

CITY OF SACRAMENTO

Permit No: 0106746

1231 I Street, Sacramento, CA 95814

Insp Area: 2
Thos Bros: 336J3

Site Address: 7618 NORTHLAND DR SAC
Parcel No: 031-1440-006

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

CONTRACTOR

OWNER

ARCHITECT

MALDANADO
7704 WILLOW PT WY
SACRAMENTO CA 95822

**Nature of Work: NSFR: HOUSE=3412 SF; GARAGE= 964 SF; COVERED PORCH=57 SF;
PATIO= 120 SF.**

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);

SM 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: _____

SM Date 09-17-01 Owner Signature *Scott M...*

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.

SM Date 09-17-01 Applicant/Agent Signature *Scott M...*

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 _____

SM (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.

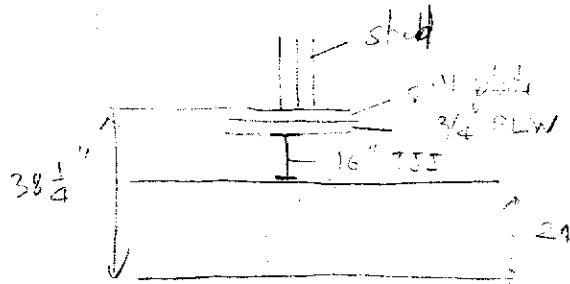
SM Date 09-17-01 Applicant Signature *Scott M...*

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.

Inspector Copy

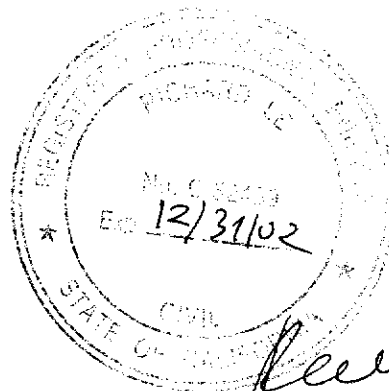
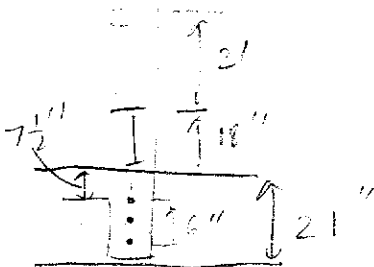
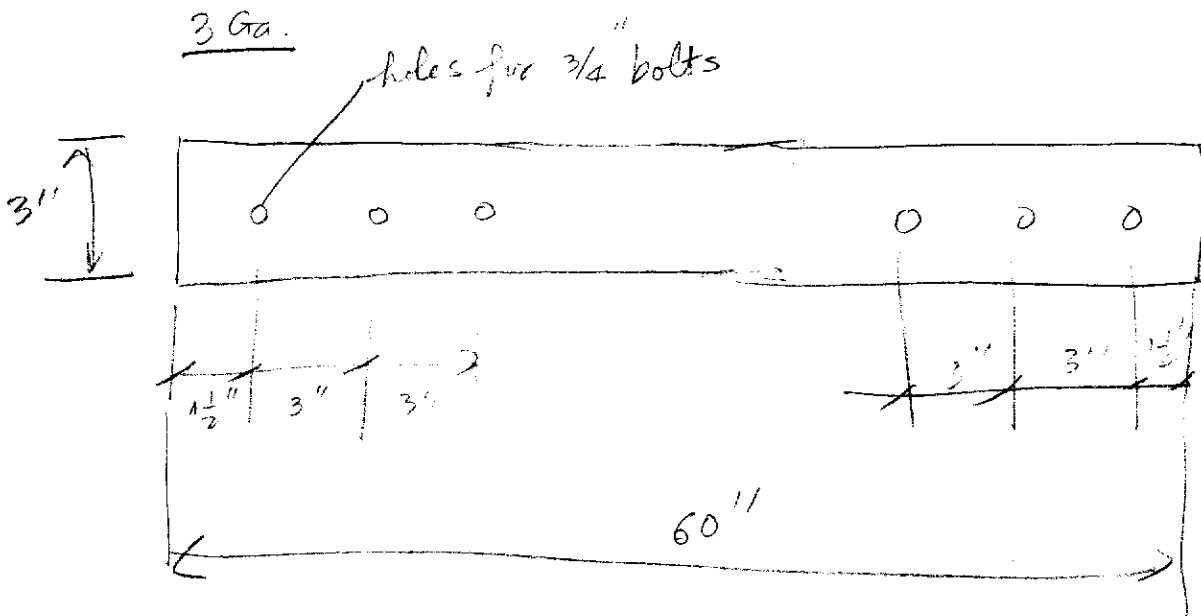
Glulam 24F - E12 6.75 x 21



