

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0101949  
Insp Area: 2

Site Address: 991 SHELLWOOD WY SAC  
Parcel No: 031-0520-080

Sub-Type: RES  
Housing (Y/N): N

**CONTRACTOR**  
QUALITY APPLIANCE INSTALLATION  
4555 AUBURN BLVD #2  
SACRAMENTO 95841

**OWNER**  
CHAN BING KONG/LAI MING  
2338 FLOWERWOOD WY  
SACRAMENTO CA 95831

**ARCHITECT**

Nature of Work: RPLC WATER HEATER

**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 C11 License Number 604654 Date 2/15/01 Contractor Signature Jia

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

Date 2/15/01 Applicant/Agent Signature Jia

**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 550980000442

Exp Date 04/01/2001

(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 2/15/01 Applicant Signature Jia

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.



Permit request must be received in the office by 2:00 p.m. to be processed the following work day. Please Contractors must have a current certificate of Worker's Compensation Insurance. Notice Work must begin a Building Permit is issued and be subject to need for

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

RESIDENTIAL  APARTMENTS per code per code  COMMERCIAL

DE ADDRESS: 991 Alameda Alley Unit: 1 CONTRACT PRICE: 300

CONTACT PERSON: Pat Amodeo CONTRACT PHONE: 973-8161

Property Owner: Gregory Boyd Chapman Contractor: Quality Appliance Services  
Address: 991 Alameda Alley Address: 4555 Birkwood Blvd. N.Y.  
City/State: Jersey City, NJ City/State: Sacramento, CA 95831  
Phone: 973-0713 Phone: 973-9161 FAX: 973-1410

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

<input type="checkbox"/> REMOVE BUILDING AND <input type="checkbox"/> TRAY/OT <input type="checkbox"/> NUMBER <input type="checkbox"/> HOURS <input type="checkbox"/> CONTACT	<input type="checkbox"/> HVAC INSTALLATION <input type="checkbox"/> FURNACE ONLY <input type="checkbox"/> CONDENSER <input type="checkbox"/> NEW <input type="checkbox"/> Heat Pump <input type="checkbox"/> Heating <input type="checkbox"/> Split system <input type="checkbox"/> Heat exchanger <input type="checkbox"/> Other	<input checked="" type="checkbox"/> WATER HEATER <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input checked="" type="checkbox"/> Tankless <input type="checkbox"/> Electric <input type="checkbox"/> Other	<input type="checkbox"/> GENERAL ELECTRIC AND/OR <input type="checkbox"/> REFRIGERATION <input type="checkbox"/> FURNACE ONLY <input type="checkbox"/> Range/Refrigerator <input type="checkbox"/> Dishwasher <input type="checkbox"/> Other	<input type="checkbox"/> PROTECTIVE <input type="checkbox"/> SAFETY INSULATION <input type="checkbox"/> Insulation (not above ground <input type="checkbox"/> walls only)
<input type="checkbox"/> SEWER <input type="checkbox"/> Sewer <input type="checkbox"/> Drain <input type="checkbox"/> Dish <input type="checkbox"/> Other	<input type="checkbox"/> Other plumbing <input type="checkbox"/> and to gas <input type="checkbox"/> Other (please <input type="checkbox"/> specify)	<input type="checkbox"/> DRY ROT OR STRUCTURE <input type="checkbox"/> DAMAGE REPAIR <input type="checkbox"/> (Describe location below)	<input type="checkbox"/> Other <input type="checkbox"/> Other <input type="checkbox"/> Other	NOTES: Contractor Notes items will appear on related building permit

Notes: Building Inspectors approval may be required in certain areas.

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