

TRANSMISSION VERIFICATION REPORT

TIME : 04/11/2006 12:43
 NAME : CITY OF SACRAMENTO
 FAX : 9168085543
 TEL : 9168085656
 SER.# : BROH4J832840

DATE, TIME	04/11 12:42
FAX NO./NAME	94524363
DURATION	00:00:54
PAGE(S)	03
RESULT	OK
MODE	STANDARD ECM

**CITY OF SACRAMENTO
 CASHIER'S WORKSHEET**

**ISSUED
 CITY OF SACRAMENTO
 APR 11 2006
 DOWNTOWN PERMIT
 CENTER**
WMC

RECEIPT NUMBER: R0606343
 TRANSACTION DATE: 04/11/2006
 TRANSACTION AMOUNT: 186.95
 NOTATION:

**PAID
 CITY OF SACRAMENTO
 APR 11 2006
 NEW CITY HALL**

APD #: **0604852**
 SITE ADDRESS: 140 SANDBURG DR SAC
 PARCEL: 005-0203-010

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	186.95

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	2.00	.00	2.00
213	General Plan Surcharge	1760	2.95	.00	2.95
259	Bldg-Technology Surcharg	1750	7.00	.00	7.00



PAID
CITY OF SACRAMENTO
APR 11 2006
NEW CITY HALL

CITY OF SACRAMENTO
PLANNING & BUILDING DEPARTMENT
BUILDING DIVISION

www.cityofsacramento.org

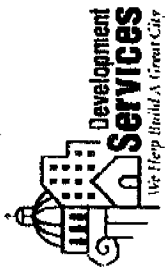
Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT
Inspection: 1-916-808-7622

Fax # 916-808-1901

Downtown Permit Center, New City Hall
915 I Street 5th Floor, Sacramento, CA 95814

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

Fax # 916-808-8370



Activity # _____

FAXBACK PERMIT APPLICATION

(certain restrictions apply)

Date: 4-10-06

Faxed 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.

Permits requiring Plan Review are not eligible for FAXBACK

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

Fax Back
09004062

CREDIT CARD INFORMATION ON FILE? Yes No
Job Address: 140 Sandburg Drive

Contact Person: _____

Property Owner: Martin Helmke

Address: 140 Sandburg Drive

City/State/Zip: Sacramento 95819

Phone: _____

Contact Phone: 739.8606

Contractor: George Audie License # 167569

Address: 922 57th St.

City/State/Zip: Sacramento 95819

Phone: 739.8606 Fax: 452.4363

Nature of Work: (Provide detailed description of work & indicate type of work in selections below).

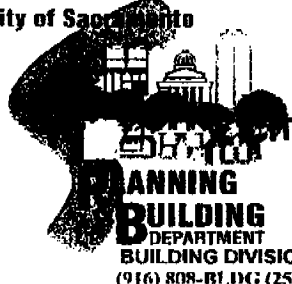
Description of Work: Replace existing heat air split system

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: _____ # Squares: _____ Material: <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> T-11 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Shingles *Design Review approval may be required.	<input checked="" type="checkbox"/> HVAC Installations (Residential Only) <input checked="" type="checkbox"/> Change-out <input type="checkbox"/> New <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input checked="" 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: \$ _____ * Design Review approval may be required.	<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 Termite Damage Repair (Describe Locations Below) *Design Review approval may be required.	<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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FLORENCE

City of Sacramento

Building Permit



PAID

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

ISSUED
CITY OF SACRAMENTO

CITY OF SACRAMENTO

Permit No: _____
Date Issued: _____
Total Amount: _____
Insp Area #: _____

APR 11 2006
DOWNTOWN PERMIT CENTER

LMC

APR 11 2006
NEW CITY HALL

PLANNING BUILDING DEPARTMENT
BUILDING DIVISION
(916) 808-8110 (25.5)

Inspection Request # (916) 264-7622

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

Site Address: 140 Sandburg Drive
Nature of Work: Replace heat and air split system

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 C20 License Number 462569 Date 4-10-06 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 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 4-10-2006 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 State Fund
Policy Number 0014192-2004 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 4/10/2006 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.

PBF10004