

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 9905881

Insp Area: 2

Site Address: 5821 SOUTH LAND PARK DR SAC

Parcel No: 024-0181-008

Sub-Type: COM

Housing (Y/N): N

CONTRACTOR

CREATIVE CONSTRUCTION
7040 ST LUZ CT
SACRAMENTO CA 95842

OWNER

REED CALVIN L & ROSEMARY
5821 SOUTH LAND PARK D
SACRAMENTO CA 95822

ARCHITECT

Nature of Work: FIRE REPAIRS AS PER REPORT

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 D License Number 346346 Date 6/7/99 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.

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 Evolution Home Trans Policy Number 02KMO001267 Exp Date 1-1-00

(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.

CITY OF SACRAMENTO

APPLICATION FOR COMMERCIAL BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION

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

ACTIVITY # _____	Insp. Area _____
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS ~~8980~~ / 5929 S. LAND PARK DR. Suite _____
 PARCEL # 024-0181-008

<p style="text-align: center;">CONTACT</p> <p>Name <u>Rick Allen</u></p> <p>Address <u>Same</u> →</p> <p>Phone _____ FAX _____</p> <p>E-mail <u>CC at SACTO@AOL.COM</u></p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>346845</u></p> <p>Name <u>Ricardo R Allen</u></p> <p>Address <u>7040 ST. LORE CT SACRO</u></p> <p>Phone <u>331-3244</u> FAX <u>331-4110</u></p> <p>E-mail <u>CBLDG@AOL.COM</u></p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>N/A</u></p> <p>Address _____</p> <p>Phone _____ FAX _____</p> <p>E-mail _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>Rosemary Reed</u></p> <p>Address <u>1347 SON CLARENTE WAY SACRO</u></p> <p>Phone <u>422-8519</u> FAX _____</p> <p>E-mail _____</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: CLANDON INS.
 → WORKER'S COMPENSATION POLICY # 02K1A0001267 EXPIRATION DATE: 01/01/00

NATURE OF WORK IN DETAIL: REPAIR & REPLACE ROOF & JOIST FRAMING, ELEC WIRING, TEST DUCTS, INSULATION CEILING, HEAVY SHOE ROOFING.

OCCUPANT/TENANT: UNOCCUPIED. VALUATION: \$ 37,000

FLOOD STATUS: _____				S.C.A.T. _____						
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM()	SW	FIRE	ADD	<u>OTH</u>
INSPECTION DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	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>R-1</u>	<u>VW</u>	SPR	ALARM		[H]	[Quad]
B	L	P	M	E	F	S	D	PW	UTIL	

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

Incident No : 990016775 Call# : 99038002 Date: 04/24/99 Time: 3:24
Address : 5927 SOUTH LAND PARK DR
Type : 11 BUILDING FIRE
Action Taken: 13 EXTINGUISH,SALVAGE,OVERHAUL
Property : APARTMENTS: APT:1-2 UNIT W/BUSINESS
UBC : HOTELS APT HOUSES CONVENTS

Weather : 58 Degrees / Clear
Resources : 1 Engine
 1 Other Apparatus
Fire Casualties : None

Fire Damage : Confined to structure of origin
Smoke Damage : Confined to structure of origin
Property Loss : \$100,000 Contents Loss : \$7,000
Property Value : \$2,000,000 Contents Value: \$250,000
Area of Origin : Insufficient information to classify
Caused by : No equipment involved
Form of Heat : Cigarette
Ignition Factor : Abandoned,discarded heat source
Type of Material : Leaves,needles,litter
Form of Material : Fence,pole
Type of Material : Sawn woods,finished lumber
Form of Material : Multiple forms of material first ignited
Smoke Travel : Opening in construction
Other Factors : Detection of fire
Extinguished by : Water from hydrant,draft,standpipe
Structure Type : Building with one specific property use
Structure Status : In use
 Occupied
Construction Type: Type V - Wood Frame
Roof Type : Wood shake - untreated
Number of Stories: 1