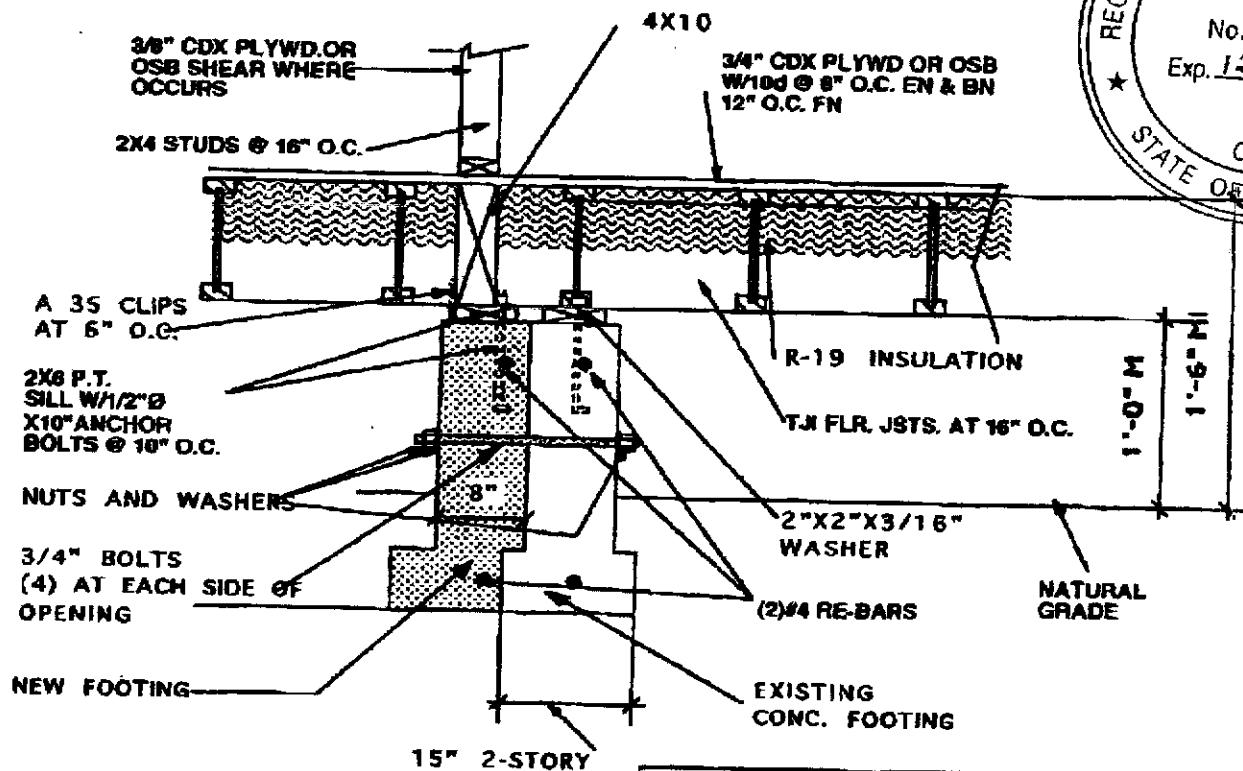
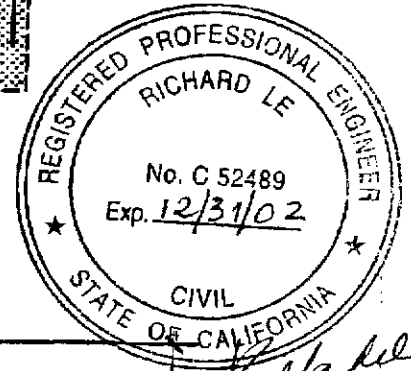
