

CITY OF SACRAMENTO  
CASHIER'S WORKSHEET

RECEIPT NUMBER: R0413201

TRANSACTION DATE: 08/06/2004  
TRANSACTION AMOUNT: 80.20  
NOTATION:

*George*  
*808-5351*

APD #: 0412704  
SITE ADDRESS: 2328 PIERCY WY SAC  
PARCEL: 252-0041-019

**ISSUED**

TYPE: Bldg Minor Permit  
SUB-TYPE: RES  
HOUSING: N  
STATUS: ISSUED

Mixed Income Housing  
Fee Program  
??

AUG 06 2004

Sacramento Building Division

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Credit C	TEETER	80.20

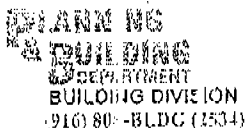
RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	75.00	.00	75.00
206	City Business Oper Tax	1730	2.20	.00	2.20
259	Technology Surcharge	1750	3.00	.00	3.00

**PAID**  
CITY OF SACRAMENTO  
AUG 06 2004  
NEIGHBORHOODS PLANNING  
AND DEVELOPMENT SERVICES

City of Sacramento

Building Permit ISSUED



Inspection Request # (916) 264-7622

Permit No: 04-12794
Date Issued: 8/6/04
Total Amount: \$ 80.20
Insp Area #: 4R

AUG 06 2004
Sacramento Building Division

Site Address: 2328 Pierce Wy
Nature of Work: Trenchless Sewer ON SITE ONLY

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. 2097, 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: 30 License Number: 313504 Date: 8/5/04 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 Professions 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 improvement.

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: 8/5/04 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 Expiration Date: 10/2/04
Policy Number: 71300

(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 I shall become subject to the workers' compensation provisions of Section 3700 of the Labor Code. I shall forthwith comply with those provisions.

Date: 8/5/04 Applicant Signature: [Signature]

WARNING: FAIL 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 3700 OF THE LABOR CODE INTEREST AND ATTORNEY'S FEE.

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

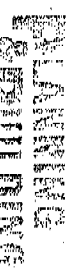
City of Sacramento

### 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.



BUILDING DEPARTMENT

BUILDING DIVISION

Fax # (916) 264-1904

Inspection Request # (916) 264-7622

Credit Card Info on File? Yes  No

RESIDENTIAL  APARTMENTS (4+ units per building)

COMMERCIAL (limited)

Permits requiring plan review are not eligible for FAXBACK

To order for processing this request, ALL of the following information MUST be provided:

Job Address: <u>2928 Purdy Way</u>	Contract Price: <u>\$5510</u>	Unit #
Parcel Number: <u>252-0041-019</u>	CONTACT PHONE: <u>4554548</u>	
CONTACT PERSON: <u>Bill Smith</u>	Contractor: <u>Agas Plumbing</u>	License # <u>318586</u>
Property Owner: <u>Bill Smith</u>	Address: <u>Agas Plumbing</u>	
Address: <u>8328 Purdy Way</u>	City/State/Zip: <u>Vallejo, CA</u>	
City/State/Zip: <u>Sacramento</u>	Phone: <u>4554548</u>	FAX: <u>4554548</u>
Phone: <u>908-8941</u>		

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

ON SITE ONLY  
Plumbing Sewer

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> GARAGE <input type="checkbox"/> HOUSE # SQUARES # Stories: 1 2 3+	<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 removed <input type="checkbox"/> Cut-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"/> Minor Electric and/or Minor PLUMBING <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input checked="" type="checkbox"/> Re-wire <input type="checkbox"/> Replacement
<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"/> Wall furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describe below)	<input type="checkbox"/> DRY ROT OR TERMITES DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Mud/silt/Studs	<input checked="" 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

Value of duct work: \$ \_\_\_\_\_ Equipment: \$ \_\_\_\_\_ Cut-in: \$ \_\_\_\_\_

Design Review approval may be required.

NOTE: Corrosion Resistor feature will require an additional building permit.

Minor Electrical Permit required 2008103

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

**FEE SUMMARY**  
**FOR PERMIT #0412704**

**Bldg Minor Permit**  
 as of 08-06-2004 Permit Status: **READY**

**Site Address: 2328 PIERCY WY SAC**  
 Parcel No: 252-0041-019  
 Thomas Bros: 278C2

CONTRACTOR  
 ACE PLUMBING  
 4405 FRANKLIN BLVD.  
 SACRAMENTO CA 95820  
 Phone: 916-455-4548

OWNER  
 SMITH BILL D & MILDRED L  
 2328 PIERCY WY  
 SACRAMENTO CA 95838  
 Phone: 916-925-8741

ARCHITECT  
  
  
 Phone:

**Nature of Work: TRENCHLESS SEWER LINE REPLACEMENT ON SITE ONLY**

Permit Valuation: \$5,510.00  
 Square Footage: 0

**Fee Details**

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**TOTAL FEES .....: \$80.20**  
**Payments .....: \$0.00**  
  
**BALANCE DUE .....: \$80.20**

**PAID**  
**CITY OF SACRAMENTO**  
 AUG 06 2004  
 NEIGHBORHOODS PLANNING  
 AND DEVELOPMENT SERVICES

MODE = MEMORY TRANSMISSION

START=AUG-06 10:32

END=AUG-06 10:34

FILE NO.=687

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK	2	94556380	004/004	00:02:10

-CITY OF SACRAMENTO -

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

## CITY OF SACRAMENTO CASHIER'S WORKSHEET

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*George 808-5351*

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