

TRANSMISSION VERIFICATION REPORT

TIME : 08/04/2006 14:44
 NAME : CITY OF SACRAMENTO
 FAX : 9168085543
 TEL : 9168085656
 SER.# : BROH4J832840

DATE, TIME : 08/04 14:43
 FAX NO./NAME : 918153560663
 DURATION : 00:00:44
 PAGE(S) : 03
 RESULT : OK
 MODE : STANDARD
 ECM

Plumb-in time

**CITY OF SACRAMENTO
 CASHIER'S WORKSHEET**

COPY 08/04/2006

RECEIPT NUMBER: R0614358

TRANSACTION DATE: 08/04/2006
 TRANSACTION AMOUNT: 78.79
 NOTATION:

**ISSUED
 CITY OF SACRAMENTO**

AUG 04 2006

**DOWNTOWN PERMIT
 CENTER**

APD #: **0611926**
 SITE ADDRESS: 8257 RENSSELAER WY SAC
 PARCEL: 079-0111-015

TYPE: Bldg Minor Permit
 SUB-TYPE: RES
 HOUSING: N
 STATUS: **ISSUED**

Mixed Income Housing
 Fee Program
 ??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Credit C	TEETER	78.79

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	75.00	.00	75.00
206	City Business Oper Tax	1730	.20	.00	.20
213	General Plan Surcharge	1760	.59	.00	.59
259	Bldg-Technology Surcharg	1750	3.00	.00	3.00



Building Permit

Permit No: 0611926
Date Issued: 08.04.06
Total Amount: 78.79
Imp Area #: 3

ISSUED CITY OF SACRAMENTO
AUG 04 2006
DOWNTOWN PERMIT CENTER

Inspection Request # (916) 364-7677

Please Fill in the Following

Site Address: 8257 Rensselaer Way
Nature of Work: Replace hot water heater, 40 gal gas

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.)

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 that my license is in full force and effect. License Class: C License Number: 869068 Date: 8/3/06 Signature: Justin Sanchez

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractor's License Law for the following reason (Sec. 7091.5, Business and Professions Code, any city or county of this state): I am the owner of the property and I intend to perform the work myself, or I intend to employ a person who is not licensed or offered for sale, if, however, the building or improvement is sold within one year of completion, the contractor shall be liable for the cost of any civil penalty of not more than five hundred dollars (\$500.00).

I, as a owner of the property, or my agent, hereby affirm under penalty of perjury that I am exempt from the contractor's License Law for the following reason (Sec. 7091.5, Business and Professions Code, any city or county of this state): I am the owner of the property and I intend to perform the work myself, or I intend to employ a person who is not licensed or offered for sale, if, however, the building or improvement is sold within one year of completion, the contractor shall be liable for the cost of any civil penalty of not more than five hundred dollars (\$500.00).

I, as owner of the property, am not exempt from the contractor's License Law for the following reason (Sec. 7091.5, Business and Professions Code): The Contractor License Law does not apply to all owners of property who intend to perform the work myself, or I intend to employ a person who is not licensed or offered for sale, if, however, the building or improvement is sold within one year of completion, the contractor shall be liable for the cost of any civil penalty of not more than five hundred dollars (\$500.00).

I am exempt under Sec.

Date: 8/3/06 Owner Signature: Justin Sanchez

IN ISSUING THIS BUILDING PERMIT, the applicant has provided and verified that the application verified all measurements and locations shown on the application or drawings, and that the applicant has agreed to be bound by the provisions of the Building Code, and that the applicant has agreed to be bound by the provisions of the Building Code, and that the applicant has agreed to be bound by the provisions of the Building Code.

I certify that I have read this application and that all information is correct. I agree to comply with all city and county regulations 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: 8/3/06 Approval Agent Signature: Justin Sanchez

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following conditions:

- I have and will maintain a certificate of contract to self-insure for workers' compensation as provided for by Section 4700 of the Labor Code, for the performance of work for which this 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: American Home Policy Number: 1162491690 Expiration Date: 2-28-07

(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.

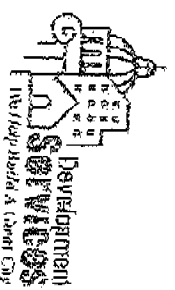
Date: 8/3/06 Applicant Signature: Justin Sanchez

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL PENALTIES 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 OF WORK IS NOT COMMENCED WITHIN 180 DAYS.



CITY OF SACRAMENTO
 PLANNING & BUILDING DEPARTMENT
 BUILDING DIVISION
www.cityofsacramento.org
 Help Line: 1-916-808-6856 OR 1-866-62-PERMIT
 Inspection: 1-916-808-7622



Fax # 1-800-8-1301 Downtown Permit Center, New City Hall
 915 I Street, 3rd Floor, Sacramento, CA 95814
 North Permit Center
 2101 Arena Blvd., Suite 200 Sacramento, CA 95834
 Fax # 815-808-8370

Activity # _____

FAST PERMIT APPLICATION
 (certain restrictions apply)

Date: 8/3/16

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

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

Job Address: 8257 Rensselaer Way RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

Contact Person: BOB HORTON Link # _____ Contract Price \$ 500.00

Property Owner: Ralph Tressa Contractor: Plumb-in-Time License # 868068

Address: 8257 Rensselaer Way City/State/Zip: Sacramento, Ca 95826 City/State/Zip: 360 Commercial Drive #1140 License # 868068

Phone: 985-595-6339 Phone: 916-293-3031 or 1042 Fax: 815-356-0643

Nature of Work: (Provide detailed description of work & indicate type of work in selections below)
 Description of Work: Replace hot water heater, 40 gal gas

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Reshake <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: _____ # Squares: _____ Materials: <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco *Design Review approval may be required.	<input type="checkbox"/> HVAC Installations (Residential Only) <input type="checkbox"/> Change-out <input type="checkbox"/> New <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. heat to gas <input type="checkbox"/> Wall Furnace <input type="checkbox"/> Other (Describe below) Value of duct work: _____ Equipment: \$ _____ Con-ID: \$ _____ *Design Review approval may be required.	<input checked="" 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 Rot or Termitis Damage Repair (Describe Locations Below) *Design Review approval may be required.	<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"/> R-P-wire <input type="checkbox"/> Water Service Replacement <input type="checkbox"/> Sewer Service 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"/> SMTD <input type="checkbox"/> PG&E * NOTE: Correction Notice items will require an additional building permit.
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