

APPL. DATE <u>May 01, 2023</u> CITY LICENSE <u>OWNER</u> JOB ADDRESS <u>100 Lemon Pl</u>	<b>CITY OF PLACERVILLE</b>  <b>CONSTRUCTION PERMIT</b>	PERMIT NO. <u>22582</u> PLAN CHECK NO. <u>22582</u> P.C. RECEIPT NO. <u>18893</u> PERMIT RECEIPT NO. <u>3165</u>
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THIS PERMIT EXPIRES IF WORK IS NOT BEGUN WITHIN SIX MONTHS OR IS SUSPENDED FOR MORE THAN SIX MONTHS WITHOUT A CALLED FOR INSPECTION

<p><b>PARCEL OWNER</b> FIRST NAME <u>BH</u> LAST NAME <u>MALLARD APARTMENTS</u> M.I. _____</p> <p>ADDRESS <u>3105 HOPKINS PL</u></p> <p>CITY <u>EL DORADO HILLS</u> ST. <u>CA</u></p> <p>TELEPHONE <u>(916) 886-1474</u> ZIP <u>95762</u></p> <p><b>ARCHITECT, ENGINEER, DESIGNER</b></p> <p>NAME <u>WILLIAM HEDENKAMP</u></p> <p>ADDRESS <u>4455 MORENA BLVD S11</u></p> <p>CITY <u>SAN DIEGO</u> ST. <u>CA</u></p> <p>TELEPHONE <u>(858) 483-4483</u> ZIP <u>92117</u></p> <p><b>CONTRACTOR</b></p> <p>ADDRESS _____</p> <p>CITY _____ ST. _____</p> <p>TELEPHONE _____ ZIP _____</p> <p>CONTRACTOR'S LIC. NO. _____ CLASS _____</p> <p>WORKER'S COMP CARRIER _____</p> <p>WORKER'S COMP NO. _____</p> <p><b>ASSESSOR'S PARCEL NO.</b> <u>323-220-008-000</u></p> <p><b>SEWER WATER</b></p> <p><input type="checkbox"/> CITY <input type="checkbox"/> EID <input type="checkbox"/> PRIVATI <input type="checkbox"/> CITY <input checked="" type="checkbox"/> EID <input type="checkbox"/> PRIVATE</p> <p style="text-align: center;"><b>FOR OFFICE USE ONLY</b></p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO DEVELOPMENT FEES TO BE PAID PRIOR TO A FINAL INSPECTION AND/OR PRIOR TO OCCUPANCY.</p> <p>AMOUNT _____ RECEIPT NO: _____ DATE: _____</p> <p>SPECIAL CONDITIONS  <u>MALLARD APARTMENTS</u>  <u>72 UNITS, 12-1BED, 36-2BED, 24-3BED</u>  <u>COMMUNITY ROOM</u></p> <p><u>SCHOOL FEES: RESIDENTIAL \$219,666 CERT # 25914</u>  <u>COMMERCIAL \$14,618 CERT #25917</u>  <u>EDCOE Checks RECEIVED.</u></p> <p>FINAL_DATE _____ EXPIRED_DT _____</p>	<p>PERMIT FOR: <u>MALLARD MULTI FAMILY DWELLI</u></p> <p>I hereby agree that I have read this permit and that the above information is correct. I further agree to comply with all City ordinances, State laws and the above special permit conditions relating to construction.</p> <p>I also certify that in the performance of the work for which this permit is issued I shall not employ any person(s) in any manner so as to become subject to the Worker's Compensation laws of California or that I am a contractor licensed as provided in Chapter 9, Division 3, of the B&amp;P Code of the State of California, and that said license is in full force and effect.</p> <p>Section 4-3-5 (G) of the City Code allows a reinspection fee to be charged when work requires inspection.</p> <p><b>SIGNED:</b></p> <p><input type="checkbox"/> OWNER <input checked="" type="checkbox"/> CONTRACTOR <input type="checkbox"/> AUTHORIZED AGEN</p> <p style="text-align: center;"><b>FOR OFFICE USE ONLY</b></p> <p><input checked="" type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair</p> <p><input type="checkbox"/> Relocation <input type="checkbox"/> Sign <input type="checkbox"/> Other _____</p> <p>ZONING <u>R-2</u></p> <p><input type="checkbox"/> SFR <input checked="" type="checkbox"/> MFR <input type="checkbox"/> COMM</p> <table border="1" style="width:100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="5" style="text-align: center;">BUILDING</th> </tr> <tr> <th>GROUP</th> <th>TYPE</th> <th>SQ. FT.</th> <th>COST</th> <th>VALUATION</th> </tr> </thead> <tbody> <tr> <td>R2</td> <td>V-B</td> <td>60348</td> <td>149.80</td> <td>9,040,130.40</td> </tr> <tr> <td>A-3</td> <td>V-B</td> <td>1020</td> <td>189.68</td> <td>193,473.60</td> </tr> <tr> <td>B,F-1</td> <td>V-B</td> <td>966</td> <td></td> <td>140,488.66</td> </tr> <tr> <td>U</td> <td>V-B</td> <td>22789</td> <td>66.48</td> <td>1,515,012.72</td> </tr> </tbody> </table> <p style="text-align: right;">TOTAL VALUATION: <u>10,889,105.38</u></p> <p>DEF.</p> <table style="width:100%; font-size: x-small;"> <tr> <td>CONST. PERMIT <u>75,709.65</u></td> <td>SEWER CONN. _____</td> </tr> <tr> <td>PLAN CHECK <u>32,532.71</u></td> <td>CAP. IMPROV. _____</td> </tr> <tr> <td>SMIP <u>1,396.75</u></td> <td>EST. INST. 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ISSUED BY: _____	ISSUED DATE: <u>08/08/2024</u>	CLERK: <u>KG</u>
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ORIGINAL     
  APPLICANT     
  ASSESSOR     
  CDD REV.