CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Site Address: 511 9TH ST SAC

Parcel No:

002-0112-002

Sub-Type:

Permit No:

Insp Area:

RES

0101594

Housing (Y/N): N

ARCHITECT

OWNER CONTRACTOR N.D. MONTGOMERY CONTRACTORS INC.

REDEVELOPMENT AGENCY/CITY OF SACRAMENTO 3611 51**ST AV**

SACRAMENTO CA 95823	CARMICHAEL CA 95608
	DUSE FROM 817 13TH ST TO 511 9TH ST
of the work for which this permit is issued	
ender's Name	Lender's Address
LICENSED CONTRACTORS DE	CLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter and Professions Code and my license is in full force and effect.
icense Class 2-2/ License Number	25/975 Date 5 716 01 Contractor Signature home on DM mt/n
OWNER-BUILDER DECLARAT collowing reason (Sec. 7031.5, Business any structure, prior to its issuance, also not the Contractors License Law (Chapte exempt therefrom and the basis for the appearably of not more than five hundred do	ON: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the depolessions Code, any city or county which requires a permit to construct, alter, improve, demolish, or repartures the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provision 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is ged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a cival arc (\$500.00).
for sale (Sec. 7044, Business and Profe	employees with wages as their sole compensation, will do the work, and the structure is not intended or offere sional Code: The Contractors License Law does not apply to an owner of property who builds or improve or herself or through his/her own employees, provided that such improvements are not intended or offered for ement is sold within one year of completion, the owner-builder will have the burden of proving that he/she diee.)
l, as owner of the property, am Code: The Contractors License Law do contractor(s) licensed pursuant to the Co	reclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Profession not apply to an owner of property who builds or improves thereon, and who contracts for such projects with ractors I icense I aw).
I am exempt under Sec.	B & PC for this reason:
Date	Owner Signature
all measurements and locations shown of private agreement relating to permission any improvement or the violation of any	T, the applicant represents, and the city relies on the representation of the applicant that the applicant the applicant the applicant the applicant that the applicant the appli
relating to building construction and her	authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes
	Applicant/Agent Signature non Dmnff muy
WORKER'S COMPENSATION I I have and will maintain a certific performance of work for which the perm	ECLARATION: I hereby affirm under penalty of perjury one of the following declarations: te of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, forth is issued.
I have and will maintain worker which this permit is issued. My workers	compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work feompensation insurance carrier and policy number are:
Carrier STATE FUND	Policy Number 692-00 UNIT 0002172 Exp Date 10/01/2001
-1-11 t amples one person in any ma	ed if the permit is for \$100 or less). I certify that in the performance of the work for which this permit is issued ner so as to become subject to the workers' compensation laws of California and agree that if I should becomisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.
Date 5 Feb 0 /	Applicant Signature In a D Manfacy
WARNING FAILURE TO SECURE	VORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TENES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST (

COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

991	435ZR

Date of Request:	_
Ву:	_

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION PLANNING AND ZONING INFORMATION REQUEST

••	Project Address: 511 9th St.
	Assessor's Parcel Number: 002-0012-002
	Previous Use: Vacant.
	Description of Request/Proposed Use: To More horse located at
817	13th & I to \$11 9th St.
006 005	3 of Pes Conv./Conv.
	Is This a Change of Use?
	Zoning Designation: 2-3A
	Prior Applications for Project Site(P#, Z#, DRPB#): PB98-017
	Comments: Mkali Plat Preservation Area ; Requires vertien
	by preservation prior to permit (sonance)
	Front SB = 25' or Areage of 2 fort Sb; Side yard = 3'
	Rear = 15' the first part settingles Front SB Ok.
	Are There Any Planning Issues?: (circle one YES) NO
· —	* Staff Site Plan Check Required? (Circle one)
	* Field Inspection Required? (Circle one) * Design Review/Preservation Required?: (Circle one)
	Planning Review by/Date Docker 18/17/99

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

MICROFILM AFTER FINAL

TRANSPORTATION PERMIT

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1231 I STREET			SUNDAY	1	SEENOT	E BELOW FOR	Miles		
SACRAMENTO, CA 95814			SLARISE - SLASET	i	TIME RI	STRICTIONS	CITY REPRESE	VTATIVE	
PHONE (916) 264-7995 FAX (916) 448-8450 IN COMPLIANCE WITH YOUR REQUEST AND				COMPANY NAME: ND Montsom ERY CONTR					
SUBJECT TO A	ALL OF THE	TERMS, CO	NDITIONS		36 11		st AU-		
AND RESTRIC	TIONS WRI	TTEN BELOV	AND THE	CITY, STAT	E J	PCRAI	FAY (2.11)	000.26	-72
ATTACHMEN				PHONE (9)	16) 44.	8-8602	FAX (9/6).	393 · L3	
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AXLE NUMBER:	1	2	3	4	5_	6	7	8	9
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AXLE WIDTH:									
WEIGHT:									,
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4. City Design Review Section (1231 I Street, Room 200; Luis Sanchez, 264-5957 or Randy Lum 264-5896) Note: See conditions attached to plans.

Signature:

| Date: 2/5/0 / Comments: | PRODUME OF REJOCATION PURSUANT | TO PROPOSITIONS OF APPROVAL. |

AFTER THE ABOVE SIGNATURES ARE OBTAINED, TAKE THIS FORM TO TRANSPORTATION DIVISION:

5. City Transportation Division (264-5307; 1000 I Street, Suite 170).

Signature: Date: SFORCI