

Building Permit

City of Sacramento



BUILDING DIVISION (916) 808-BLDG (2534)

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

ISSUED

JUL 30 2002

Permit No: 0210249
Date Issued: 7/30/02
Total Amount: 184.72

Sacramento Building Division

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

Site Address: 3151 Cloudview Dr
Nature of Work: replace gas split system

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 C20HIC License Number 327383 Date 7/29/02 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 contractor(s) for the construction, alteration, repair, or addition of projects with a contractor(s) 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 am exempt under Sec. B & PC for this reason

Date Owner Signature

SMOKE DETECTORS ARE REQUIRED WHEN ALTERATIONS, REPAIRS OR ADDITIONS REQUIRING A PERMIT ARE IN EXCESS OF \$1,000 OR WHEN ONE OR MORE SLEEPING ROOMS ARE ADDED OR CREATED (GROUP R)

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 7/29/02 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.

X 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:

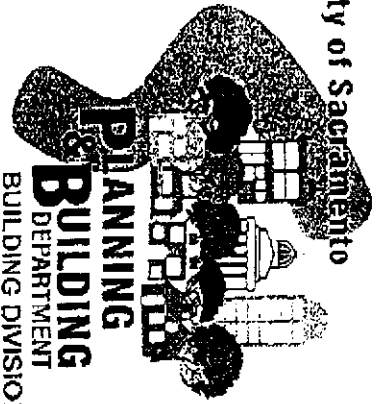
Carrier State Fund Policy Number 713-02 Expiration Date 1/03

(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 7/29/02 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.



**FAXBACK PERMIT APPLICATION**

(certain restrictions apply)

*AW*

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:

Fax # (916) 264-1901

RESIDENTIAL

APARTMENTS (4+ units per building)

COMMERCIAL (limited)

|  |                                     |        |
|--|-------------------------------------|--------|
| Job Address: 3151 Meadowview Dr Sacramento | Contract Price \$: 6800             | Unit # |
| Parcel Number: 225-0810-107                | Contractor License # 307383         |        |
| CONTACT PERSON: Loren Mulburn              | Address: 8332 Four Oaks Blvd        |        |
| Property Owner: Loren Mulburn              | City/State/Zip: Sacramento CA 95833 |        |
| Address: 3151 Meadowview Dr                | Phone: 916 944 3103                 |        |
| City/State/Zip: Sacramento CA 95833        |                                     |        |
| Phone: 916-941-5863                        |                                     |        |

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

Description of Work: *Replace gas split system*

**SMOKE DETECTORS ARE REQUIRED WHEN ALTERATIONS, REPAIRS OR ADDITIONS REQUIRING A PERMIT ARE IN EXCESS OF \$1,000 OR WHEN ONE OR MORE SLEEPING ROOMS ARE ADDED OR CREATED (GROUP R)**

|  |   |  |   |   |  |  |
|--|---|--|---|---|--|--|
| <input type="checkbox"/> REROOF (excluding tile)<br><input type="checkbox"/> TEAR-OFF<br><input type="checkbox"/> RESHEET<br><input type="checkbox"/> GARAGE<br><input type="checkbox"/> HOUSE # SQUARES<br># Stories: 1 2 3+<br>Material: | <input checked="" type="checkbox"/> HVAC INSTALLATIONS<br><input type="checkbox"/> NEW <input type="checkbox"/> CHANGE-OUT<br><input type="checkbox"/> Heat Pump<br><input type="checkbox"/> Package<br><input checked="" type="checkbox"/> Split system<br><input type="checkbox"/> Roof mount<br><input type="checkbox"/> Cut-in<br><input type="checkbox"/> Heat pump or elect. unit to gas.<br><input type="checkbox"/> Wall furnace<br><input type="checkbox"/> Fire Place Insert<br><input type="checkbox"/> Other (describe below) | <input type="checkbox"/> WATER HEATER<br><input type="checkbox"/> GAS<br><input type="checkbox"/> ELECTRIC<br><input type="checkbox"/> Change-out<br><input type="checkbox"/> Electric to Gas<br><input type="checkbox"/> Relocate<br><input type="checkbox"/> New | <input type="checkbox"/> DRY ROT OR TERMITES DAMAGE REPAIR<br><input type="checkbox"/> Flooring/Joists<br><input type="checkbox"/> Roof Structure<br><input type="checkbox"/> Mud/Sill/Studs<br><input type="checkbox"/> Exterior<br><input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION *<br>(Residential and single apartment units ONLY)<br><input type="checkbox"/> SMUD<br><input type="checkbox"/> PG&E | <input type="checkbox"/> SIDING<br><input type="checkbox"/> Wood<br><input type="checkbox"/> T-111<br><input type="checkbox"/> Horiz<br><input type="checkbox"/> Vinyl<br><input type="checkbox"/> Stucco | Value of duct work:<br>Equipment: \$<br>Cut-in: \$ | <input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING<br><input type="checkbox"/> Electric Service Change # amps<br><input type="checkbox"/> New electric circuits<br><input type="checkbox"/> Re-wire<br><input type="checkbox"/> Replacement<br><input type="checkbox"/> Water Service<br><input type="checkbox"/> Sewer Service<br><input type="checkbox"/> Gas Line<br><input type="checkbox"/> Re-plumb<br><input type="checkbox"/> Water<br><input type="checkbox"/> Waste |
|--|---|--|---|---|--|--|

\* Design Review approval may be required.

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\*NOTE: Correction Notice items will require an additional building permit.

IVR Faxback Permit updated 12/09/01

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

**\*\*PRELIMINARY\*\***  
**FEE SUMMARY**  
**FOR PERMIT #0210249**

**Bldg Minor Permit**  
as of 07-30-2002 Permit Status: **APPLIED**

Site Address: **3151 CLOUDVIEW DR SAC**  
Parcel No: 225-0810-107  
Thomas Bros: 277 B5

**CONTRACTOR**  
VALLEY HEATING AND AIR  
8232 FAIR OAKS BLVD  
CARMICHAEL CA 95608  
Phone: 916-944-3723

**OWNER**  
HOWE GUY WILLIAM & LOREN L MILBURN  
3041 CLOUDVIEW DR  
SACRAMENTO CA 95833  
Phone: 916-921-5863

**ARCHITECT**  
  
Phone:

**Nature of Work:** HVAC CHANGE OUT SPLIT SYSTEM. DESIGN REVIEW AREA.

Permit Valuation: \$6,800.00  
Square Footage: 0

|                         |          |                           |                 |
|-------------------------|----------|---------------------------|-----------------|
| Building Permit .....   | \$175.00 | Water Development Fee :   | \$0.00          |
| Strong Motion Fee ..... | \$0.00   | Sewer Development Fee :   | \$0.00          |
| City Bus Oper Tax.....  | \$2.72   | Regional Sanitation Fee.. | \$0.00          |
| Technology Fee.....     | \$7.00   | Pocket Area Road .....    | \$0.00          |
| Housing Surcharge ..... | \$0.00   | SAFCA Fee.....            | \$0.00          |
| Res Const Tax.....      | \$0.00   | North Natomas.....        | \$0.00          |
| Penalty Fee.....        | \$0.00   | FBA-Jacinto Creek.....    | \$0.00          |
| Inspections .....       | \$0.00   | Refund .....              | \$0.00          |
| Replace Cards .....     | \$0.00   |                           |                 |
| Renewal Fee.....        | \$0.00   | Additional Fees .....     | \$0.00          |
| Water Meter Fee .....   | \$0.00   |                           |                 |
|                         |          | <b>TOTAL FEES.....:</b>   | <b>\$184.72</b> |
|                         |          | Payments.....:            | \$0.00          |
| <b>**PRELIMINARY**</b>  |          | <b>BALANCE DUE .....</b>  | <b>\$184.72</b> |

MODE = MEMORY TRANSMISSION

START=JUL-29 21:14

END=JUL-29 21:18

FILE NO.=691

| STN NO. | COMM. | ONE-TOUCH/ ABBR NO. | STATION NAME/EMAIL ADDRESS/TELEPHONE NO. | PAGES   | DURATION |
|---------|-------|---------------------|--|---------|----------|
| 001     | OK    |                     | 99443053                                 | 003/003 | 00:03:56 |

-CITY OF SACRAMENTO -

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

FROM : VALLEY HEATING & AIR FAX NO. : 916 944 3053 Jul. 29 2002 08:41AM P4

### Building Permit



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

Permit No: 0210249  
 Date Issued: 7/30/02  
 Total Amount: 124.72 Sacramento Building Division

**JUL 30 2002**

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

Site Address: 3151 Clarendon Dr  
 Nature of Work: replace gas split system

\*\*\*\*\*  
**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: C20110 License Number: 327383 Date: 7/29/02 Signature: [Signature]

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 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  
 Policy Number: 713-02 Expiration Date: 1/03

(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.

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