

TRANSMISSION VERIFICATION REPORT

TIME : 09/07/2005 08:29
NAME : CITY OF SACRAMENTO
FAX : 9168085543
TEL : 9168085656
SER.# : BROH4J832840

DATE, TIME 09/07 08:28
FAX NO./NAME 93491414
DURATION 00:00:43
PAGE(S) 03
RESULT OK
MODE STANDARD
ECM

**CITY OF SACRAMENTO
CASHIER'S WORKSHEET**

RECEIPT NUMBER: R0516596
TRANSACTION DATE: 09/07/2005
TRANSACTION AMOUNT: 196.12
NOTATION:

ISSUED *[Signature]*
SEP 07 2005

Sacramento Building Division

APD #: **0513601**
SITE ADDRESS: 6160 SOUTH LAND PARK DR SAC
PARCEL: 024-0271-004

TYPE: Bldg Minor Permit
SUB-TYPE: RES
HOUSING: N
STATUS: **ISSUED**
Mixed Income Housing
Fee Program
??

TRANSACTION LIST

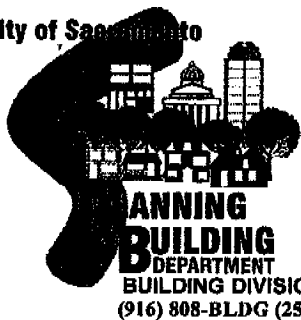
Type	Method	Description	Pymt Amount
Payment	Credit	C TEETER	196.12

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Total Fee	Prev Pymt
Item #			
Current Pymt			

PAID
CITY OF SACRAMENTO

City of Sacramento



Building Permit

Seaf

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

ISSUED

Permit No: 0513601
Date Issued: 09/07/05
Total Amount: 196.12
Insp Area #: 2

SEP 07 2005
Sacramento Building Division

Inspection Request # (916) 264-7622

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

Site Address: 6160 SOUTH LAND PARK DRIVE, SACRAMENTO CA 95831

Nature of Work: REM EXISTING GRAVEL ROOF / INSTALL 3" POLYISO INSULATION / INSTALL 60mil PVC SINGLE-PLY MEMBRANE ROOFING SYSTEM PER MFG SPECS / NEW METAL / CLEANUP

~~*****
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 B / c39 License Number 833393 Date 09/07/05 Signature *Edm O'Leary*~~

~~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 09/07/05 Applicant/Agent Signature *Edm O'Leary*

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:

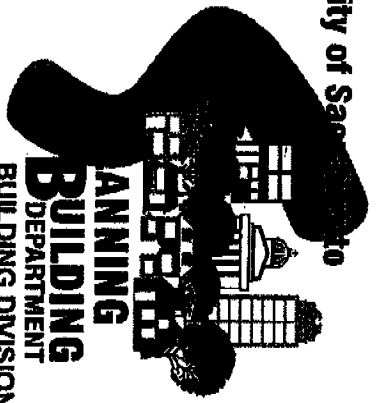
Carrier _____
Policy Number _____ Expiration Date _____

(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 09/07/05 Applicant Signature *Edm O'Leary*

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.



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 **0513601**

In order to process this request, ALL of the following information **196.2**
MUST be provided:

Credit Card Info on File? Yes No RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

Job Address: 6160 SOUTH LAND PARK DRIVE, SACRAMENTO CA 95831 Unit # _____

Parcel Number: _____ Contract Price \$ **12900.00**

CONTACT PERSON: Ethan O'Hagan, Cal State Roofing CONTACT PHONE: (916) 349-7541

Property Owner: **BOB WILSON** Contractor: Cal State Roofing ** License # 833393

Address: **6160 S LAND PARK DRIVE** Address: 5997 Devocchi Avenue

City/State/Zip: **SACRAMENTO 95831** City/State/Zip: Citrus Heights, CA 95621

Phone: **(916) 424-1285** Phone: (916) 349-7541 FAX: (916) 349-1414

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

Description of Work: **REM EXISTING GRAVEL ROOF / INSTALL 3" POLYISO INSULATION / INSTALL 60mil PVC SINGLE-PLY MEMBRANE ROOFING SYSTEM PER MFG SPECS / NEW METAL / CLEANUP**

REROOF (excluding tile) HVAC INSTALLATIONS (Residential ONLY)

TEAR-OFF RESHEET NEW CHANGE-OUT

HOUSE # SQUARES GARAGE

Stories: **30** 1 2 3+

BUILT-UP w/ GRAVEL

SIDING

Wood T-111 HOHZ Vinyl Stucco

Value of duct work: \$ _____ Equipment: \$ _____ Cut-in: \$ _____

* Design Review approval may be required.

