

# CITY OF SACRAMENTO CASHIER'S WORKSHEET

\*COPY\* 05/24/2005

RECEIPT NUMBER: R0509072

TRANSACTION DATE: 05/24/2005  
TRANSACTION AMOUNT: 78.83  
NOTATION:

APD #: **0507307**  
SITE ADDRESS: 583 LEEWARD WY SAC  
PARCEL: 030-0560-016

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

Mixed Income Housing  
Fee Program  
??

**TRANSACTION LIST**

Type	Method	Description	Pymt Amount
Payment	Cash		78.83

**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	.24	.00	.24
213	General Plan Surcharge	1760	.59	.00	.59
259	Bldg-Technology Surcharg	1750	3.00	.00	3.00

**PAID**  
CITY OF SACRAMENTO

**ISSUED**

MAY 24 2005

Sacramento Building Division

City of Sacramento

Building Permit



PLANNING & BUILDING DEPARTMENT BUILDING DIVISION (916) 808-BLDG (2534)

Inspection Request # (916) 264-7622

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

ISSUED

Permit No: 0507307 Date Issued: 5/23/05 Total Amount: 78.85 Insp Area #: ZR

MAY 24 2005 Sacramento Building Division

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

Site Address: 583 Leewood Way Nature of Work: Condenser C/O

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 420 License Number 829856 Date 5/23/05 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 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 abovementioned property for inspection purposes.

Date 5/23/05 Applicant/Agent 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: Stek Comp? Policy Number 130000691-04 Expiration Date 12/01/05

(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 5/23/05 Applicant 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.

PBF10004



**CITY OF SACRAMENTO**  
**PLANNING & BUILDING DEPARTMENT**  
 BUILDING DIVISION  
 www.cityofsacramento.org

Help Line: 1-916-264-5656 OR 1-800-EZ-PERMIT  
 Inspection: 1-916-808-4677

Downtown Permit Center 1-916-264-6807  
 1231 I Street, Suite 200, Sacramento, CA 95814

North Permit Center 1-916-808-2354  
 2101 Arena Blvd, Suite 200, Sacramento, CA 95834

Fax # 916-264-1901



0507307

**FAXBACK PERMIT APPLICATION**  
 (certain restrictions apply)

Faxed request must be received in this office by 3:00 P.M. to 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 fee.

Permits requiring plan review are not eligible for FAXBACK

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

030-0560-016

Credit Card Information on File?  Yes  No

Job Address: 583 Leonard Way

Contact Person: Zak Kiegel

Property Owner: Mrs. Larson

Address: 583 Leonard Way

City/State/Zip: Sacramento CA 95831

Phone: 916 424-6577

Unit #  Residential  Apartments (4+ units per building)  Commercial (limited)

Contact Phone: 916 784-6525

Contractor: Ray O. Cook Co. (829836)

Address: 889 Riverside Ave Suite C

City/State/Zip: Roseville CA 95678

Phone: (916) 784-6525

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

Description of Work: Condenser e/c

<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 checked="" 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: \$ 6000 Cut-in: \$ _____	<input type="checkbox"/> Water Heater (Residential Only) <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 (Describe Locations Below)	<input 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 type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> Public Utilities Safety Inspection (Residential and single apartment units Only) <input type="checkbox"/> SM/UD <input type="checkbox"/> PG&E ◆ NOTE: Correction Notice items will require an additional building permit.
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PBF-10002

TRANSMISSION VERIFICATION REPORT

TIME : 05/24/2005 09:44  
 NAME : CITY OF SACRAMENTO  
 FAX : 9168085543  
 TEL : 9168085656  
 SER.# : BROH4J832840

DATE, TIME : 05/24 09:42  
 FAX NO./NAME : 97846535  
 DURATION : 00:01:24  
 PAGE(S) : 03  
 RESULT : OK  
 MODE : STANDARD  
 ECM

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