CITY OF SACRAMENTO		Permit No:	0610078
231 I Street, Sacramento, CA 95814	and the state of t	Insp Area:	4
2511 Street, Saciamento, CA 25017		Thos Bros:	277H4
			APP CONTRACTOR
NA Adams 762 HAVECAV CAT		Sub-Type:	COM
Site Address: 763 HAYES AV SAC Parcel No. 250-0150-032 UNIT 5	The second secon	Housing (Y/N):	**
Parcel No: 250-0150-032 UNIT 5	a a a a a a a a a a a a a a a a a a a		21 V
CONTRACTOR OWNER	en e	ARCHITECT CASEY JAMES H/D	DIANA I.
ADVANCED CONTRACTING & REMODELING	NV.	CASET JAMES 11/12	MINE
931 LA HONDA WY CARMICHAEL CA 95608 CARMICHAEL, CA			the state of the s
	TO DE LUCE FOR INIT.	<i>це</i>	- d
Nature of Work: REPLACE MAIN ELECTRICAL CIRCU	H BREAKER FOR UNIT	#3	
CONSTRUCTION LENDING AGENCY: I hereby affirm under pe	nalty of perjury that there is a cons	struction lending agenc	y for the performance of
the work for which this permit is issued (Sec. 3097, Civ. C).	many or perjury man more is a cons		· · · · · · · · · · · · · · · · · · ·
도 이미워 등학교 이 문의 이 가는 이 살림에 된 살림이 눈을 하는 것이 모든 하는 것이 되었다. 그는 사람이 없는 것이 없는 것이 없는 것이 없다.			
Lender's Name	ender's Address	4 14	
LICENSED CONTRACTORS DECLARATION: I hereby affir	m under penalty of perjury that	I RA Heensed under	previsions of Chapter 9
commencing with section 7000) of Division 3 of the Business and Profession	is Code and my license is wfull to	reparted bettern'	er of the second
7// /	Contractor Signature	Musino	
License Class License Number 490101 Date // 6/C	' JU	L W CILD	
OWNER-BUILDER DECLARATION: I hereby affirm under penal reason (Sec. 7031.5, Business and Professions Code; any city or county which prior to its issuance, also requires the applicant for such permit to file a signed License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the basis for the alleged exemption. Any violation of Section 7031.5 by any application of the section 7031.5 by any application (\$500.00);	pricant for a portion one-jest and ap		
I, as a owner of the property, or my employees with wages as their so sale (Sec. 7044, Business and Professional Code: The Contractors License who does such work himself or herself or through his/her own employees, p the building or improvement is sold within one year of completion, the owner the purpose of sale.)	caw does not apply to an owner of	re not intended or offe	red for sale. If, however,
1 1	contractors to construct the proje	ct (Sec. 7044 Rusines	ss and Professions Code:
I, as owner of the property, am exclusively contracting with licensed. The Contractors License Law does not apply to an owner of property who be licensed pursuant to the Contractors License Law).	illds or improves thereon, and who	contracts for such pro	ojects with a contractor(s)
I am exempt under Sec. B & PC for this reason:			
Date Owner Signature		<u> </u>	
IN ISSUING THIS BUILDING PERMIT, the applicant represents, and measurements and locations shown on the application or accompanying diprivate agreement relating to permissible or prohibited locations for such in improvement or the violation of any private agreement relating to location of	nprovements. This building perm improvements.	it does not authorize a	any illegal location of any
I certify that I have read this application and state that all information is corr building construction and herby authorize representative(s) of this city to ent	ect. I agree to comply with all city er upon the abovementioned proper	and county ordinances	s and state laws relating to oses.
Date 7/6/06 Applicant/Agent Signat			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
WORKER'S COMPENSATION DECLARATION: I hereby affine I have and will maintain a certificate of consent to self-insure for we performance of work for which the permit is issued.	rm under penalty of perjury one of orkers' compensation as provided	the following declarati for by Section 3700 o	ions: f the Labor Code, for the
I have and will maintain workers' compensation insurance, as requir this permit is issued. My workers' compensation insurance carrier and polic	ed by Section 3700 of the Labor C y number are:	Code, for the performa	nce of the work for which
Carrier String Communication	icy Number 1006376-01	Exp Date	04/01/2007
(This section need not be completed if the permit is for \$100 or less) not employ any person in any manner so as to become subject to the worker workers' compensation provisions of Section 3700 of the Labor Code, I shall	rs' compensation laws of California	a and agree mat it i sit	his permit is issued, Ishal ould become subject toth
Date 7/6/6 4 Applicant Signature	Llder ZC	asey	

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.



CITY OF SACRAMENTO PLANNING & BUILDING DEPARTMENT BUILDING DIVISION

Help Line: 1-916-908-5656 OR 1-968-EZ-PERMIT Inspection: 1-916-908-7622 www.cityofsacramento.org

Fax # 916-808-1901 Downtown Permit Center, New City Hall 915 I Street, 3" Floor, Secremento, CA 95814



Fax # 916-808-8370

FAXED PERMIT APPLICATION (certain restrictions apply) Activity # 06 100 78

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

CITY OF SACKAMENTO NORTH PERMIT CENTER

Note: Work started before a Building Permit is issued will be subject to auad fee.

Faxed request must be received in this office by 3:00 P.M. to be processed the following workday.

Note: Contractors must have a current certificate of Worker's Compensation Insurance.

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RECEIVED	6×14/	8165-1176
	Contract Phone: 1/6 944-1560 ExTH Contractor: Advance Cast License # 490/4 Address: 393/ La Handa wy	244 1560 Fox:
APARTMENTS (4+ units per besiding) Unit #	SE	ndicate type of work in selections below).
Job Address: 763 Hayes Aue Contact Person: DIANA CASSY	Address: 393/ La Honda Way City/Sinte/Zip: Cal Wichael	Phone: 4/6 944-1560 Nature of Work: (Provide detailed description of work & indicate type of work in selections below). Description of Work: Replace Main been Land and the Comment of t
Job Address: Contact Person:	Property Owner Address: 39: City/State/Zip:	Phone: 4/1. Nature of Work: Description of W.

	D. L.	Inspection	(Residential and single	SMUD SMUD				• NOTE:	Correction Notice items	will require an additional building permit.
	Minor Electric and/or Minor	Plumbing		U Blectric Scrvice Change # amps New electric circuits	Ro-wire	Sewer Service Replacement	Gas Line Replacement	Water Waste		
	Water Heater	(vocasionisti Only)			Relocate	□ Dry Refor Termite	Damage Repair	(Describe Locations Below)		*Design Review approval may be
	(Residential Only)	Change-out New	Treat Pump	Split system Roof mount	Cg.	Wall furnace	Other (describe below)	value of duct work: Equipment: \$	Cut-in: \$	 Design Review approval may be required.
Reroof (excluding file)	Tear-Off	House D	# Stories:	# Squares:	Material:	Siding		Horiz Vinvi		*Design Review approval may be required.