WATER HEATER ELECTRIC (Residential ONLY)

GAS Change-out Electric to Gas Relocate New

DRY ROT OR TERMITTE DAMAGE REPAIR

Mudsill/Studs Exterior

* Design Review approval may be required.

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

SMUD PG&E

*NOTE: Correction Notice items will require an additional building permit.

MINOR ELECTRIC and/or MINOR PLUMBING (Residential ONLY)

Electric Service Change # amps

New electric circuits Re-wire Replacement

Water Service Sewer Service Gas Line Re-plumb Water Waste

IVR Faxback Permit updated 1/20/901

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0513605

Insp Area: 1

Thos Bros: 297D6

Site Address: 1801 W ST SAC

Parcel No: 010-0151-022

1801 & 1803 W ST DUPLEX

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR

FOUR SEASONS ROOFING CO
2167 BERNARD WAY
SACRAMENTO CA 95822

OWNER

LEE BENDON D/ALLAN D
2116 27TH ST
SACRAMENTO, CA 95818

ARCHITECT

Nature of Work: PAPERLESS PERMIT- T/O, resheet & apply comp on 1 story duplex 26 sqs. In progress inspection is required.

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-25 License Number 851209 Date 9/7/05 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 _____

PAID
CITY OF SACRAMENTO

SEP 07 2005

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 improvements do not violate any law or private agreement relating to permissible or prohibited locations for such improvements. The applicant certifies that the location of any improvement or the violation of any private agreement relating to location of improvements.

NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICE

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 9/7/05 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.

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 NO EMPLOYEES Policy Number _____ Exp Date _____

(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 9/7/05 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.



CITY OF SACRAMENTO

www.cityofsacramento.org

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

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

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

ROOFING QUESTIONNAIRE

Applicant's Name: Gustavo Rodriguez Phone: 428-3696

Project Address: 1801 & 1803 West Cooper Phone: 803-6788

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 will be:

Existing	Proposed	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	30 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 new roofing material will be:

Existing	Proposed	
<input type="checkbox"/>	<input 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 no existing gutters.

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

Applicant's signature: [Signature] Date: 9/21/05

FOR CITY STAFF USE ONLY Counter Staff: [Signature]

- 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 a DR or P area



CITY OF SACRAMENTO

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Downtown Permit Center
 1231 I Street, Suite 200
 Sacramento, CA 95814
 North Permit Center
 2101 Arena Blvd., Suite 200
 Sacramento, CA 95834

Fax # 916-264-1901

MINOR PERMIT APPLICATION

Date: 9/7/05

Faxed/web 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 grand fee.

Permits requiring Plan Review are not eligible for the MINOR PERMIT PROGRAM
 Design Review and Historic Preservation approval may be required if job address is located in those areas (additional forms may be required)

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

Job Address: 1801 & 1803 W St Sacramento Bid Type: RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

CONTACT INFO Name: Ben J et al Phone #: Unit # Contract Price 157600

Property Owner: Same Address: Contractor: TOU JENAVAS ROSEN & CL License #: 851205

City/State/Zip: City/State/Zip: Sacramento CA 95822

Phone: (916) 801-4840 & 807-6788 Phone: (916) 993-7778 Fax:

Nature of Work: Provide description of work & indicate type of work in selections below. Pre-Registered? YES NO Registration #

Description of Work: re-roof

<input checked="" type="checkbox"/> Reroof (excluding tile) <input checked="" type="checkbox"/> Tear-Off <input checked="" type="checkbox"/> Resheet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: <u>1</u> # Squares: <u>2674</u> Material: <u>Asph</u> <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Shuoco	<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: \$ <u> </u> Equipment: \$ <u> </u> Cut-in: \$ <u> </u>	<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"/> Minor Electric and/or Minor Plumbing (Residential Only) <input type="checkbox"/> Electric Service Change # amps <u> </u> <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.	Office Use Only: Parcel #: <u> </u> Date Received: <u>9/7/05</u> Date Issued: <u>9/7/05</u> Processor's Initials: <u>OTC</u> Permit #: <u>0513605</u>
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