

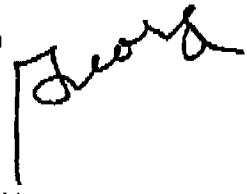
TRANSMISSION VERIFICATION REPORT

TIME : 09/14/2005 12:07
NAME : CITY OF SACRAMENTO
FAX : 9168085543
TEL : 9168085656
SER.# : BROH4J832840

DATE, TIME 09/14 12:04
FAX NO./NAME 94568257
DURATION 00:02:24
PAGE(S) 03
RESULT OK
MODE STANDARD
ECM

CITY OF SACRAMENTO
CASHIER'S WORKSHEET

ISSUED



SEP 14 2005

Sacramento Building Division

RECEIPT NUMBER: R0517053
TRANSACTION DATE: 09/13/2005
TRANSACTION AMOUNT: 78.95
NOTATION:

APD #: 0513988
SITE ADDRESS: 415 BUNKHOUSE WY SAC
PARCEL: 030-0780-045

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

Mixed Income Housing
Fee Program
??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Cash		78.95

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	75.00	.00	75.00
206	City Business Oper Tax	1730	.36	.00	.36
213	General Plan Surcharge	1760	.59	.00	.59
259	Bldg-Technology Surcharg	1750	3.00	.00	3.00

Building Permit



BUILDING DIVISION (916) 808-BLDG (2534)

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

SEP 14 2005 Sacramento Building Division

Permit No: 0513988 Date Issued: Total Amount: \$ 7835

***** Please Fill in the Following ***** Site Address: 415 Dunbar Way Nature of Work: Work Done C/O

CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury that this 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-20 License Number: 387143 Date: 9/12/05 Signature: Leo Porello

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 3 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 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 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 project with a contractor(s) licensed pursuant to the Contractors License Law.

I am exempt under Sec. D & 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 above mentioned property for inspection purposes.

Date: 9/12/05 Applicant/Agent Signature: Leo Porello

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

- I have and will maintain a permissive 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.
X 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: REDWOOD FIRE & CASUALTY Policy Number: W573-4036 Expiration Date: 7-1-2006

(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.

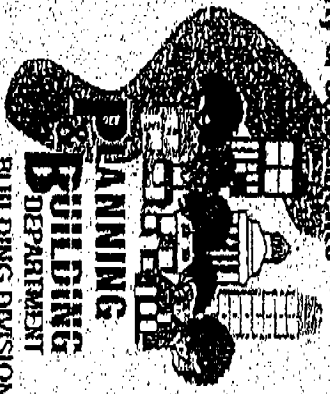
Date: 9/12/05 Applicant Signature: Leo Porello

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 FEES.

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

FAXBACK PERMIT APPLICATION

(certain restrictions apply)



Fax # (916) 264-1901

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

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

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

Job Address: 415 Bunkhouse Way Unit # _____

Parcel Number: 050-0780-045

CONTACT PERSON: Diane

Property Owner: Melody Anderson

Address: 415 Bunkhouse Way

City/State/Zip: Sacramento, CA 95834

Phone: _____ FAX: 916-456-8257

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

Description of Work: Water heater etc

9825

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OUT <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES 1 2 3+ ories ertal	<input type="checkbox"/> HVAC INSTALLATIONS <input type="checkbox"/> NEW <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Out-in <input type="checkbox"/> Heat pump or eed unit in gas	<input checked="" type="checkbox"/> WATER HEATER <input type="checkbox"/> GAS <input checked="" type="checkbox"/> ELECTRIC <input type="checkbox"/> Change-out <input type="checkbox"/> Relocate to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior * Design Review approval may be required.	<input type="checkbox"/> MINOR ELECTRICAL and/or MINOR PLUMBING <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> 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
<input type="checkbox"/> SIDING <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Shlucok	<input type="checkbox"/> Value of duct work: Equipment: \$ _____ Cut-in: \$ _____ * Design Review approval may be required.	<input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION * Residential and single apartment units (ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E	NOTE: Connection Notice items will require an additional building permit. IWR Faxback Form updated 12/29/09