT THE WATER TIGHTNESS OF THE ROOF DETERMINED, YOU SHOULD CONTACT A ROOFING CONTRACTOR WHO IS LICENSED BY THE CONTRACTOR'S STATE LICENSE BOARD.

MITCHELL HALL TERMITE CONTROL DOES NOT INCLUDE PAINTING AS PART OF THE REPAIR COSTS. IT IS THE OWNERS RESPONSIBILITY TO APPLY PAINT OR TO CONTRACT WITH OTHERS TO DO SO.

"NOTE: THE STRUCTURAL PEST CONTROL BOARDS ENCOURAGES COMPETITIVE BUSINESS PRACTICES AMONG REGISTERED COMPANIES. REPORTS ON THIS STRUCTURE PREPARED BY VARIOUS REGISTERED COMPANIES SHOULD LIST THE SAME FINDINGS (i.e. termite infestations, termite damage, fungus damage, etc.) HOWEVER, RECOMMENDATIONS TO CORRECT THESE FINDINGS MAY VARY FROM COMPANY TO COMPANY. THEREFORE, YOU MAY WISH TO SEEK A SECOND OPINION SINCE THERE MAY BE ALTERNATIVE METHODS OF CORRECTING THE FINDINGS LISTED ON THIS REPORT THAT MAY BE LESS COSTLY."

THIS IS A SEPARATED REPORT WHICH IS DEFINED AS SECTION 1 AND SECTION 2 CONDITIONS EVIDENT ON THE DATE OF INSPECTION.

SECTION 1 - ITEMS CONTAIN ITEMS WHERE THERE IS EVIDENCE OF ACTIVE INFESTATION, INFECTION OR CONDITIONS THAT HAVE RESULTED IN OR FROM INFESTATION OR INFECTION FOUND ON THE DATE OF INSPECTION.

SECTION 2 - ITEMS LISTED CONTAIN CONDITIONS DEEMED LIKELY TO LEAD TO INFESTATION OR INFECTION, BUT WHERE NO VISIBLE EVIDENCE OF SUCH WAS FOUND ON THE DATE OF INSPECTION.

FURTHER INSPECTION - SPECIAL NOTE TO ALL PARTIES REGARDING THIS PROPERTY

FURTHER INSPECTION ITEMS ARE DEFINED AS RECOMMENDATIONS TO INSPECT AREAS WHICH DURING THE ORIGINAL INSPECTION DID NOT ALLOW THE INSPECTOR ACCESS TO COMPLETE THE INSPECTION AND CAN NOT BE DEFINED AS SECTION 1 AND SECTION 2.

78	TRISTAN CIRCLE	SACRAMENTO
BLDG. NO.	STREET	CITY
2752193V	08/31/1999	991499
STAMP NO.	DATE OF INSPECTION	CO. REPORT NO.

STALL SHOWER:

Item 2A: FINDING: THE STALL SHOWER WAS FOUND TO LEAK WHEN WATER TESTED AS PRESCRIBED BY THE STRUCTURAL PEST CONTROL ACT.

RECOMMENDATION: REMOVE TWO ROWS STALL SHOWER (CERAMIC TILE, GLASS ENCLOSURE, IF ANY, MORTAR, PAN AND DAMAGED SHEETROCK). REMOVE AND RELPACE THE DAMAGED WOOD MEMBERS WITH NEW WOOD. APPLY TIM-BOR TO THE AREAS OF REPAIR TO INHIBIT THE GROWTH OF WOOD DECAY FUNGI. INSTALL A NEW SUBFLOOR DRAIN, PAN SIMILAR TO THAT WHICH HAD BEEN REMOVED, WATERPROOF SHEETROCK, MORTAR AND TILE OF A NEUTRAL COLOR. NOTE: OUR BID INCLUDES REPLACEMENT OF THE WOOD MEMBERS DIRECTLY BELOW THE STALL SHOWER OR ADJACENT TO THE WALLS OF THE SHOWER ONLY. SHOULD IT BE FOUND THAT THE DAMAGE EXTENDS BEYOND THAT AREA, A SUPPLEMENTAL REPORT WILL BE ISSUED STATING FINDINGS, RECOMMENDATIONS AND AN ESTIMATE OF COST FOR ANY CORRECTIVE REPAIRS.

***** This is a Section 1 Item *****

MITCHELL HALL TERMITE CONTROL APPRECIATES THE OPPORTUNITY TO INSPECT YOUR HOME. IF YOU HAVE ANY QUESTIONS REGARDING THIS REPORT, PLEASE CONTACT OUR OFFICE AT (916) 965-5858.

CAUTION
PESTICIDES ARE CHEMICALS

SECTION 8538.(a) OF THE STRUCTURAL PEST CONTROL ACT REQUIRES THAT THE FOLLOWING INFORMATION BE GIVEN WITH ALL REPORTS THAT WILL REQUIRE SOME FORM OF CHEMICAL TREATMENT.

STRUCTURAL PEST CONTROL OPERATORS ARE LICENSED AND REGULATED BY THE STRUCTURAL PEST CONTROL BOARD, AND APPLY PESTICIDES WHICH ARE REGISTERED AND APPROVED FOR USE BY THE CALIFORNIA DEPARTMENT OF FOOD AND AGRICULTURE AND THE UNITED STATES ENVIRONMENTAL PROTECTION AGENCY. REGISTRATION IS GRANTED WHEN THE STATE FINDS THAT BASED ON EXISTING SCIENTIFIC EVIDENCE THERE ARE NO APPRECIABLE RISKS IF PROPER USE CONDITIONS ARE FOLLOWED OR THAT THE RISKS ARE OUTWEIGHED BY THE BENEFITS. THE DEGREE OR RISK DEPENDS UPON THE DEGREE OF EXPOSURE, SO EXPOSURE SHOULD BE MINIMIZED.

IF WITHIN 24 HOURS FOLLOWING APPLICATION YOU EXPERIENCE SYMPTOMS SIMILAR TO COMMON SEASONAL ILLNESS COMPARABLE TO THE FLU, CONTACT YOUR PHYSICIAN OR POISON CONTROL CENTER AND YOUR PEST CONTROL OPERATOR IMMEDIATELY.

- FOR FURTHER INFORMATION CONTACT ANY OR THE FOLLOWING:
- MITCHELL HALL TERMITE CONTROL - (916) 782-2303
- COUNTY HEALTH DEPT. - (916) 875-5881
- CO. AGRICULTURE COMMISSIONER - (916) 875-6603
- STRUCTURAL PEST CONT. BOARD - (916) 263-2533
- POISON CONTROL CENTER - (800) 876-4766

PESTICIDES	ACTIVE INGREDIENTS	TARGET PEST
TIMBOR	DISODIUM OCTABORATE TETRAHYDRATE	WOOD DECAY FUNGI
PREMISE	IMIDACLOPRID	SUBTERRANEAN TERMITES
METHYL BROMIDE	SAME	WOOD BORING BEETLES
VIKANE	SULFURYL FLOURIDE	WOOD BORING BEETLES/ DRYWOOD TERMITES