

IN PROGRESS INSPECTION REQUIRED



Inspection Request # (916) 264-7622

Building Permit ISSUED

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

Permit No: 03-1383
 Date Issued: 9/12/03
 Total Amount: \$184.50
 Insp Area #: Sacramento Building Division

SEP 12 2003

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

Site Address: 6683 Sunson Rd. Sac Ca 95831
 Nature of Work: Tear off existing shake, resheet with 7/16" OSB, Roof over 30' ealt with 40 year Pac Dim Comp Shingles

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 License Number 763819 Date 12-05 Signature _____

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractor 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 any 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 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 abovesituated property for inspection purposes.
 Date 09/10/03 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.
 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 State Fund
 Policy Number 692-01 2724 Expiration Date 10-01-03

(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 09/10/03 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.



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.

Permits requiring plan review are not eligible for FAXBACK

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

Credit Card info on file? Yes No

RESIDENTIAL

APARTMENTS (4+ units per building)

COMMERCIAL (limited)

Job Address: 6683 Swanson Rd Sacramento CA 95831

Parcel Number: 029-0105-003

CONTACT PERSON: Paolo Cross

Property Owner: Ron Katsuna

Address: 6683 Swanson Rd

City/State/Zip: Sacramento CA 95831

Phone: (916) 392-5911

Contractor: Zumwalt & Assoc License # 763819

Address: 4887 Pasadena Ave

City/State/Zip: Sacramento, Ca. 95821

Phone: (916) 978-9600 FAX: (916) 978-9672

Contract Price \$ 207

CONTACT PHONE: 978-9600

UNIT #

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

Description of Work: Tear off existing shake + resheet with 7/16" OSB Roof over 30# ASTM felt with Owens Corning pro 40 composition shingles.

<input checked="" type="checkbox"/> REROOF (excluding tiles) <input type="checkbox"/> TEAR-OFF <input checked="" type="checkbox"/> RESHEET <input type="checkbox"/> GARAGE # Stories: 1 Material: existing shake # SQUARES: 2 34' x 40' year comp.	<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"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wet furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ Equipment: \$ Cut-hr: \$	<input type="checkbox"/> WATER HEATER <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 <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Mud/sill/Studs <input type="checkbox"/> *PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E	<input type="checkbox"/> MINOR ELECTRIC 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
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* Design Review approval may be required.

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* NOTE: Correction Notice items will require an additional building permit.

IVR Faxback Permit updated 12/20/01

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

FEE SUMMARY
FOR PERMIT #0313833

Bldg Minor Permit

as of 09-11-2003 Permit Status: READY

Site Address: 6683 SWENSON WY SAC

Parcel No: 029-0103-003

Thomas Bros: 317 B7

CONTRACTOR

ZUMWALT & ASSOC.
4887 PASADENA AV
SAC CA 95841
Phone: 978-9600

OWNER

KATSURA RONALD GENZO/CATHY A
6683 SWENSON WY
SACRAMENTO CA 95831
Phone:

ARCHITECT

Phone:

Nature of Work: T/O,RESHEET,&RROOF W/40 7SQS 40 YR COMP 1 STORY HOUSE

Permit Valuation: \$5,000.00

Square Footage: 0

Building Permit	\$175.00	Water Development Fee :	\$0.00
Strong Motion Fee	\$0.50	Sewer Development Fee:	\$0.00
City Bus Oper Tax.....:	\$2.00	Regional Sanitation Fee.:	\$0.00
Technology Fee	\$7.00	Pocket Area Road	\$0.00
Housing Surcharge	\$0.00	SAFCA Fee	\$0.00
Res Const Tax	\$0.00	North Natomas	\$0.00
Penalty Fee	\$0.00	FBA-Jacinto Creek	\$0.00
Inspections	\$0.00	Refund	\$0.00
Replace Cards	\$0.00		
Renewal Fee	\$0.00	Additional Fees	\$0.00
Water Meter Fee	\$0.00		
		TOTAL FEES	\$184.50
		Payments	\$0.00
		BALANCE DUE	\$184.50

PAID
CITY OF SACRAMENTO

SEP 19 2003

**NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES**

MODE = MEMORY TRANSMISSION

START=SEP-12 10:51

END=SEP-12 10:56

FILE NO. =776

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK	8	99789672	003/003	00:01:18

-CITY OF SACRAMENTO -

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

Sep 10 03 06:54a Zumwalt and Associates 916 978 9672 P.2
 JUL-29-2003 08154 CITY OF SACRAMENTO 916 264 5987 P.04

IN PROGRESS INSPECTION REQUIRED



**Building Permit
ISSUED**

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

Permit No: 03-13839
 Date Issued: 09/12/03
 Total Amount: \$124,500
 Insp Area #: Sacramento Building Division

SEP 12 2003

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

Site Address: 6683 Swanson Rd. Sac. Ca. 95831
 Nature of Work: Tear off existing shake roof with 7/16" OSB, Roof over 30' x 60' with 40 year term Dim. Camp shingles.

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: L License Number: 763819 Date: 12-05 Signature: _____

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 Carrier: State Farm
 Policy Number: 892-01 2724 Expiration Date: 10-01-03

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