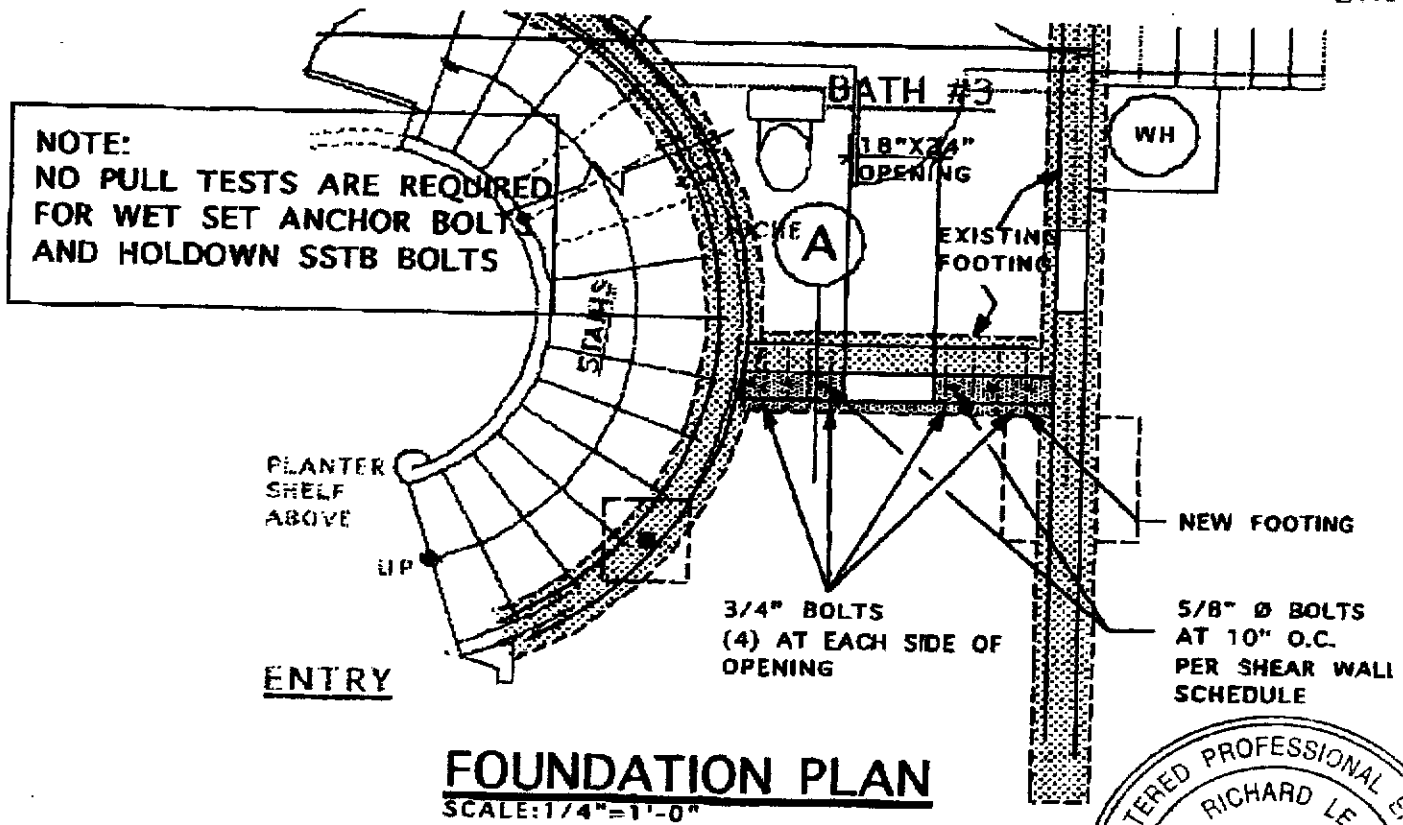
21
16
0.75
10.50
38.25

Uplift force = 5607 lbs

HST 3 w = 3" F = 6195 lbs
 L = 25 1/2"



Le



DETAIL -A
SCALE: 1/2" = 1'-0"

MR. AND MRS. SCOTT MALDONADO
7618 NORTHLAND COURT
CITY OF SACRAMENTO, CALIF. 95831

Certification of Compliance School District Enforcement Fees

(Print or Type) If Printing, press hard for four copies

PART I To be completed by the APPLICANT (MUST BE MAILED FOR COMPLIANCE)

OWNER'S NAME Scott and Toni Maldonado
 OWNER'S ADDRESS 5835 21st Avenue Sacto Ca 95820
 PROJECT ADDRESS 7618 Northland Dr. Sacto Ca 95831
 PARCEL NUMBER 0311440006 LOT NO. 6
 SUBDIVISION NAME Northland at Riverlake
 NUMBER OF UNITS 1

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE [Signature]
 TITLE OF APPLICANT Owner/Builder
 DATE Sept 17, 01 PHONE NUMBER 916 456-1093

PART II To be completed by BUILDING DEPARTMENT

→ PLAN IDENTIFICATION NUMBER 010646
 BUILDING TYPE
 RESIDENTIAL APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL ()
 → SQUARE FEET OF CHARGEABLE BUILDING AREA
 SIGNATURE [Signature]
 TITLE B Insp DATE 9/17/01

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT
 DISTRICT CERTIFICATION NO.
 EXEMPT COMMENTS -869.00
 RESIDENTIAL/APT/CONDO SQ FT X \$ = \$ 5,868.64
 COMMERCIAL/INDUSTRIAL SQ FT X \$ = \$
 OTHER FEE TYPE SQ FT X \$ = \$
 TOTAL FEES COLLECTED = \$ 4,999.64

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL

SIGNATURE [Signature]
 TITLE DATE 9/17/01

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Applicant

Date of Request: 5-28-01
By: Robert McDonald

(A 99)

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 7618 NORTHLAND DR

Assessor's Parcel Number: 031-1440-~~04~~ 006

Previous Use: VACANT

Description of Request/Proposed Use: build a new
if home w. attached garage.

Is This a Change of Use? yes, ^{from} vacant to developed.

Prior Applications for Project Site(P#, Z#, DRPB#): 0 Zoning Designation: R1-PUD
LPPT-PUD

Comments: The setbacks & lot coverage
are okay. Standard SF res.
development in this PUD does not
require special permit.

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * ~~Field Inspection Required? (Circle one)~~ YES ~~NO~~
- * Design Review/Preservation Required? (Circle one) YES NO

Planning Review by/Date: W May 29-29/01.

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

MICROFILM AFTER FINAL

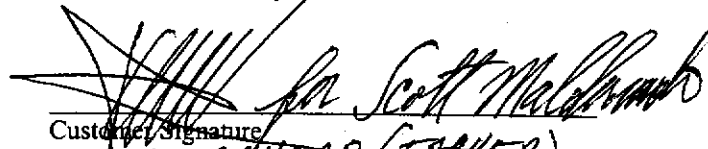
DEPARTMENT OF WATER QUALITY
EXTENSION FOR SEWER IMPACT FEE QUOTES

We have received adequate information from you to complete a sewer impact fee quote for your project. However, due to the high volume of requests received for pre-pay sewer impact fees, and our inability to process them all, we will allow your request for a sewer impact fee quote on your project to be extended for fourteen (14) working days. You will receive your sewer impact fee quote at the current rate of \$2,404 per ESD for Sacramento Regional Sanitation District and \$473 per ESD for County Sanitation District One.

