

TRANSMISSION VERIFICATION REPORT

TIME : 06/29/2005 13:10
 NAME : CITY OF SACRAMENTO
 FAX : 9168085543
 TEL : 9168085656
 SER.# : BRDH4J832840

DATE, TIME	06/29 13:05
FAX NO./NAME	94553784
DURATION	00:04:23
PAGE(S)	09
RESULT	OK
MODE	STANDARD ECM

**CITY OF SACRAMENTO
 CASHIER'S WORKSHEET**

RECEIPT NUMBER: R0511635
 TRANSACTION DATE: 06/29/2005
 TRANSACTION AMOUNT: 194.56
 NOTATION:

APD #: **0509462**
 SITE ADDRESS: 722 CLIPPER WY SAC
 PARCEL: 030-0322-007
 TYPE: Bldg Minor Permit
 SUB-TYPE: RES
 HOUSING: N
 STATUS: ISSUED

Mixed Income Housing
 Fee Program
 ??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Cash		194.56

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	175.00	.00	175.00
206	City Business Oper Tax	1730	4.89	.00	4.89
213	General Plan Surcharge	1760	7.67	.00	7.67
259	Bldg-Technology Surcharq	1750	7.00	.00	7.00



Inspection Request # (916) 264-7622

***** Office Use Only *****

ISSUED

Permit No: 0509
Date Issued: 6/29/2005
Total Amount: 194,500
Insp Area #: 2

JUN 29 2005
Sacramento Building Division

***** Please fill in the following *****

Site Address: 722 Cypress Way
Nature of Work: To Shrink & Lock w 30 yr O.C. Comp 34%

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: License Class: C39 License Number: 7603169 Date: 6/29/05 Signature: Alma Gonzalez

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 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:

PAID CITY OF SACRAMENTO

Date: Owner Signature:

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 is subject to the City of Sacramento Neighborhoods Planning and Development Services.

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: 6/29/05 Applicant/Agent Signature: Alma Gonzalez

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: State Fund Policy Number: 713-04-2021 Expiration Date: 10/1/05

(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.

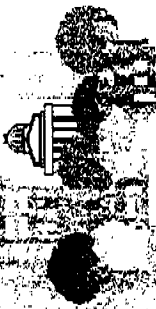
Date: 6/29/05 Applicant Signature: Alma Gonzalez

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.

PBF10004

City of Sacramento



PLANNING & BUILDING DEPARTMENT
BUILDING DIVISION

Fax # (916) 264-1901

Inspection Request # (916) 264-7522

Credit Card Info on File? Yes No

0509402
AREA 2

FAXBACK PERMIT APPLICATION

(certain restrictions apply)

Faxed request received in this office before 3:00 p.m. will be processed the following work day. Contractors must have a current certificate of Worker's Compensation Insurance. Work started before a Building Permit is issued will be subject to quad fees.

Permits requiring plan review are not eligible for FAXBACK

In order to process this request, ALL of the following information MUST be provided:

RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

Job Address: 122 Oliver Way	Unit #
Parcel Number: 030-0322-007	Contract Price \$ 12,225
CONTACT PERSON: Ann Gonzalez	CONTACT PHONE: 454-3467
Property Owner: Betty Jackson	Contractor: Jameson LeRoux License # 16169
Address: 122 Oliver Way	Address: 4675 E St
City/State/Zip: Sacramento CA 95831	City/State/Zip: See City 95816
Phone: 391-2502	Phone: 454-3467
	FAX: 455-3784

NATURE OF WORK: (Provide detailed description of work & indicate type of work in selections below)

Description of Work: Tile Shakes Re-Roof w/ 30 yr O.C. Comp **PAID**
Roof pitch 14:12 Single Tax Res **CITY OF SACRAMENTO**

<input checked="" type="checkbox"/> REROOF (excluding tile) <input checked="" type="checkbox"/> TEAR-OFF <input type="checkbox"/> RES-FEET <input checked="" type="checkbox"/> HOUSE # SQUARES 2 <input checked="" type="checkbox"/> GARAGE # SQUARES 3+ # Stories: 1 Material: 30 yr O.C. Comp		(Residential ONLY) <input type="checkbox"/> HVAC INSTALLATIONS <input type="checkbox"/> NEW <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describes below) Value of duct work: \$ Equipment: \$ Cut-in: \$ * Design Review approval may be required.		(Residential ONLY) <input type="checkbox"/> WATER HEATER <input type="checkbox"/> GAS <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITES DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Design Review approval may be required <input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMOUD <input type="checkbox"/> FG&E NOTE: Correction Notice items will require an additional building permit.		(Residential ONLY) <input type="checkbox"/> NEIGHBORHOODS PLANNING MINOR IMPROVEMENTS <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Replacement <input type="checkbox"/> Water Service <input type="checkbox"/> Sewer Service <input type="checkbox"/> Gas Line <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	
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JUN 29 2005