

City of Sacramento
Planning and Building Dept.
2101 Arena Blvd, Ste 200
Sacramento, Ca. 95834

June 1st, 2006

Re: Re-roofing single family home permit.


Dear Sirs/ Mams

I am in the process of Re-roofing my house at:
2071 Delgado Way
Sacramento, Ca. 95823

The existing roof is over 25 years old and it is wood single roof. I would like to replace the roof with composite shakes or a preferable material that is better than wood single. I give permission to my sister Souad Maadarani to obtain a re-roof permit on my behalf. I previously faxed a permit application to obtain The permit and you requested that the permit be obtained in person. I live in the Los Angeles county area and it is hard for me to leave work and drive to Sacramento to obtain the permit. I am appointing my sister to obtain the permit on my behalf. Thank you

If you have any questions please call me, I am at work from 0730- 1630 and the phone is (661)275-0286, my home phone is (661) 267-6540 and my cell phone is (661) 916-1379. Thank you again.

Sincerely


Ahmad A. Maadarani

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CITY OF SACRAMENTO
JUN 08 2006
NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES



CITY OF SACRAMENTO
PLANNING & BUILDING DEPARTMENT
 BUILDING DIVISION

www.cityofsacramento.org

Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT
 Inspection: 1-916-808-7622



Development Services
 We Help Build A Great City

Fax # 916-808-1901

Downtown Permit Center, New City Hall
 915 I Street, 3rd Floor, Sacramento, CA 95814

North Permit Center
 2101 Arena Blvd., Suite 200, Sacramento, CA 95834

Fax # 916-808-8370

Activity # Reroof

FAXED PERMIT APPLICATION
 (certain restrictions apply)

Date: 4/14/06

*Faxed request must be received in this office by 3:00 P.M. to be processed the following workday.
 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)

Job Address: 2071 Delgado Ave Sacramento, CA

Contact Person: AHMAD MAADHARANI

Property Owner: AHMAD & TRACY MAADHARANI

Address: 3944 Chantilly Lane

City/State/Zip: PALMDALE, CA 93551

Phone: (661) 267-6546

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 CITY OF SACRAMENTO

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NEIGHBORHOODS PLANNING
 AND DEVELOPMENT SERVICES

Nature of Work: (Provide detailed description of work & indicate type of work in selections below).
 Description of Work: Reroofing using composite rather than wood shingle.

<input type="checkbox"/> Reroof (excluding tile) <input checked="" type="checkbox"/> Tear-Off <input checked="" type="checkbox"/> Resheet <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Garage # Stories: <u>2</u> # Squares: <u>16</u> 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 <small>*Design Review approval may be required.</small>	<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: \$ _____ <small>*Design Review approval may be required.</small>	<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 Termite Damage Repair (Describe Locations Below) <small>*Design Review approval may be required.</small>	<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"/> 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 NOTE: Correction Notice items will require an additional building permit.
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