

IN PROGRESS INSPECTION REQUIRED



Inspection Request # (916) 254-7622

Building Permit ISSUED

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

Permit No: 04-06090
Date Issued: 4/19/04
Total Amount: \$ 186,86
Insp Area #: 2R

APR 21 2004
Sacramento Building Division
Sacramento Building Division

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

Site Address: 7649 Ambrose Way.
Nature of Work: Teardrop roof with 053 Radiant Barrier
Re-Roof with OC 40 up Composition

CONSTRUCTION LEADING AGENCY: I hereby affirm under penalty of perjury that there is a construction leading agency for the performance of the work for which this permit is issued (Sec. 3097, Cal. C).
Leader's Name: N/A Leader's Address: _____

LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 (commencing with section 7001) of Division 3 of the Business and Professions Code and my license is in full force and effect.
License Class: C-30 License Number: 577-92 Date: 4/10/04 Signature: [Signature]

OWNED-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractor License Law for the following reason (Sec. 7011.5, 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 exempt pursuant to the provisions of the Contractor 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 7011.5 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 to their sole compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7004, Business and Professions Code). The Contractor License Law does not apply to an owner of property who builds or improves structure, and who does not work himself or herself or through his or 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 Contractor License Law does not apply to an owner of property who builds or improves structure, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractor 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 prohibiting or restricting the location of 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 above-mentioned property for inspection purposes.

Date: 4/19/04 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 one-year contract 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: All Insurance
Policy Number: 205-0017523 Expiration Date: 1/1/05

(This section does not apply 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 these provisions.

Date: 4/19/04 Applicant Signature: [Signature]

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL PENALTIES TO BE ENERGED THEREON AND DOLLARS CONSIDERED IN ADDITION TO THE COST OF CONTRIBUTION, 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.

City of Sacramento



FAXBACK PERMIT APPLICATION
(certain restrictions apply)

Faxed request received in the 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: 7644 Ambrose Way
 Parcel Number: 031-1140-021
 CONTACT PERSON: Lisa Jones
 Property Owner: Tom Lyons
 Address: 7644 Ambrose Way
 City/State/Zip: Sacramento CA 95851
 Phone: 916-451-1102
 Contract Price: \$17720
 CONTACT PHONE: 916-0404
 Contractor: Tom Jones Roofing License # 5722558
 Address: 5600 Carver St Sacramento CA
 City/State/Zip: Sacramento CA 95716
 Phone: 916-0404 FAX: 916-0411

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

Remove 1 Shale roof. Reshake w/ o.c. 40 year Comp OSB. Realign eaves.

<input checked="" type="checkbox"/> REROOF (excluding tile) <input checked="" type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input checked="" type="checkbox"/> HOUSE # SQUARES 25 <input type="checkbox"/> GARAGE # SQUARES 3+ Material: 1 (2) 3+	<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"/> Cook-in <input type="checkbox"/> Heat pump or elec. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ Equipment: \$ Cut-in: \$	<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 TERMITTE DAMAGE REPAIR <input type="checkbox"/> Flooding/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Muddell/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 forms will require an additional building permit.
 NRI Faxback Permit updated 12/20/01

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

FEE SUMMARY
FOR PERMIT #0406080
Bldg Minor Permit
as of 04-20-2004 Permit Status: ~~READY~~

Site Address: 7649 AMBROSE WY SAC
Parcel No: 031-1140-021
Thomas Bros: 336H3

CONTRACTOR
TIM JONES ROOFING
5500 CAVITT STALLMAN ROAD
GRANITE BAY CA. 95746
Phone: 916-791-0408

OWNER
LYONS FAMILY TRUST (TOM LYONS)
7649 AMBROSE WY
SACRAMENTO CA 95831
Phone: 916-421-4672

ARCHITECT

Phone:

Nature of Work: T/O,RESHEET,&RROOF 2 STORY HOUSE W/25SQS 40 YR COMP

Permit Valuation: \$9,720.00
Square Footage: 0

Building Permit	\$175.00	Water Development Fee:	\$0.00
Strong Motion Fee	\$0.97	Sewer Development Fee:	\$0.00
City Bus Oper Tax.....	\$3.89	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	\$186.86
		Payments	\$0.00
		BALANCE DUE	\$186.86

PAID
CITY OF SACRAMENTO

APR 21 2004

NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES