

MODE = MEMORY TRANSMISSION

START=AUG-18 08:11

END=AUG-18 08:16

FILE NO.=053

| STN NO. | COMM. | ONE-TOUCH/ ABBR NO. | STATION NAME/EMAIL ADDRESS/TELEPHONE NO. | PAGES | DURATION |
|---------|-------|---------------------|--|---------|----------|
| 001 | OK | * | 96820867 | 003/003 | 00:02:56 |

-CITY OF SACRAMENTO -

***** -PLAN CHECK - ***** 916 264 5987- *****

CITY OF SACRAMENTO CASHIER'S WORKSHEET

ISSUED

AUG 18 2005

Sacramento Building Division

RECEIPT NUMBER: R0515334

TRANSACTION DATE: 08/18/2005
TRANSACTION AMOUNT: 188.15
NOTATION:

APD #: 0512563
SITE ADDRESS: 1307 BERGGREN WY SAC
PARCEL: 265-0420-047

Mixed Income Housing
Fee Program
??

TYPE: Bldg Minor Permit
SUB-TYPE: RES
HOUSING: N
STATUS: ISSUED

TRANSACTION LIST

| Type | Method | Description | Pymt Amount |
|---------|----------|-------------|-------------|
| Payment | Credit C | TEETER | 188.15 |

RECEIPT ACCOUNT ITEM LIST

| Class # | Description | Item # | Total Fee | Prev Pymt | Current Pymt |
|---------|---------------------------|--------|-----------|-----------|--------------|
| 200 | Permit--Building-Res | 1100 | 175.00 | .00 | 175.00 |
| 206 | City Business Oper Tax | 1730 | 2.09 | .00 | 2.09 |
| 207 | Strong Motion (SMI) | 1600 | .52 | .00 | .52 |
| 213 | General Plan Surcharge | 1760 | 3.54 | .00 | 3.54 |
| 259 | Bldg-Technology Surcharge | 1750 | 7.00 | .00 | 7.00 |

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PAID
CITY OF SACRAMENTO

AUG 18 2005

NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES

Building Permit

City of Sacramento



PLANNING BUILDING DEPARTMENT BUILDING DIVISION (916) 808-BLDG (2534)

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

ISSUED AUG 18 2005

Permit No: 0512563 Date Issued: Total Amount: \$188.15

***** Please Fill in the Following Building Division *****

Site Address: 1307 Berggren Way Nature of Work: R.C. R.C. with 30 yr Comp.

CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of

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.

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reasons (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, 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 owner-builder will have the burden of proving 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 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) 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. R & 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 8/16/05 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 Estate Fund Workers Comp Policy Number 1820120205 Expiration Date 2-1-06

(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 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.

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.



Fax # (916) 264-1901

Permits requiring plan review are not eligible for FAXBACK

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

RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

Job Address: 1307 Berggren Way SAC CA 95815 Unit # _____
 Parcel Number: 265-0410-047 Contract Price \$ 5227.00
 CONTACT PERSON: Jesus CONTACT PHONE: 719-6944 License # 793931
 Property Owner: Vol Rodriguez Address: 1307 Berggren Way
 City/State/Zip: SAC CA 95815 City/State/Zip: 700 2nd Street Sacramento, CA 95833
 Phone: 927-4736 Phone: 682-0867 FAX: 682-0867

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

Description of Work: 710 Install 30 yr Comp

| | | | |
|---|---|--|--|
| <p><input checked="" type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input checked="" type="checkbox"/> HOUSE # SQUARES <u>24</u> <input checked="" type="checkbox"/> GARAGE # SQUARES <u>3+</u> Stories <u>30 yr Comp</u> Material: _____</p> <p><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</p> | <p>(Residential ONLY) <input type="checkbox"/> HVAC INSTALLATIONS <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"/> Fire Place insert <input type="checkbox"/> Other (describe below)</p> <p>Value of duct work: \$ _____ Equipment: \$ _____ Cut-in: \$ _____</p> <p>* Design Review approval may be required.</p> | <p>(Residential ONLY) <input type="checkbox"/> WATER HEATER <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New</p> <p><input type="checkbox"/> DRY ROT OR TERMITES DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Mud/sill/Studs <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior * Design Review approval may be required.</p> <p><input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMLJD <input type="checkbox"/> PG&E</p> <p>*NOTE: Correction Notice items will require an additional building permit.</p> | <p>(Residential ONLY) MINOR ELECTRIC and/or MINOR PLUMBING <input type="checkbox"/> Electric Service Change # amps _____ <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire Replacement <input type="checkbox"/> Water Service <input type="checkbox"/> Sewer Service <input type="checkbox"/> Gas Line <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste</p> |
|---|---|--|--|