

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0416647

Insp Area: 3
Thos Bros: 317H2

Site Address: 3624 STOCKTON BL SAC
Parcel No: 014-0252-025

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

CONTRACTOR
BILL'S ROOFING
1624 N C ST
SACRAMENTO CA

OWNER
ST JAMES HOLY BAPTIST CHURCH
3624 STOCKTON BL
SACRAMENTO, CA 95820

ARCHITECT

Nature of Work: REROOF REMOVE EXST MATERIAL INSTALL 59 SQRS 4 PLY BUR

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 C 39 License Number 715400 Date 10/5/04 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 _____

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 10/5/04 Applicant/Agent 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 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 713-11472 Exp Date 06/17/2005

(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 10/5/04 Applicant 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 FEE.

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

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 0416647	Insp. Area 3
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 3624 Stockton Blvd Sacto 95820 Suite _____
 PARCEL # 014-0252-025

CONTACT

Name Don Bonachi
 Street Address 3624 Stockton Blvd
 City/State/Zip Sacto Ca 95820
 Phone 997 1210 FAX _____
 E-mail: _____

LICENSED CONTRACTOR Lic No. # 715400

Name Bills Reptine
 Address 1624 North C St
 City/State/Zip Sacto Ca 95814
 Phone 444 1066 FAX _____
 E-mail: _____

ARCHITECT/ENGINEER

Name _____
 Address _____
 City/State/Zip _____
 Phone _____ FAX _____
 E-mail: _____

OWNER

Name St James Holy Baptist Church
 Address 3624 Stockton Blvd
 City/State/Zip Sacto Ca 95820
 Phone 997 1210 FAX _____
 E-mail: _____

Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: State fund
 WORKER'S COMPENSATION POLICY # 11472-2003 EXPIRATION DATE: 6/17/05

NATURE OF WORK IN DETAIL: Remove old roofing, install a 4 ply built up roof system 59 sqrs

OCCUPANT/TENANT: St James Holy Baptist Church VALUATION: \$ 19,500⁰⁰

FLOOD STATUS:		S.C.A.T.																	
		BLDG		SHELL		APT		TI()		REM()		SW		FIRE		ADD		OTH	
JOB DESCRIPTION		BLDG		MECH		PLUMB		ELEC		SITE		FIRE							
INSPECTION DISCIPLINES		BLDG		MECH		PLUMB		ELEC		SITE		FIRE							
# Stories	1st flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code		Vio. File									
						SPR	ALARM			[H]	[Quad]								
B	L	P	M	E	F	S		D		PW		UTIL							

COMMENTS: _____

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

ROOFING QUESTIONNAIRE

Applicant's name: BILLS ROOFING Phone: 444-1066

Project Address: 3624 STOCKTON BLVD

Please check the appropriate boxes. Only check a box if it accurately and completely describes your proposed work, otherwise leave boxes blank.

1. **ROOFING TYPE**
- a. The existing roofing material is composition shingle, wood shake or shingle, tile or metal. The new roofing material shall be:
- | Existing | Proposed | |
|--------------------------|--------------------------|--------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | 25 year laminated dimensional composition |
| <input type="checkbox"/> | <input type="checkbox"/> | wood shake or shingle |
| <input type="checkbox"/> | <input type="checkbox"/> | tile |
| <input type="checkbox"/> | <input type="checkbox"/> | metal that simulates one of the above listed materials |
- b. The existing roofing material is built up, foam or membrane with a roof pitch of 2:12 or less. The new roofing material shall be:
- | Existing | Proposed | |
|-------------------------------------|-------------------------------------|----------|
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | Built up |
| <input type="checkbox"/> | <input type="checkbox"/> | Foam |
| <input type="checkbox"/> | <input type="checkbox"/> | Membrane |

2. **GUTTERS**
- a. The existing gutters are fascia gutters.
- There is no change proposed to existing gutters.
 - New fascia gutters shall be provided.
 - Gutters shall be repaired and/or replaced to match existing.
- b. The existing gutters are Ogee gutters.
- There is no change proposed to existing gutters.
 - New Ogee gutters shall be provided.
 - Gutters shall be repaired and/or replaced to match existing.
- c. There are no existing gutters.
- No new gutters are proposed.
 - New Ogee gutters shall be provided.

3. **RAFTER TAILS**
- a. There are no exposed rafter tails.
- b. There are exposed rafter tails.
- There is no change or cutting proposed to existing rafter tails.
 - Rafter tails shall be repaired and replaced to match existing.

By signing below, the applicant certifies that this form accurately describes the proposed work.

Applicant's signature: [Signature] Date: 10/5/04

For City Staff use only Counter Staff M HARPER

- In a DR District Meets DR criteria? Yes No (route to DR staff)
- In a P area or listed (route to P staff)
- Not in DR/P area

BROADWAY STOCKTON