

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0014473
Insp Area: 2

Site Address: 7286 AMHERST ST SAC
Parcel No: 047-0091-011

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

CONTRACTOR
BEUTLER HEATING AND AIR
9608 OATES DR
SAC CA

OWNER
JACKSON GARVELL E
7286
SACRAMENTO CA 95822

ARCHITECT

Nature of Work: RPLC ROOFTOP HVAC

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 License Number 162634 Date 12-8-00 Contractor Signature [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 12-8-00 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 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.

[Signature] 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 A. I. G. Policy Number WC7083790 Exp Date 04/01/2001

____ (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 12-8-00 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 FEE.

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



CUSTOMER: Garvel Jackson
 ADDRESS: 7286 Amherst Street
 CITY: Sacramento, Ca 95822
 HM PHONE: 1-391-6870 WK PHONE: ()

Beutler Contractor's License #: 162834
 I/We the owners (BUYER) of the premises described below, authorize Beutler (Beutler) to furnish and install all materials and labor necessary to improve the premises located at:
7286 Amherst Street Sacramento 95822 (Street) (City) (Zip) (Permit) (Phone) 916-391-6870
 according to the following specifications which are subject to the conditions of the premises and providing said installations and improvements are able to be provided according to, and within, State, County and City Laws, Codes and Ordinances having jurisdiction.

QTY	MANUFACTURER	MODEL NUMBER	PRODUCT DESCRIPTION
<u>1</u>	<u>Carrier</u>	<u>436X036060-3</u>	<u>3 ton package</u>

Proposed System Efficiency: SEER _____ HSPF _____ AFUE _____
 24 hours a day, 7 days a week emergency service including parts and labor as stated below.
 Proposed System Warranty (Years): Compressor: _____ Heat Exchanger: _____ Parts: _____ Labor: _____
 Special Concerns: Remove existing unit. Install new package unit. Connect to existing ductwork. Install new disconnect / A condensate line. Install new angle iron stand. Inspect duct system and repair as needed. Includes permit.

OUR PROPOSAL ALSO INCLUDES THE FOLLOWING AND IS SUBJECT TO PRESITE INSPECTION:

	Yes	No	n/a	Existing		Yes	No	n/a	Existing
New Flue pipe system	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Attic/Foundation access	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Freon Recovery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Electrical disconnect with fuse	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dispose of Existing Equipment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Attic light with switch	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Crane	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Copper refrigerant lines	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Connect to existing duct system	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Gas piping to equipment as required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Patch holes with sheet rock	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Primary condensate drain	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Paint and Texture	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Secondary condensate drain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Low voltage wiring as required	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Condensate drain pump	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
110 volt circuit as required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Indoor equipment platform	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
220 volt circuit as required	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Outdoor equipment curb	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Install Standard supply register(s) with flex duct to the following room(s):

Install Standard return grill(s) with flex duct to the following area(s):

The proposed system is eligible for a \$1092⁰⁰ rebate from Beutler. The amount will not be applied towards the balance due. Rebate programs are subject to change without notice. The balance due is eligible to be financed by SMUD.
 Est. First Month Payment 1-10-2001 Financing subject to approvals.

ABOVE PROPOSED SYSTEM	OPTION(S) (Below)
<u>5460.00</u>	
TOTAL INVESTMENT	<u>1,092</u>
DOWN PAYMENT	<u>1,092</u>
REBATES	
BALANCE ON COMPLETION	<u>3,276.00</u>
AMOUNT FINANCED	

Payment Terms:

- Accept Decline Option 1 _____
- Accept Decline Option 2 _____
- Accept Decline Option 3 _____
- Accept Decline Option 4 _____

Notice to buyer: Do not sign this agreement before you have read the front side of this agreement. This is the entire contract. Oral understandings or agreements with representatives shall not be binding. All understandings must be set forth in writing in this contract. The prices, conditions, terms and specifications are satisfactory and hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Buyer's Signature: Garvel Jackson
 Buyer's Signature: _____
 Date: 11/30/00

Estimator's Signature: Peter Bartholde
 Date: 11/30/00 Registration# _____
 The proposal may be withdrawn if not accepted by _____

Beutler, 9608 Datas Drive, Sacramento, CA 95827, Phone - (916) 369-2673, Fax - (916) 856-6005
 You, the buyer hereby may cancel this transaction any time prior to midnight of the third business day after the date of this transaction. See the notice of cancellation form on the back side of this proposal for further information.

Distribution: WHITE - Office Copy YELLOW - Customer Copy

DATE: 12-6-00



CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION

FAXED PERMIT APPLICATION (certain restrictions apply)

Fax # 916-264-1901

Faxed request must be received in this office by 3:00 p.m. to be processed the following work day.

Note: Contractors must have a current certificate of Worker's Compensation Insurance.

Note: Work started before a Building Permit is issued will be subject to audit fee.

NO. 108 P002/002 02

01/08/00 08:54 FAX
03/09/00 15:28
DEVELOPMENT SERVICES + 9168566005

IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDED:

\$5460
4368

COMMERCIAL (multi-unit)

RESIDENTIAL APARTMENTS (4+ units per building)

⇒ CONTRACT PRICE \$

7286 AMHERST ST UNIT #

⇒ CONTACT PHONE: 369-2673

JOB ADDRESS: 7286 AMHERST ST UNIT #

⇒ CONTACT PERSON: Danny Vickars

⇒ CONTACT PHONE: 369-2673

Property Owner: GABRIEL JACKSON
Address: 7286 AMHERST ST.
City/State/Zip: Sacramento, Ca. 95822
Phone: (916) 391-6870

Contractor: Bentler Heating & Air License # 16227
Address: 9608 Dotso Dr.
City/State/Zip: Vac. Ca. 95627
Phone: 369-2673 FAX: 856-6005

NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.

REROOF (excluding tile)

TEAK-OFF

RESHEET

HOUSE

GARAGE

#SQUARES _____

Material: _____

SIDING

wood

T-111

Horiz.

vinyl

other _____

Note: Design Review approval may be required to certain areas.

HVAC INSTALLATIONS (residential ONLY)

CHANGE-OUT

NEW

High Pump Package

Split system

Break room

Call-in

Heat pump or duct unit to gas.

Wall furnace

Other (describe below)

Value of duct work: _____

Equipment \$: _____

Outlet \$: _____

Note: Design Review approval may be required for rooftop units.

WATER HEATER (residential ONLY)

GAS

ELECTRIC

Change-out

Electric to Gas

Relocated

New

DRY ROT OR TERMITE DAMAGE REPAIR (Describe locations below)

Note: Design Review approval may be required for rooftop units.

MINOR ELECTRIC and/or MINOR PLUMBING (residential ONLY)

Electric Service Change # amp _____

New electric circuits

Re-wire

Water Service Replacement

Sewer Service Replacement

Gas Line Replacement

Re-plumb

Water

Waste

PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single present units ONLY)

SMUD

PRGE

*NOTE: Corrective Notice items will require an additional building permit

DESCRIPTION OF WORK: *Post mounted package unit change out - contact # 0117106 duct work to R.O.D. line. "1.00 D.O. 1.00 - Abaco in 1"*