

IN PROGRESS INSPECTION REQUIRED

Roof Crafter

2 of 2

Building Permit

4R

ISSUED

City of Sacramento



BUILDING DIVISION
(916) 808-BLDG (2534)

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

Permit No: 04.0 4567
Date Issued: 3/30/04
Total Amount: \$1800.00

MAR 30 2004
Sacramento Building Division

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

Site Address: 1172 SOCORRO WY
Nature of Work: Re-roofing 40yr Lam Dim Comp
NO OTHER WORK

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 435996 Date 3-26-04 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 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 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 burdens 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 above mentioned property for inspection purposes.

Date 3-26-04 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:

Carrier State Fund Compensation Ins.
Policy Number 713-02 0010054 Expiration Date 1-1-05

(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 3-26-04 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.

(certain restrictions apply)



BUILDING DIVISION
Fax # (916) 264-1901

Faxed request received in 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 quad fees.

Permits requiring plan review are not eligible for FAXBACK

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

RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

Address: 172 SOCORRO Way, SACRAMENTO
 Unit # _____
 Contract Number: 225-0930-071
 Contract Price \$ 8000.00
 CONTACT PERSON: Regina Jones
 CONTACT PHONE: (916) 663-9395
 Property Owner: WILLIAM LEONARDO MORALES
 Contractor: J.D. Jones, Roof Crafter Inc. Inc.# 435996
 Address: 100 Hidden Acres Ln.
 City/State/Zip: Sacramento CA 95833
 City/State/Zip: Newcastle, CA 95658
 Phone: (916) 924-0741
 Phone: (916) 663-9395 FAX (916) 663-9397

NATURE OF WORK: (Provide detailed description of work & indicate type of work in selections below.)

Description of Work: REMOVE EXISTING ROOF + INSTALL NEW OSB, REPAIR WITH 4X8 EIK + COMP SHINGLES.

<input checked="" type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF RESHEET <input type="checkbox"/> HOUSE # SQUARES 39 <input type="checkbox"/> GARAGE # SQUARES 2 # of SITES 3+ Initial: J.D. EIK 40 yr comp. (Shingles)	<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 system <input type="checkbox"/> Roof mount <input type="checkbox"/> Coil-in <input type="checkbox"/> Heat pump or elect. unit 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"/> Relocate <input type="checkbox"/> New	<input type="checkbox"/> DRY ROT OR TERMITTE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Mud sill/Studs <input type="checkbox"/> Exterior	<input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Replacement

Value of duct work: \$ _____
 Equipment: \$ _____
 Cur-in: \$ _____

* NOTE: Correction Notice items will require an additional building permit.

* Design Review approval may be required.

Design Review approval may be required.

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

FEE SUMMARY
FOR PERMIT #0404567

Bldg Minor Permit
as of 03-30-2004 Permit Status: READY

Site Address: 1172 SOCORRO WY SAC
Parcel No: 225-0930-071
Thomas Bros: 277D5

CONTRACTOR
J.D JONES ROOF CRAFTER
100 HIDDEN ACRES
NEW CASTLE CA 95658
Phone: 916-663-9395

OWNER
MILLER FAM. TRUST
1172 SOCORRO WY
SACRAMENTO CA 95833
Phone: 924-0741

ARCHITECT

Phone: ..

**Nature of Work: T/O,RESHEET, & RROOF 1 STORY HS W/29 SQS 40 YR LAMINATED
DIMENSIONAL COMP. NO OTHER WK**

Permit Valuation: \$8,000.00
Square Footage: 0

Building Permit	\$175.00	Water Development Fee:	\$0.00
Strong Motion Fee	\$0.80	Sewer Development Fee:	\$0.00
City Bus Oper Tax.....	\$3.20	Regional Sanitation Fee.:	\$0.00
Technology Fee	\$7.00	Pocket Area Road	\$0.00
Housing Surcharge	\$0.00	SAFCA Fee	\$0.00
Res Const Tax	\$0.00	North Natomas	\$0.00
Penalty Fee	\$0.00	FBA-Jacinto Creek	\$0.00
Inspections	\$0.00	Refund	\$0.00
Replace Cards	\$0.00		
Renewal Fee	\$0.00	Additional Fees	\$0.00
Water Meter Fee	\$0.00		
		TOTAL FEES	\$186.00
		Payments	\$0.00
		BALANCE DUE	\$186.00

PAID
CITY OF SACRAMENTO
DEPARTMENT OF PERMIT SERVICES

MODE = MEMORY TRANSMISSION START=MAR-30 10:06 END=MAR-30 10:18

FILE NO.=242

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK	8	96639397	003/003	00:01:58

-CITY OF SACRAMENTO -

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

Mar 26 04 04:18p Regina Jones 8166639397 P.2

IN PROGRESS INSPECTION REQUIRED

Roof Cratter

2022

Building Permit

4R

ISSUED



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

Permit No: 04-04567
 Date Issued: 3/26/04
 Total Amount: 78,800.00
 Sacramento Building Division

MAR 30 2004
 Sacramento Building Division

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

Site Address: 1172 SUCORRO WY
 Nature of Work: REPAIRING 4042 LAM DIACAMP
NO OTHER WORK

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COUNTY SANITARIUM DISTRICT 1
 MENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
 PERMIT AND CALCULATION

PAID
 04/25/2004

#13162

LOCATION NO. 1171 OF SACRAMENTO BLDG PERMIT NO. 040000072
 GENERAL INFORMATION THIS PERMIT GOOD ONLY WHEN
 VALIDATED BY THE CASHIER

THIS PERMIT TO CONNECT EXPIRES
 ONE YEAR FROM DATE OF ISSUANCE

FEE CALCULATION		BUILDING USE	
SECTION		RESIDENTIAL	SF U MF U
01-000-0000	\$ 6,000		
02D-000	\$ 2,214		
CONSTRUCTION			
FEU		3,652 SQ. FT.	
		PERMIT SHEET	
TOTAL FEE	\$ 8,214		

PN: 237 - 0001 - 000 - 044

DESCRIPTION/ DIVISION LOT:

PROPERTY ADDRESS 4100 MORTGAGE BLVD

OWNER FIVE BECKER MORTGAGE LLC

LEGAL ADDRESS

CITY-STATE-ZIP PHONE

ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.

APPLICANT SIGNATURE *[Signature]*

CONSOLIDATED UTILITY BILLING USE ONLY

BT _____ INPUT _____ START _____

RECEIPT