

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0313995

Insp Area: 2

Thos Bros: 338 B3

Site Address: 7736 LA MANCHA WY SAC

Sub-Type: COM

Parcel No: 118-0240-004

7736, 7738, 7740, 7742 LA MANCHA WAY

Housing (Y/N):

N

CONTRACTOR

MIKE WALSH ROOFING
3747 WEST PACIFIC AVE
SACRAMENTO CA 95820

OWNER

TARTER KATHLEEN POWLEDGE
4913
SACRAMENTO CA 95823

ARCHITECT

Nature of Work: RE-COVER EXIST. FIBERGLASS HOT ROOF WITH NEW LAYER OF 2 PLY FIBERGLASS HOTMOPPED 72# MINERAL ROOFING MATERIAL, 50 SQ

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-39 License Number 668494 Date 9-15-03 Contractor Signature Betty Walsh

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 9-15-03 Applicant/Agent Signature Betty Walsh

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.

BW 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 NONE Policy Number Exp Date

_____, (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 9-15-03 Applicant Signature Betty Walsh

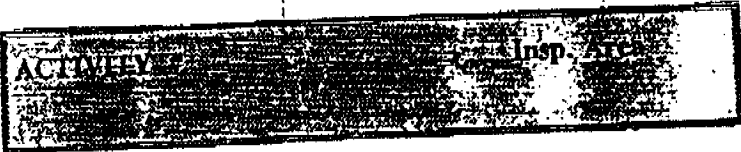
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

APPLICATION FOR COMMERCIAL BUILDING PERMIT

0313995

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

231 I Street, Rm. 200
SACRAMENTO, CA 95814 (916) 264-7619 FAX 264-7046



Applicant MUST complete ALL Unshaded areas

ADDRESS 773 1/2 38, 40, 42 La Mancha Way Suite _____
RCBL # _____

CONTACT
Name MIKE WALSH
Street Address 3747 W. Pacific Ave #C
City/State/Zip Sac, Ca 95820
Phone 916-524-4285 FAX 916-451-7055
E-mail: _____

LICENSED CONTRACTOR Lic No. # 662494
Name MIKE WALSH ROOFING INC
Address 3747 W. Pacific Ave #C
City/State/Zip Sac, Ca 95820
Phone 916-524-4285 FAX 916-451-7055
E-mail: _____

ARCHITECT/ENGINEER
Name _____
Address _____
City/State/Zip _____
Phone _____ FAX _____
E-mail: _____

OWNER
Name Southgate Garden Home
Address 2919 Tehalee Blvd
City/State/Zip Utah Hills Ca 95610
Phone 916-536-4135 FAX _____
E-mail: _____

Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: Transportation Ins Co
WORKER'S COMPENSATION POLICY # W20247855906 EXPIRATION DATE: 12-31-03

NATURE OF WORK IN DETAIL: Recover existing Fibreglass
Hot Road Smooth with Fibreglass
seal shut 2 Ply Fibreglass Hot mopped and
one Hot mopped 72 in. Fibreglass mineral surface
cap sheet
VALUATION: \$ 10,000.00

OCCUPANT/TENANT:		C.A.T.		REMARKS		FIRE		ADD		OTH	
NO	DESCRIPTION	BLDG	SHEE	MECH	PLUMB	ELECT	SITE	MECH	PLUMB	ELECT	FILE
Stories	Is in Area	Use	Use	Occp Group	Const type	Fire Req	Alarm	Fire	Fire	Fire	File
B	L										

COMMENTS: _____

REGIONAL SANITATION FEES: Yes No HEALTH DEPARTMENT: _____
WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS: _____