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CITY OF SACRAMENTO

Downtown Permit Center
1231 I Street, Suite 200
Sacramento, CA 95814

www.cityofsacramento.org

Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT
Inspection Request: 1-916-808-7622

North Permit Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834

Fax # 916-264-1901

MINOR PERMIT APPLICATION

Date: _____

INSPECTION REC
IN PROGRESS
Permit request must be received in this office by 3:00 P.M. to be processed the following workday. Contractors must have a current certificate of Worker's Compensation Insurance. Note: Work started before a Building Permit is issued will be subject to quad fee.

Design Review and Historic Preservation approval may be required if job address is located in those areas (additional forms may be required)

Permits requiring Plan Review are not eligible for the MINOR PERMIT PROGRAM

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

Job Address: ~~5717~~ 5717 Seyferth Way Bldg Type: RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)
Unit # _____ Contract Price 4,000

CONTACT INFO Name: _____ Phone #: _____ Email: _____

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|--|--|----------------------|
| Property Owner: Malaguer Celvany | Contractor: _____ | License #: _____ |
| Address: 5717 Seyferth Way | Address: _____ | |
| City/State/Zip: Sacramento Ca. 95823 | City/State/Zip: _____ | |
| Phone: 3952434 | Phone: _____ | Fax: _____ |
| Nature of Work: Provide description of work & indicate type of work in selections below. | Pre-Registered? YES <input type="checkbox"/> NO <input type="checkbox"/> | Registration # _____ |

Description of Work: Roof

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|--|--|---|--|--|
| <input checked="" type="checkbox"/> Reroof (excluding tile) <input checked="" type="checkbox"/> Tear-Off <input checked="" type="checkbox"/> Resheet <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Garage # Stories: 1 # Squares: 3000 22 Material: 30 YL <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco | <input type="checkbox"/> HVAC Installations (Residential Only) <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 elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: _____ Equipment: \$ _____ Cut-in: \$ _____ | <input type="checkbox"/> Water Heater (Residential Only) <input type="checkbox"/> Electric <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 Termit <input type="checkbox"/> Damage Repair <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Mud/sill/Studs <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior | <input type="checkbox"/> Minor Electric and/or Minor Plumbing (Residential Only) <input type="checkbox"/> Electric Service Change # amps _____ <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"/> SMUD <input type="checkbox"/> PG&E * NOTE * Correction Notice items will require an additional building permit. |
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|------------------|-----------------|----------------------|--------------------|-----------------------------|-----------------|
| Office Use Only: | Parcel #: _____ | Date Received: _____ | Date Issued: _____ | Processor's Initials: _____ | Permit #: _____ |
|------------------|-----------------|----------------------|--------------------|-----------------------------|-----------------|