

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

Permit No: **0416112**  
Insp Area: 1  
Thos Bros: 297G5

Site Address: **3241 L ST SAC**  
Parcel No: 007-0123-024

Sub-Type: RES  
Housing (Y/N): N

CONTRACTOR  
HIGH ENERGY ELECTRIC  
7912 GLEN TREE DR  
CITRUS HEIGHTS CA 95610

OWNER  
MARTINEZ JASON/MELEA  
3241 L ST  
SACRAMENTO, CA 95816

ARCHITECT

Nature of Work: C/O 100 AMP SERVICE TO 200AMPS.

**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 C10 License Number 834997 Date 9-27-04 Contractor Signature [Signature]

**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 \_\_\_\_\_

**PAID**  
**CITY OF SACRAMENTO**  
**SEP 29 2004**  
**NEIGHBORHOODS PLANNING AND DEVELOPMENT SERVICES**

**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 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 9-27-04 Applicant/Agent Signature [Signature]

**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.

\_\_\_\_ 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:

CR Carrier NO EMPLOYEES 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 9-27-04 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 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.**

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

California Home

Monday, Septem

**License Detail**

CALIFORNIA CONTRACTORS STATE LICEN

**Contractor License # 834997****DISCLAIMER**

A license status check provides information taken from the CSLB license data base. Before on this information, you should be aware of the following limitations:

- CSLB complaint disclosure is restricted by law (B&P 7124.6). If this entity is subject to complaint disclosure, a link for complaint disclosure will appear below. Click on the link button to obtain complaint and/or legal action information.
- Per B&P 7071.17, only construction related civil judgments known to the CSLB are displayed.
- Arbitrations are not listed unless the contractor fails to comply with the terms of the arbitration.
- Due to workload, there may be relevant information that has not yet been entered onto Board's license data base.

Extract Date: 09/27/2004

**\*\*\* Business Information \*\*\***

HIGH ENERGY ELECTRIC  
7912 GLEN TREE DR  
CITRUS HEIGHTS, CA 95610  
Business Phone Number: (916) 726-1493

Entity: **Sole Ownership**  
Issue Date: 03/29/2004 Expire Date: 03/31/2006

**\*\*\* License Status \*\*\***

This license is current and active. All information below should be reviewed.

**\*\*\* Classifications \*\*\***

Class	Description
C10	ELECTRICAL

**\*\*\* Bonding Information \*\*\***

**CONTRACTOR'S BOND:** This license filed Contractor's Bond number 6059407 in the amount of \$10,000 with the bonding company **SURETY COMPANY OF THE PACIFIC.**

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007-0123-024

041612



CITY OF SACRAMENTO  
PLANNING & BUILDING DEPARTMENT  
BUILDING DIVISION  
www.cityofsacramento.org  
Help Line: 1-916-264-5656 OR 1-866-EZ-PERMIT  
Inspection: 1-916-808-4677



Downtown Permit Center 1-916-264-6807  
12311 Street, Suite 200, Sacramento, CA 95814  
North Permit Center 1-916-808-2354  
2101 Arena Blvd., Suite 200, Sacramento, CA 95834  
FAXED PERMIT APPLICATION  
(certain restrictions apply)  
Fax # 916-264-1901

Faxed request must be received in this office by 3:00 P.M. to be processed the following work day.  
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 quad fee.

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

RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (limited)  
Unit # \_\_\_\_\_ Contract Price \$ 1500.00

Job Address: 3241 L St  
Contact Person: \_\_\_\_\_  
Contractor: Lovie Robinson License # 834997

Property Owner: Jason and Malina Martinez  
Address: \_\_\_\_\_  
City/State/Zip: Sacramento CA Citrus Heights

Phone: 481-0188  
City/State/Zip: \_\_\_\_\_  
Phone: 286-1493 FAX: \_\_\_\_\_

NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: _____ # Squares: _____ Material: _____ <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	<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. unit to gas <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: _____ Equipment: \$ _____ Cut-in: \$ _____	<input 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 Termitie Damage Repair (Describe Locations Below)	<input type="checkbox"/> Minor Electric and/or Minor Plumbing (Residential Only) <input checked="" type="checkbox"/> Electric Service Change # _____ amps 200 <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-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"/> SMUD <input type="checkbox"/> PG&E
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DESCRIPTION OF WORK:

\$7822

Effective Date: 03/16/2004

**\*\*\* Workers Compensation Information \*\*\***

This license is exempt from having workers compensation insurance; they certified that they employees at this time

Effective Date: 03/12/2004 Expire Date: None

Personnel List

License Number Request

Contractor Name Request

Personnel Name Request

Salesperson Request

Salesperson Name Request

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