

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0605562
Insp Area: 2
Thos Bros: 336H2

Site Address: 7515 DELTAWIND DR SAC
Parcel No: 031-0873-071

PAID
CITY OF SACRAMENTO
APR 25 2006
NEW CITY HALL
ARCHITECT

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

CONTRACTOR
ALTA CAL ROOFING
2720 DANUBE AV
DAVIS CA 95616

OWNER
NAVA MARK VINCENT
44 HIDDEN COVE CR
SACRAMENTO, CA 95831

Nature of Work: PAPERLESS PERMIT- T/O, RESHEET & APPLY COMP. 18 SQS. IN PROGRESS INSPECTION IS REQUIRED.

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 729314 Date 4-25-06 Contractor Signature Ronald J Bell

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 4-25-06 Applicant/Agent Signature Ronald J Bell

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:

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 4-25-06 Applicant Signature Ronald J Bell

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.



PAID
 CITY OF SACRAMENTO
 APR 25 2006
 NEW CITY HALL

Downtown Permit Center
 1234 I Street, Suite 200
 Sacramento, CA 95814
 North Permit Center
 2101 Arena Blvd, Suite 201
 Sacramento, CA 95834

MINOR PERMIT APPLICATION

Date: 4/22/06

For/through request must be received in this office by 3:00 P.M. to be processed the following working days. Contractors must have a current certificate of Worker's Compensation Insurance. Note: Work started before a Building Permit is issued will be subject to assessed fee.

Permits requiring Plan Review are not eligible for the MINOR PERMIT PROGRAM

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

Job Address: 9515 DELTRAVIA DRIVE Bid Type: RESIDENTIAL APARTMENTS COMMERCIAL (limited)
 CONTACT INFO Name: DRIVE KLUWER Phone #: 800-956-1996 Email: 60002
 Unit # _____ Contract Price _____

Property Owner: MARK ADRIAN Contractor: ACTA C&I RESCUE License #: 929314
 Address: 9515 DELTRAVIA DR Address: 2999 WINDSOR COURT
 City/State/Zip: SACRAMENTO 95831 City/State/Zip: RESERVE CA 95623
 Phone: 916-386-5022 Phone: 800-956-1996 Fax: 916
 Nature of Work: Provide description of work & indicate type of work in selections below: Pre-Registered? YES NO Registration # _____

Description of Work: TENR OFF SHAKE ROOF, INSTALL 30 YEAR DIMENSIONAL 30 YEAR CORNING DIMENSIONAL 30 YEAR SHEETING, INSTALL 30 YEAR COMPOSITION

<input checked="" type="checkbox"/> Tear-off (excluding tile) <input type="checkbox"/> Tear-off <input type="checkbox"/> Reshock <input type="checkbox"/> House <input type="checkbox"/> Stables: <u>1-2-Split level</u> <input type="checkbox"/> Squares: <u>18</u> Material: <u>Composition</u> <input type="checkbox"/> Sliding <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Hoatz <input type="checkbox"/> Vinyl <input type="checkbox"/> Shaloo	<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 elec. work: _____ Equipment: <u>1</u> Out-in: \$ _____	<input type="checkbox"/> Water Heater (Residential Only) <input type="checkbox"/> Electric <input type="checkbox"/> Gas <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New	<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"/> Re-wire	<input type="checkbox"/> Public Utilities Safety Inspection <input type="checkbox"/> SMUD <input type="checkbox"/> PG&B * NOTE * Correction Notice items will require an additional building permit
Office Use Only: Parcel #: _____ Date Received: <u>4/24/06</u> Date Issued: <u>4/24/06</u> Processor's Initials: <u>AKC</u> Permit #: <u>0605562</u>				