

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 9910007**  
**Insp Area: 4**

**Site Address: 1036 SOUTH AV SAC**  
Parcel No: 251-0161-001

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

CONTRACTOR

OWNER

ARCHITECT

GARY WILLIAMS  
864 ESTEY WAY  
PLACERVILLE CA 95667

**Nature of Work: REPAIRS AS PER HSG/DB CHECKLIST**

**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);

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 *Gary Williams*

**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 \_\_\_\_\_ Applicant/Agent Signature *Gary Williams*

**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.

Date \_\_\_\_\_ Applicant Signature *Gary Williams*

**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.**

Housing & Dangerous Buildings  
Case Field Check List

99-10007H

Case #: 1036SOUT01, Address: 1036 SOUTH Av

<u>Room/Area</u>	<u>Insp Date</u>	<u>Description</u>
General	01/07/99	<p>(B-01)- Attractive nuisance. SCC Section 49.04.402(b)</p> <p>Memo: <b>1. Unoccupied units improperly maintained and being damaged. Owner shall maintain the securement of all units during their vacancy.</b>  <b>2. Provide access into all units for a complete list of required repairs.</b>  <b>3. Exterior of 1036 South Ave, 3540 May St. and the laundry room structure are to have the roofs, exterior stucco and trim, windows and vents repaired in an approved manner with inspections.</b>  <b>4. Paint exterior of all buildings</b>  <b>5. Stairs to meet the minimum UBC requirements, supports, hand rails, gaurd rails and uprights on both, stringers and decking.</b>  <b>6. Unit # 2</b>              repair plumbing leak in the bathroom ceiling              repair interior walls, ceilings and woodwork              replace all damaged cabinets and fixtures              repaint interior              replace all damaged/missing light, plumbing, and electrical fixtures and devices              heating appliance to be in good operating order and clean              replace all broken/missing windows and screens  <b>7. Provide a current dry rot report from a professional contractor for all three structures</b></p> <p><b>The stucco repairs shall be corrdinated with the inspector assigned to this case for inspections at all phases of repair.</b></p>
General	01/07/99	(B-19)- Broken, rotted, split or buckled exterior wall coverings or roof coverings. SCC Section 49.10.1008(4)
General	01/07/99	(B-33)- Details: <b>Additional inspection of units required for complete list</b>
Stairs	01/07/99	(B-21)- Faulty materials of construction. SCC Section 49.10.1010
Unit 2 & Yard Area	01/07/99	(B-02)- Dangerous to human life or detrimental to health. SCC Section 49.04.402(C)

Housing & Dangerous Buildings  
Case Field Check List

Case #: 1036SOUT01, Address: 1036 SOUTH Av

<u>Room/Area</u>	<u>Insp Date</u>	<u>Description</u>
# 2	01/07/99	(B-13)- Defective or deteriorated flooring or floor supports. SCC Section 49.10.1003(2)
# 2 And Exteriors	01/07/99	(B-11)- General dilapidation or improper maintenance of the building. SCC Section 49.10.1002(13) UBC Section 3402 <b>Details: all buildings</b>
All Buildings	01/07/99	(B-05)- Uncleanliness. SCC Section 49.04.402(G)
Exterior Repairs	01/07/99	(B-17)- Deteriorated or ineffective waterproofing of exterior walls, roof, foundation or floors including broken windows or doors. SCC Section 49.10.1008(2) <b>Details: Exterior walls of apts. improperly maintained</b>
Exterior Walls	01/07/99	(B-15)- Members of walls, partitions or other vertical supports that split, lean, list or buckle due to defective material or deterioration. SCC Section 49.10.1003(4) <b>Details: Walls and stucco of apartment structures failing</b>

RECORDING REQUESTED BY

**NORTH AMERICAN TITLE GUARANTY**

Escrow No. 158640 Order No.

AND WHEN RECORDED MAIL TO

Name Gary E. Williams  
Street 864 Estey Way  
Address Placerville, Ca 95667  
City &  
State

PREPARED A TRUE COPY OF THE ORIGINAL  
DOCUMENT RECORDED 09-31-99  
RECORDER'S BOOK 990831  
PAGE NUMBER 1898  
SACRAMENTO COUNTY RECORDER

**North American Title Company, Inc.**

By Miki Down

SPACE ABOVE THIS LINE FOR RECORDER'S USE

**INDIVIDUAL GRANT DEED**

A.P.N. 251-0161-001-0000

The undersigned grantor(s) declare(s):

Documentary transfer tax is \$ 74.80 City Transfer Tax is \$ 187.00

(  ) computed on full value of property conveyed, or

( ) computed on full value less value of liens and encumbrances remaining at time of sale.

( ) Unincorporated area: (  ) City of Sacramento, and

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, Washington Mutual Bank, FA, Successor By Merger To Great Western Bank, A Federal Savings Bank

hereby GRANT(S) to Gary E. Williams, A Married Man

the following described real property in the City of Sacramento  
County of Sacramento, State of California:

Lot 1 and 2 In Block 23 As Shown On The Plat Of "North Sacramento Heights",  
Recorded In The Office Of The County Recorder Of Sacramento County, On June 9, 1911  
In Book 12 Of Maps, Map No. 22

Dated: August 26, 1999

Ann C Greulich  
Washington Mutual Bank, F.A

STATE OF CALIFORNIA } SS.

COUNTY OF San Joaquin }

On August 27, 1999 before me,

C. Andrade, personally appeared

Mark St. Pierre, Vice President and

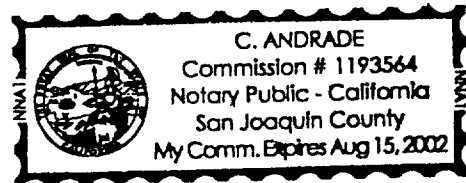
Ann C. Greulich, Asst. Vice President

Mark St Pierre

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Signature C. Andrade



(This area for official notarial seal)

MAIL TAX STATEMENTS TO: SAME AS ABOVE

NAME

ADDRESS

CITY/STATE/ZIP