

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0510002

Insp Area: 2

Thos Bros: 317B2

Site Address: 4130 MULBERRY LN SAC

Parcel No: 016-0063-002

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR

OWNER

KOTANI STEVE H/CINDY G
4130 MULBERRY LN
SACRAMENTO, CA 95822

ARCHITECT

Nature of Work: PAPERLESS PERMIT- Replace Water Heater With TANKLESS. Replace Water Closet, sink & Plumbing in Bathr
Replace Plumbing in Laundry Room.

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 License Number Date Contractor 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 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 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 7/8/05 Owner Signature [Signature]

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city represents, and the city represents, and the city represents, and the city represents, and the city represents,
measurements and locations shown on the application or accompanying drawings and that the improvements 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 7/8/05 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 Policy Number Exp Date

(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 7/8/05 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.



0510002
CITY OF SACRAMENTO

www.cityofsacramento.org
Help Line: 1-916-808-5656 OR 1-888-E2-PERMIT
Inspector Request: 1-916-808-7622

Downtown Permit Center
1231 I Street, Suite 200
Sacramento, CA 95814
North Permit Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834

Fax # 916-264-1901

MINOR PERMIT APPLICATION

Date: 7/8/05

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

Permits requiring Plan Review are not eligible for the MINOR PERMIT PROGRAM
Design Review and Historic Preservation approval may be required if job address is located in those areas (additional forms may be required)

IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDED:

Job Address: 4130 Mulberry Lane
Bldg Type: RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)
CONTACT INFO Name: Cindy + Steve Kotani Phone #: 443-9023 Unit # Contract Price \$1500.00
Property Owner: Steve H. + Cynthia S. Kotani Email: kbobacco@comcast.net License #:
Address: 4130 Mulberry Lane
City/State/Zip: Sacramento, CA 95822
City/State/Zip: Address:
Phone: (916) 443-9023 Phone: City/State/Zip: Address:
Fax: Registration #

Nature of Work: Provide description of work & indicate type of work in selections below.

Pre-Registered?	YES	NO	Registration #
-----------------	-----	----	----------------

Description of Work: Replace old pipes with copper, replace water heater, replace sink + toilet in 1/2 bath room. Repaired plumbing and gas.

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: _____ # Squares: _____ 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	<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: \$ _____	<input checked="" type="checkbox"/> Water Heater (Residential Only) <input type="checkbox"/> Electric <input checked="" type="checkbox"/> Gas <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input checked="" type="checkbox"/> New (Tankless)	<input checked="" 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 checked="" type="checkbox"/> Re-plumb <input checked="" 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.
---	--	--	---	---

Office Use Only: Parcel #: Date Received: Date Issued: Processor's Initials: Permit #: