

PRIOR TO SIGNOFF

NOISE
OK TRAVIS PARK
1100-1 TEL 1 885
7/17/14 B. Brown

DO NOT COVER OR CONCEAL ANY BUILDING, ELECTRICAL, PLUMBING OR MECHANICAL WORK WITHOUT INSPECTOR'S SIGNATURE IN PROPER PLACE.

INSPECTION	INSPECTOR	DATE
FOUNDATION FORMS	pt. Good	11/13
CONCRETE SLAB FORMS		8-17-14
PLUMB. UNDERFLOOR/SLAB		
MECH/UNDERFLOOR/SLAB		
ELECT. CONDUIT-SLAB		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
FLOOR JOISTS OR GIRDERS		
DO NOT INSTALL SUB FLOOR UNTIL ABOVE HAS BEEN SIGNED		
TOP PLUMBING		
TOP MECHANICAL		
ROUGH ELECTRICAL		
FRAME		
ROOF PLYWOOD NAIL COMM. & APTS		
EXTERIOR LATH		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
INT. LATH OR WALL BD. NAILING		
DO NOT TAPE PLASTER OR TOP UNTIL ABOVE HAS BEEN SIGNED		
SERVICE UNDERGRD CONDUIT		
SEWER SERVICE		
WATER SERVICE		
SPRINKLER SYSTEM		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
GAS TEST		
TEMP GAS	ISSUED	EXPIRES
POWER POLE		
TEMP. POWER #	200573	11-3-14
SWIMMING POOLS ONLY		
SEWER SERVICE REROUTE		
WATER SERVICE REROUTE		
GAS TEST		
PLUMBING PRE-GUNITE		
PLUMBING PRE-DECK		
ELECTRICAL PRE-GUNITE		
ELECTRICAL PRE-DECK		
ELECTRICAL UNDERGRD		
DO NOT COVER UNTIL INSTALLATION ABOVE HAS BEEN SIGNED		
ENERGY COMPLIANCE CERTIFICATE TO BE ON FILE PRIOR TO FINAL APPROVAL		
DATE	SIGNED	
	Wall	10-31-14

Good
1-12-14

NO FINAL INSPECTION CALLED BY PERMITEE

FINAL APPROVALS

FINAL INSP. N. A.
BUILDING
ELECTRICAL
PLUMBING
MECHANICAL

[Signatures]

DO NOT OCCUPY BUILDING UNTIL ALL OF THE ABOVE HAVE BEEN SIGNED AND CERTIFICATE OF OCCUPANCY ISSUED
THIS CARD TO BE POSTED ON JOB AT ALL TIMES UNTIL FINAL APPROVAL.

CITY OF SACRAMENTO BUILDING INSPECTION DIVISION

1624-1

LEGAL DESCRIPTION: 1624-1
ASSESSOR PARCEL: 1624-1
NAME OF APPLICANT: 1624-1
ADDRESS: 1624-1

LICENSED CONTRACTOR: _____
PROPERTY OWNER: _____
ARCH. ENGR: _____

NO. OF STORIES: _____ NO. OF ROOMS: _____ ROOF COVERING: _____ AREA 1ST FLOOR: _____ TOTAL AREA: _____

THIS PERMIT IS FOR: BUILDING MECHANICAL PLUMBING ELECTRICAL

NATURE OF WORK IN DETAIL: 2nd Story Addition

FLOOD STATUS: () SPECIAL CONDITIONS ATTACHMENTS: ()

STREET WIDTH: _____ COMMUNITY PLAN NO.: _____

CALL 264-5191 FOR INSPECTIONS

PERMIT SERVICES: 264-7619 FIELD OFFICE: 264-5716
HOUSING/DANGEROUS BLDG: 264-5404 ADMINISTRATION: 264-7182

WORKERS' COMPENSATION DECLARATION
I hereby affirm that I have a certificate of consent to self-insure, or a certificate of Workers' Compensation Insurance, or a certified copy thereof (Sec. 3800, Lab. C).

POLICY NO. _____ COMPANY: _____

Certified copy is hereby furnished.

Certified copy is filed with the City Building Inspection Department or City Finance Department.

"I certify that I have read this application and state that the above information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above mentioned property for inspection purposes."

DATE: _____ APPLICANT: _____

Signature of Applicant or Agent: _____ Date: _____

THIS PERMIT SHALL EXPIRE BY IMITATION IE WONDV ATTITUDEZFN