



### Building Permit

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

Permit No: 0612250  
 Date Issued: 8-8  
 Total Amount: 18,83  
 Insp Area #: 2

**ISSUED**  
**CITY OF SACRAMENTO**  
**AUG 8 2006**  
**DOWNTOWN PERMIT CENTER**

\*\*\*\*\* Please Fill in the Following \*\*\*\*\*

Site Address: 5792 Hollyhurst Wy, Ste 95823  
 Nature of Work: Water Heater Change Out

**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 536 License Number 928505 Date 8/10/06 Signature [Signature]

**OWNER-BUILDER DECLARATION:** I hereby affirm under penalty of perjury that I am exempt from the contractor's 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 Contractor's License Law (Chapter 9 (commencing with Section 7000) of Division 3 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 Professions Code: The Contractor's 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 or 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 Contractor's 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 Contractor's License Law).  
 I am exempt under Sec. \_\_\_\_\_ S & PC for this reason: \_\_\_\_\_  
 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 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 8/7/06 Applicant/Agent Signature [Signature]

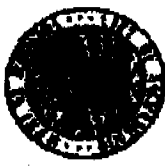
**WORKER'S COMPENSATION DECLARATION:** I hereby affirm under penalty of perjury one of the following declarations:  
 I have and will maintain a certificate of contract to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the 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 Wasecondon Mutual Ins  
 Policy Number 01 KR 0030-853 Expiration Date 9/1/08

(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 these provisions.  
 Date 8/7/06 Applicant Signature [Signature]

**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 FEES.**

**THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.**

001250



**CITY OF SACRAMENTO**  
**PLANNING & BUILDING DEPARTMENT**  
 BUILDING DIVISION  
 WWW.CITYOFSACRAMENTO.ORG  
 Help Line: 1-916-264-4866 OR 1-866-EZPERMIT  
 Inspection: 1-916-498-4877



Department Permit Center 1-516-264-6107 North Permit Center 1-916-463-2354  
 1231 L Street, Suite 200, Sacramento, CA 95814 2101 Arden Blvd, Suite 200, Sacramento, CA 95834 Fax # 916-264-1901

**FAXBACK PERMIT APPLICATION**

(certain restrictions apply)

Faxed request must be received in this office by 3:00 P.M. to 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 fee.

Permits requiring plan review are not eligible for FAXBACK

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

Credit Card Information on file?  Yes  No  
 Job Address: 5392 Hollister St Apt  Residential  Apartments (4+ units per building)  Commercial (limited)  
 Contact Person: Veronica Stanford Unit # \_\_\_\_\_ Contract Price \$ 610  
 Property Owner: Ed Robbin Contractor: Domco Plumbing  
 Address: 5392 Hollister St Apt Address: 1160 Box 1398  
 City/State/Zip: Sacramento CA 95823 City/State/Zip: Folsom CA 95743  
 Phone: (916) 395-9558 Phone: (916) 353-0883 FAX

Description of Work: Water Heater Upgrade  
 Nature of Work: (Provide detailed description of work & indicate type of work in selections below)

<input type="checkbox"/> Removal (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Rework <input type="checkbox"/> House <input type="checkbox"/> Garage <input type="checkbox"/> Shed <input type="checkbox"/> # Sqr/ft: _____ Material: <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Fiberglass <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco	<input type="checkbox"/> HVAC Installation (Residential Only) <input type="checkbox"/> New <input type="checkbox"/> Change-out <input type="checkbox"/> New <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 elec unit to gas <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: _____ Equipment \$: _____ Duct-in: \$: _____	<input checked="" type="checkbox"/> Water Heater (Residential Only) <input type="checkbox"/> Gas <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Change-out <input type="checkbox"/> New <input type="checkbox"/> Relocated <input type="checkbox"/> Dry Rot or Termites <input type="checkbox"/> Damage Repair (Specify location below)	<input type="checkbox"/> Minor Electric and/or Minor Plumbing (Residential Only) <input type="checkbox"/> Electric Service Charge # _____ <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Water Service Replacement <input type="checkbox"/> Sewer Service Replacement <input type="checkbox"/> Gas Line Replacement <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> Public Utilities Safety Inspection (Residential and single apartment units Only) <input type="checkbox"/> gas in <input type="checkbox"/> gas in <input type="checkbox"/> YOGES NOTE: Correction Notice items will require an additional building permit.
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PBF-10002

*[Handwritten signature]*