

TRANSMISSION VERIFICATION REPORT

TIME : 09/23/2005 15:47
NAME : CITY OF SACRAMENTO
FAX : 9168085543
TEL : 9168085656
SER.# : BROH4J832840

DATE, TIME 09/23 15:46
FAX NO./NAME 94196958
DURATION 00:01:06
PAGE(S) 04
RESULT OK
MODE STANDARD
ECM

CRUZ

**CITY OF SACRAMENTO
CASHIER'S WORKSHEET**

COPY 09/23/2005
RECEIPT NUMBER: R0518342
TRANSACTION DATE: 09/23/2005
TRANSACTION AMOUNT: 239.60
NOTATION:

ISSUED
CITY OF SACRAMENTO
SEP 23 2005
**DOWNTOWN PERMIT
CENTER**

APD #: **0514938**
SITE ADDRESS: 2667 DEL PASO BL SAC
PARCEL: 265-0242-029
TYPE: Bldg Minor Permit
SUB-TYPE: COM
HOUSING: N
STATUS: **ISSUED**

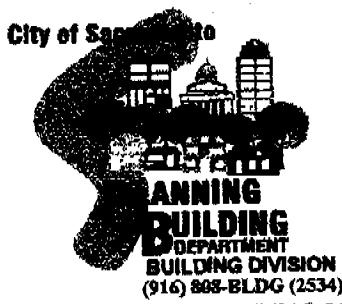
Mixed Income Housing
Fee Program
??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Credit C	TEETER	239.60

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Total Fee	Prev Pymt
Current	Pymt		



Building Permit

George

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

ISSUED
CITY OF SACRAMENTO
SEP 22 2005
DOWNTOWN PERMIT
CENTER

Permit No: 0514938
Date Issued:
Total Amount: 239.60
Insp Area #: 4

Inspection Request # (916) 264-7622

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

Site Address: 2665 Del Paso Blvd Sac CA 95815
Nature of Work: R/R existing roofing, replace w/ 4 ply B.U.R.,
hot asphalt capsheet. Underlayment 18 ga comp 30 yr

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-39 License Number 795408 Date 9/22/05 Signature Ray Crum

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 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 9/22/05 Applicant/Agent Signature Ray Crum

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 _____

PP 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 9/22 Applicant Signature Ray Crum

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.

PBF10004

022667
265 0242 029



CITY OF SACRAMENTO
PLANNING & BUILDING DEPARTMENT
BUILDING DIVISION
www.cityofsacramento.org
Help Line: 1-916-264-5555 OR 1-866-EZ-PERMIT
Inspection: 1-916-808-4677



Downtown Permit Center 1-916-264-6907
1231 I Street, Suite 200, Sacramento, CA 95814
North Permit Center 1-916-808-2354
2101 Avenue Blvd., Suite 200, Sacramento, CA 95834
Fax # 916-264-1901

FAXBACK PERMIT APPLICATION
(certain restrictions apply)

051 41938

Faxed request must be received in this office by 3:00 P.M. to 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 grand fee.

Permits requiring plan review are not eligible for FAXBACK

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

Please Call for Card #
Credit Card Information on file? Yes No
Job Address: Alto Del Paso Blvd Residential Apartments (4+ units per building) Commercial (limited)

Contact Person: Ray Cruz Unit # _____ Contract Price \$ 98,000
Property Owner: Cathery Christian Ch Contractor: CRUZ ROOFING

Address: Same Address: 5044 Stronman Lane
City/State/Zip: _____ City/State/Zip: Sac CA 95835

Phone: _____ Phone: 916 419-9158 Fax 419-6958

Description of Work: R/R existing, replace 1/2 of 4 ply BUR, cap street, + 30 yr comp
Nature of Work: (Provide detailed description of work & indicate type of work in sections below)
51605

<input checked="" type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: <u>2</u> # Squares: <u>180</u> Material: <u>4 ply BUR + 30 yr comp</u>	<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: \$ _____ Cur-in: \$ _____	<input type="checkbox"/> Water Heater (Residential Only) <input type="checkbox"/> Gas <input type="checkbox"/> Electric <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 Termitic Damage Repair (Describe Locations Below)	<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"/> SNAUD <input type="checkbox"/> PG&E NOTE: Correction Notice items will require an additional building permit.

PBF:0002

Visa
CC# 4845 9419 6072 1378
03/08

Church

Church



Downtown Permit Center 1-916-254-6807
1831 I Street, Suite 200, Sacramento, CA 95814

North Permit Center 1-916-806-2254
2101 Arans Blvd., Suite 200, Sacramento, CA 95834

ROOFING QUESTIONNAIRE

Applicant's Name: Cruz Roofing Phone: 419-9658

Project Address: 26605 Del Paso Blvd Phone:
Sac CA 95815

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. Existing Proposed

The existing roofing material is composition shingle, wood shake or shingle, tile or metal. The new roofing material shall be:

30 year laminated dimensional composition
 Wood shake or shingle
 Tile
 Metal that includes the following materials:

b. Existing Proposed

The existing roofing material is built up, asphalt, or other materials with a roof slope of 2:12 or less. The new roofing material shall be:

Built up
 Asphalt
 Membrane

2. GUTTERS

a. The existing gutters are fascia gutters.

There is no change proposed to existing fascia 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 Ogee 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. Rafter tails shall be repaired and replaced to match existing.

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

Applicant's signature: Ray Cruz

Date: 9/22/05

FOR CITY STAFF USE ONLY

Counter Staff MES

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

PBF10023