

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0608705

Insp Area: 2

Thos Bros:

Sub-Type: RES

Housing (Y/N): N

Site Address: 6800 NARROWGAUGE WY SAC
Parcel No: 117-0630-032

PAID
CITY OF SACRAMENTO ARCHITECT
JUN 15 2006
NEW CITY HALL

CONTRACTOR
K DESIGNERS
2440 GOLD RIVER RD
GOLD RIVER CA 95823

OWNER
DELORES F BROWN TRUST-EM
6800 NARROWGAUGE WY
SACRAMENTO, CA 95823

Nature of Work: SIDING- VINYL - 27SQ - LATH INSP. REQ'D

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 _____ License Number 498806 Date 6-15-06 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 _____

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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 6-15-06 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 DEPT. OF INDUSTRIAL RELATIONS Policy Number 4505-039 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 6-15-06 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.

PBF10001

0608705



Downtown Permit Center 1-916-264-6807
1231 I Street, Suite 200, Sacramento, CA 95814

CITY OF SACRAMENTO
PLANNING & BUILDING DEPARTMENT
BUILDING DIVISION
www.cityofsacramento.gov
Help Line: 1-916-264-5556 OR 1-866-EZPERMIT
Inspection: 1-916-808-4677



North Permit Center 1-916-808-3354
2101 Arma Blvd., Suite 200, Sacramento, CA 95834

Fax # 916-264-1911

FAXED PERMIT APPLICATION

(certain restrictions apply)

Faxed request must be received in this office by 1:00 P.M. to be processed the following work day.
Note: 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.

INDICATE TO PROCESS THIS REQUEST ALL THE FOLLOWING ARE REQUIRED: NONE MUST BE PROVIDED.

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

Job Address: 800 N. Broadway Way
Contract Person: John Greer
Property Owner: Delores Brown
Address: 800 N. Broadway Way
City/State/Zip: Sac Ca 95823
Phone: 916 689-0080

Unit # _____
Contract Price: \$23,471.30
Contractor: K Design
Address: 2413 Gold River Rd
City/State/Zip: Gold River Ca 95670
Phone: 916 631 9350 FAX: 916 631 0593

Contract Phone: 916 631 9350
License # 49882
City/State/Zip: Gold River Ca 95670
Phone: 916 631 9350 FAX: 916 631 0593

NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.

<input type="checkbox"/> Remof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Ratchet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: 1 # Squares: 27 Material: Vinyl <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> T-11 <input type="checkbox"/> Horiz <input checked="" type="checkbox"/> Vinyl <input type="checkbox"/> Stucco	<input type="checkbox"/> HVAC Installations (Residential Only) <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 snowmelt <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to	<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 Kit or Terminal <input type="checkbox"/> Damage Repair (Describe Location 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 <input type="checkbox"/> Replacement <input type="checkbox"/> Sewer Service <input type="checkbox"/> 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"/> SMOUD <input type="checkbox"/> P&GE NOTE: Connection Notice items will require an additional building permit.
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DESCRIPTION OF WORK:

check for design review