Level: A01

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

Extinguishing Sys: No extinguishing system

Report Author : F282

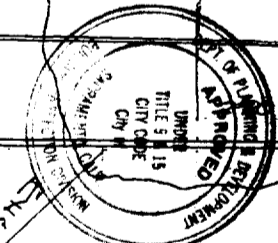
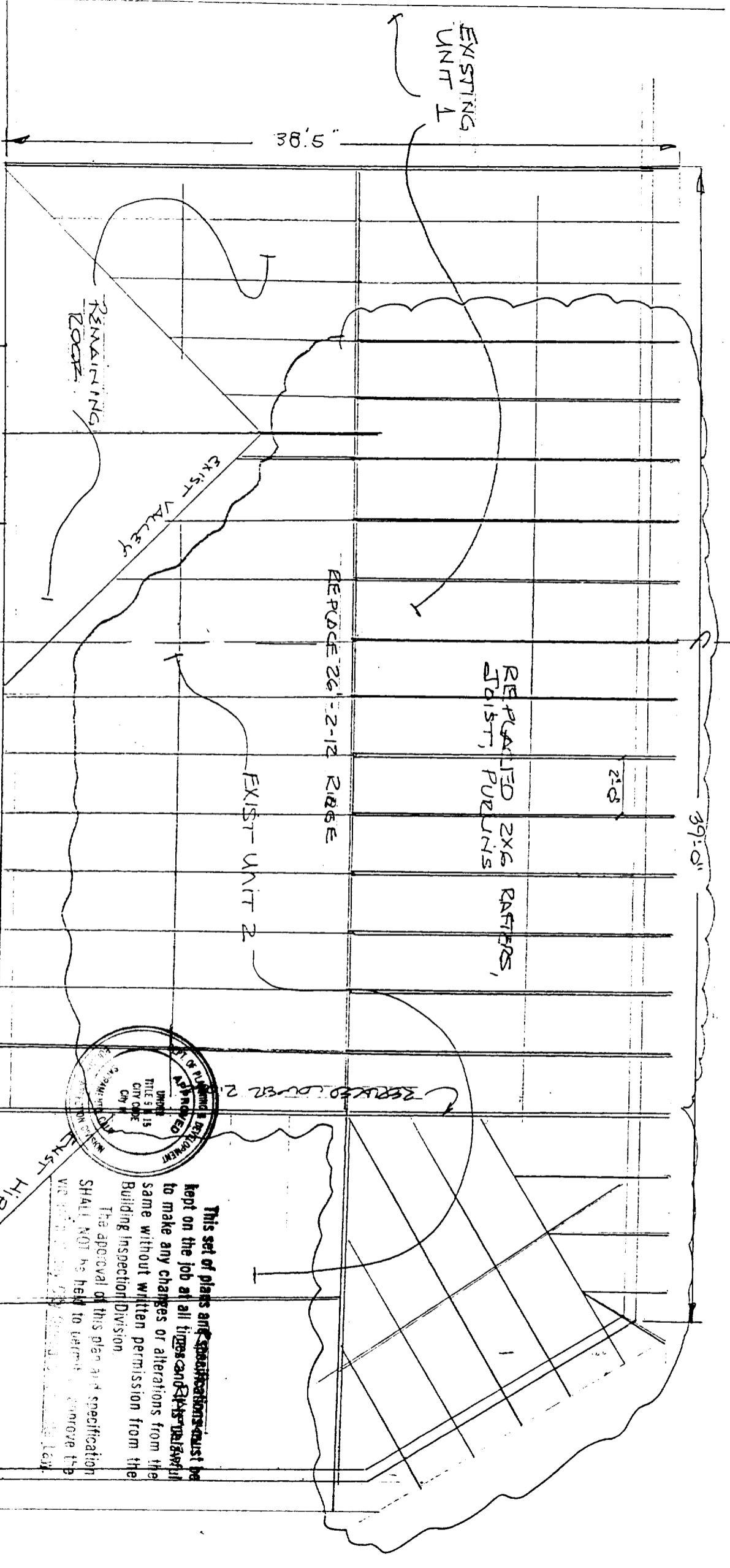
SCALE
 1/4" = 1'-0" H.
 1/8" = 1'-0" V.

REPLACE SHAKE ROOF WITH CLASS "C" FIBRE
 RETAINED SHAKES OVER 18" 30LB FELT.

EXISTING DIMITS

1. CLOUDED AREA SHOWS REPLACED FRAMING.
2. CONVENTIONAL FRAMING.
3. ELECTRICAL SERVICES TO "J" BOXES.
4. REPLACE A/C DUCTING.
5. REPLACE INSULATION CEILING R-30 BELOW.

ROOF FRAME PLAN



This set of plans and specifications must be kept on the job at all times and shall be available to make any changes or alterations from the same without written permission from the Building Inspection Division.
 The approval of this plan and specification SHALL NOT be held to prevent or remove the violation of any laws, codes, or regulations.

5925-5927 S. LAND PARK DR.
 SACRAMENTO, CA. 95822
 PHONE # 0240181 008