

CITY OF SACRAMENTO

Permit No: 9716086

1231 I Street, Sacramento, CA 95814

Insp Area: 2

Site Address: 1744 SHERWOOD AV SAC

Sub-Type: RES

Parcel No: 0170143030

Housing (Y/N): N

CONTRACTOR

WERNER AND SONS
3479 ORANGE GROVE
NORTH HIGHLANDS, CA
Phone: 916-971-9716

95660

OWNER

ASHLEY HUGH TAYLOR/LISA MAR
1744 SHERWOOD AV
SACRAMENTO CA
Phone:

95822

ARCHITECT

Phone:

Nature of Work: HVAC PKG GROUND MOUNT CHANGE OUT

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 RC20 License Number 406961 Date 12-10-97 Contractor Signature *Patrick*

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 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 or 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 or 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.

Date 12-10-97 Applicant/Agent Signature *Patrick*

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 *Wesserman* Policy Number *WC10291549*

____ (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 12-10-97 Applicant Signature *Patrick*

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.



CITY OF SACRAMENTO
DEPARTMENT OF PLANNING & DEVELOPMENT

BUILDING INSPECTIONS DIVISION
1231 I ST., ROOM 200, SACTO. CA 95819

PERMIT SERVICES SECTION
(916)264-7619 FAX 264-7046

REQUEST FOR PERMIT REFUND

Job Address: 1744 SHERWOOD AVE.
Date Requested: 12-25-97 Received By: J. Bond Permit No: 9716086 R
Permit type: HVAC
Reason for Refund: JOB CANCELLED
Contractor: WERNER AND SONS Owner: LISA ASHLEY
Address: 3479 ORANGE GROVE Address: 1744 SHERWOOD AVE
City: NORTH HIGHLANDS CA. Zip: 95660 City: SACTO. CA. Zip 95822
Phone: (916) 971-9716 Phone: _____
Refund Recipient: CONTRACTOR OWNER Attn: PAT

ORIGINAL JOB COPY REQUIRED FOR REFUND (SCC SECTION 9.01.051)

FEES PAID		FEES TO BE REFUNDED		PERMIT SERVICES USE ONLY	
Permit Value	<u>4450⁰⁰</u>	Adj. Value	<u>4450⁰⁰</u>	Job Card Att:	<input checked="" type="checkbox"/>
BPF pd	<u>187⁰⁰</u>	BPF	<u>187⁰⁰</u>	App. Book Marked:	<input checked="" type="checkbox"/>
PC/PPF pd	<u>19⁰⁰</u>	PC/PPF	<u>0</u>	Permit Cancelled:	<input checked="" type="checkbox"/>
SMI pd	<u>0</u>	SMI	<u>0</u>	Supp. Paper Work:	<input checked="" type="checkbox"/>
CBL pd	<u>178</u>	CBL	<u>178</u>	Letter Mailed:	<input type="checkbox"/>
Tech pd	<u>824</u>	Tech	<u>824</u>		
Other	_____	Other	_____		
Other	_____	Other	_____		
Other	_____	Other	_____		
Other	_____	Other	_____		
Other	_____	(Comm/Res Admin)	<u>(-30.00) (-50.00)</u>		
Other	_____	Total Refund Amt.	<u>167⁰²</u>		
Total P.J.	<u>216⁰²</u>				

Refund Approved By: [Signature] Date: 2 12 98

ALLOW 30 DAYS FOR PROCESSING
cc: Bill Nagel