

# CITY OF SACRAMENTO CASHIER'S WORKSHEET

*JG*

\*COPY\* 04/14/2005

**ISSUED**

RECEIPT NUMBER: R0506194

APR 14 2005

TRANSACTION DATE: 04/14/2005  
TRANSACTION AMOUNT: 189.59  
NOTATION:

Sacramento Building Division

APD #: **0504979**  
SITE ADDRESS: 5570 ONTARIO ST SAC  
PARCEL: 023-0294-011

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	189.59

### RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	175.00	.00	175.00
206	City Business Oper Tax	1730	2.77	.00	2.77
207	Strong Motion (SMI)	1600	.69	.00	.69
213	General Plan Surcharge	1760	4.13	.00	4.13
259	Bldg-Technology Surcharg	1750	7.00	.00	7.00

**PAID**  
CITY OF SACRAMENTO

APR 14 2005

NEIGHBORHOODS PLANNING  
AND DEVELOPMENT SERVICES

*File*



Inspection Request # (P16) 264-7622

Building Permit **ISSUED**

*Secret*

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

Permit No: 0504979  
Date Issued: 4/14/05  
Total Amount: \$129.59  
Insp Area #: 3

APR 14 2005

Sacramento Building Division

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

Site Address: 5570 Ontario Street  
Nature of Work: Remove 2 layers, install new OSB and 3/4" ply sheetrock

CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury that this 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-29 License Number: 406960 Date: 4/13/05 Signature: [Signature]

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from this construction License Law for the following reasons (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 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 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 employee with wages as their sole compensation, will do the work and the structure is not intended or offered for sale (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 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 the 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 permitted 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 above-referenced property for inspection purposes.

Date: 4/13/05 Applicant/Agent Signature: [Signature]

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:  
I have and will procure 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: BBST  
Policy Number: 2246 Expiration Date: 12/31/05

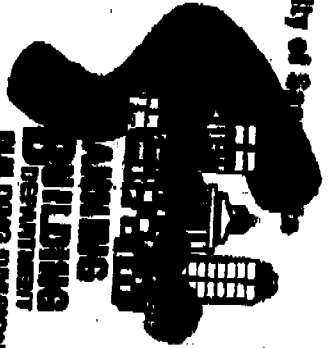
(This section need not be completed if the permit is for \$100 or less.) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date: 4/13/05 Applicant Signature: [Signature]

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 1706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

*Rivera*



# FAXBACK PERMIT APPLICATION

(certain restrictions apply)

Faxed requests received to this 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 good fees.

Permits requiring plan review are not eligible for FAXBACK

In order to process this request, ALL of the following information MUST be provided:

Fax # (916) 264-1991

Inspection Request # (916) 264-1992

Credit Card info on File? Yes  No

Job Address: 5570 Orlando Street RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (restaurant)

Parcel Number: CONTACT PERSON: EPA Matthews CONTACT PHONE: 691-5000

Property Owner: Same Matthews Address: 13975 Parkside Drive Contractor: New Roofing & Siding, Inc. Phone: 925-268-9500

City/State/Zip: 95119-6008 Phone: 925-268-9500 FAX: 352-2282

DESCRIPTION OF WORK: (Provide detailed description of work & indicate type of work in sections below.)  
REPAIR 20yr deck. Install 7x6" 11

<input type="checkbox"/> REMODEL (including the) <input checked="" type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEED <input type="checkbox"/> RAISE <input type="checkbox"/> SQUARES <input type="checkbox"/> GARAGE <input type="checkbox"/> SEWING <input type="checkbox"/> WOOD <input type="checkbox"/> T-111 <input type="checkbox"/> HAZIT <input type="checkbox"/> VINYL <input type="checkbox"/> SUIPCO	<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 systems <input type="checkbox"/> Heat exchanger <input type="checkbox"/> Oil-in <input type="checkbox"/> Heat pump exchanger, set to gas	<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"/> Radiator <input type="checkbox"/> New	<input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION <input type="checkbox"/> SWIM <input type="checkbox"/> POLE	<input type="checkbox"/> REPAIR <input type="checkbox"/> RE-tilt <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"/> Wash

0504924

200

MODE = MEMORY TRANSMISSION

START=APR-14 11:20

END=APR-14 11:20

FILE NO.=111

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK		93542862	000/001	00:00:00

-CITY OF SACRAMENTO -

\*\*\*\*\* -PLAN CHECK - \*\*\*\*\* 916 264 5987- \*\*\*\*\*

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