Customer Name: SCOTT MALDONADO, Phone Number: 916-456-1093

Project: New Single Family Home, Type of Project: New Construction

APN: 031 1440 06 10 Address: North Land

 for Scott Maldonado 4-30-01
Customer Signature Date

ROBERT MALDONADO (FATHER)

 Lynn Wynn 4-27-01
Lynn Wynn, Manager Date
Customer Service

ROBERT MALDONADO
 MONICA MALDONADO
 LIC. F0523729 R0595749
 6641 9TH AVE. 916-456-0465
 SACRAMENTO, CA 95830

1210
 211087812
 DATE 4-30-01

PAY TO THE
 ORDER OF

County of Butte
~~Five thousand four hundred and four~~ \$2404.
 DOLLARS

UNION BANK OF CALIFORNIA
 SACRAMENTO-DOWNTOWN 9179
 700 N STREET, SACRAMENTO, CA 95814
 916 448 4486

FOR

⑆⑆⑆1000497⑆ 2⑆ 10878⑆⑆ 6⑆75
 031-1440-006

PRO BUSINESS FORMS (916) 791-3484 8307916

S R C S D Sacramento Regional County Sanitation District

10545 Armstrong Avenue
 Suite 101
 Mather, California
 95655

Office: (916) 876-6063
 Fax: (916) _____
 E-mail: rossd@saccounty.net

Dolores Ross
 Principal Engineer
 Technician
 Customer Service/
 Fees

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
 PERMIT AND CALCULATION SHEET

APPLICATION NO:	BLDG PERMIT NO:
GENERAL INFORMATION	THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER.
<u>PRE-PAY</u>	

PATD
 APR 30 2001
 BY: *[Signature]*

THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input checked="" type="checkbox"/> MF <input type="checkbox"/>	
CSD-1		COMMERCIAL USE	UNITS
SRCS D	2404		New SFD
CONSTRUCTION			
IN-LIEU			
TOTAL FEE	#2404 -		

APN: 031-1440-006

DESCRIPTION/
 SUBDIVISION Northland at Riverlake LOT: 6

PROPERTY ADDRESS 7610 Northland Dr

OWNER Scott Maldonado

MAILING ADDRESS

CITY-STATE-ZIP PHONE

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

OFFICE COPY

ROBERT MALDONADO
 MONICA MALDONADO
 LIC. F0523729 R0595749
 6641 9TH AVE. 916-456-0465
 SACRAMENTO, CA 95820

1210
 21108781a
 DATE 4-30-01

PAY TO THE ORDER OF

UNION BANK OF CALIFORNIA
 SACRAMENTO-DOWNTOWN
 700 N STREET, SACRAMENTO, CA 95814
 800 438 4482

FOR

⑆ 12000497⑆ 21 108781⑆ 6⑆ 75

031-1440-006

PRO BUSINESS FORMS (916) 781-3464

8307916



Sacramento Regional
 County Sanitation
 District

10545 Armstrong Avenue
 Suite 101
 Mather, California
 95655

Dolores Ross
 Principal Engineer
 Technician
 Customer Service/
 Fees

Office: (916) 876-6063
 Fax: (916) _____
 E-mail: rossd@saccounty.net

COUNTY SANITATION DISTRICT NO. 1
 SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
 PERMIT AND CALCULATION SHEET

APPLICATION NO: _____ BLDG PERMIT NO: _____

GENERAL INFORMATION

PRE-PAY

THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER

THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
INSPECTION		RESIDENTIAL SF <input checked="" type="checkbox"/> MF <input type="checkbox"/>	
CSD-1		COMMERCIAL USE	UNITS
SRCS D	2404	New SFD	
CONSTRUCTION			
IN-LIEU			
TOTAL FEE	#2404 -		

APN: 031-1440-006

DESCRIPTION/
 SUBDIVISION Northland at Riverlake LOT: 6

PROPERTY ADDRESS 7618 Northland Dr

OWNER Scott Maldonado

MAILING ADDRESS

CITY-STATE-ZIP PHONE

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE

CONSOLIDATED UTILITY BILLING USE ONLY

ACCT _____ INPUT _____ START _____

PATD
 APR 30 2001
 BY: [Signature]