



4050 Temple Ave
0305910

DEPARTMENT OF
NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES

CITY OF SACRAMENTO
CALIFORNIA

1231 I STREET
ROOM 200
SACRAMENTO, CA
95814-2904

916-264-7619
FAX 916-264-7046

DEVELOPMENT SERVICES
DIVISION

EXHIBIT 1

I have read and am familiar with the contents of the City's Standard
Owner-Builder Notification and Owner-Builder Verification, as required by
California Health and Safety Code Section 19830 and 19831. I authorize my
agent(s) KEVIN WILSON
to sign the Owner-Builder Verification on my behalf.

Signature

Print Name

CRAIG HARDY

Address

6012 CENTURION Circle
CITRUS HTS CA 95621

Telephone

^{CELL} 916 723 6145

^{HOME} 916 729 4083

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no) _____

2. I (have/have not) HAVE signed an application for A building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name CRAIG HARDY Address 6012 CENTURION CT

City CITRUS HEIGHTS Telephone 916 729 4083

Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, Supervise, and provide the major work.

Name CRAIG HARDY Address 6012 CENTURION CT

City CITRUS HEIGHTS Telephone 916 729 4083

Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:

Name	Address	Phone	Type of work

Signed [Signature]

Job Address ~~4019 SUTTER ST~~ 4050 Temple Dr

Permit No: # 0705910