



# FAXBACK PERMIT APPLICATION

(certain restrictions apply)

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:

Job Address: 1548/1550 51st Street  
Parcel Number: 008-074-019  
Contract Price \$ 12,500.00  
Unit #

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

CONTACT PERSON: George Coffey License # 494472  
 Property Owner: Marco Affonso  
 Address: 5621 Clarendon Way  
 City/State/Zip: Sacramento 95815  
 Phone: 952 9710 FAX 646 4242

NATURE OF WORK: (Provide detailed description of work & indicate type of work in selections below.)  
 REMOVE old roofs, sheet w/ OSB, install 40 yr dimensional composition

<input checked="" type="checkbox"/> REROOF (excluding tile) <input checked="" type="checkbox"/> TEAR-OFF RESHEET <input checked="" type="checkbox"/> HOUSE # SQUARES 30 x 30 <input checked="" type="checkbox"/> GARAGE # SQUARES 2 x 3+ Material: 40 yr dimensional comp	(Residential ONLY) <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"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to get. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describe below): Value of duct work: \$ Equipment: \$ Cut-in: \$ * Design Review approval may be required.	(Residential ONLY) <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"/> Retrofit <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"/> Exterior <input type="checkbox"/> Mud/sill/Studs <input type="checkbox"/> * Design Review approval may be required. <input checked="" type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMOUD <input type="checkbox"/> FG&E NOTE: Contraction Notice Items will require an additional building permit.	(Residential ONLY) 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 <input type="checkbox"/> Water Service <input type="checkbox"/> Sewer Service <input type="checkbox"/> Gas Line <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste
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