

IN PROGRESS INSPECTION REQUIRED

Building Permit

City of Sacramento



BUILDING DIVISION
(916) 808-BLDG (2534)

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

ISSUED

Permit No: 0400264
Date Issued: 1-8-04
Total Amount: 191.50

JAN 08 2004
Sacramento Building Division

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

Site Address: 422 S Street
Nature of Work: Remove 3x00fs. / install OSB. /
Re-roof 304R dim. / install new edge gutters

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 C39 License Number 782191 Date 1-7-04 Signature Garol Urzarte

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 1-7-04 Applicant/Agent Signature Garol Urzarte

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.

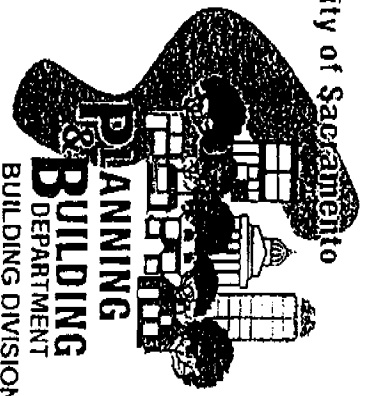
I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:
Carrier Combined Specialty Ins. Co. (Virginia Surety Co.)
Policy Number 005-0001055-5284 Expiration Date 01-01-05

(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 1-7-04 Applicant Signature Garol Urzarte

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.



Fax # (916) 264-1901

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.

FAXBACK PERMIT APPLICATION

(certain restrictions apply)

Design Renewal Area

0400266

Permits requiring plan review are not eligible for FAXBACK

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

RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

Job Address: 422 S Street	Contract Price \$ 19000-	Unit #
Parcel Number: 009-0054-008	CONTACT PHONE: 451-7286	
CONTACT PERSON: Carol	Contractor: Curtis Roofing License #782191	
Property Owner: Sam Azoube	Address: 1475 14th Avenue	
Address: 1424 43rd St.	City/State/Zip: Sacramento CA 95820	
City/State/Zip: SAC 95820	Phone: 916-451-7286	FAX: 451-1228
Phone: 916-739-6867		

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

Description of Work: *Remove 3 layers roofing install OSB Reroof 30 yr. dim. Comp over 30# roof. install new roof gutters job to be submitted*

<input checked="" type="checkbox"/> REROOF (excluding tile) <input checked="" type="checkbox"/> TEAR-OFF <input checked="" type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES 30 <input type="checkbox"/> GARAGE # SQUARES 8 1/2 Pkts <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 <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 mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Fire Place Insert <input type="checkbox"/> Other (describe below)	<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"/> DRY ROT OR TERMITTE DAMAGE REPAIR <input type="checkbox"/> Floating/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Mudsill/Studs <input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION * <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E	<input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Replacement <input 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
* Design Review approval may be required.			
* Design Review approval may be required.			
* NOTE: Correction Notice items will require an additional building permit.			
IFR Faxback Permit updated 12/09/01			

ROOFING QUESTIONNAIRE

Applicant's name: Curtis Roofing Phone: 916 451-7286
Project Address: 422 S St.

Please check the appropriate boxes. Only check a box if it accurately and completely describes your proposed work, otherwise leave boxes blank.

1. ROOFING TYPE

a. The existing roofing material is composition shingle, wood shake or shingle, tile or metal. The new roofing material shall be:

- | <u>Existing</u> | <u>Proposed</u> | |
|--------------------------|-------------------------------------|---|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | 30 year laminated dimensional composition wood shake or shingle |
| <input type="checkbox"/> | <input type="checkbox"/> | tile |
| <input type="checkbox"/> | <input type="checkbox"/> | metal that simulates one of the above listed materials |

a. The existing roofing material is built up, foam or membrane with a roof pitch of 2:12 or less. The new roofing material shall be:

- | <u>Existing</u> | <u>Proposed</u> | |
|--------------------------|--------------------------|----------|
| <input type="checkbox"/> | <input type="checkbox"/> | Built up |
| <input type="checkbox"/> | <input type="checkbox"/> | Foam |
| <input type="checkbox"/> | <input type="checkbox"/> | Membrane |

1. GUTTERS

- a. The existing gutters are fascia gutters.
- There is no change proposed to existing gutters.
 - New fascia gutters shall be provided.
 - Gutters shall be repaired and/or replaced to match existing.
- b. The existing gutters are Ogee gutters.
- There is no change proposed to existing gutters.
 - New Ogee gutters shall be provided.
 - Gutters shall be repaired and/or replaced to match existing.
- c. There are no existing gutters.
- No new gutters are proposed.
 - New Ogee gutters shall be provided.

3. RAFTER TAILS

- a. There are no exposed rafter tails.
- b. There are exposed rafter tails.
- There is no change or cutting proposed to existing rafter tails.
 - Rafter tails shall be repaired and replaced to match existing.

By signing below, the applicant certifies that this form accurately describes the proposed work.

Applicant's signature: Carol Grunite Date: 1-20-04
no additional work

For City Staff use only Counter Staff _____

- In a DR District Meets DR criteria? Yes No (route to DR staff)
- In a P area or listed (route to P staff)
- Not in DR/P area

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

FEE SUMMARY
FOR PERMIT #0400266

Bldg Minor Permit
as of 01-08-2004 Permit Status: **READY**

Site Address: 422 S ST SAC
Parcel No: 009-0054-008
Thomas Bros: 297 B5

CONTRACTOR
CURTIS ROOFING INC
7475 14TH AVE
SACRAMENTO, CA 95820
Phone: 451-7286

OWNER
AZEVEDO MANUEL/MARY
422
SACRAMENTO CA 95814
Phone:

ARCHITECT

Phone:

Nature of Work: RES REROOF. TEAR OFF EXISTING AND RESHEET WITH OSB, 30# FELT AND 30 YR DIM COMP SHINGLE. 30 SQ. TWO STORIES. INSTALL NEW OGEE GUTTERS.

Permit Valuation: \$19,000.00
Square Footage: 0

Building Permit	\$175.00	Water Development Fee:	\$0.00
Strong Motion Fee	\$1.90	Sewer Development Fee:	\$0.00
City Bus Oper Tax	\$7.60	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		
		TOTAL FEES	\$191.50
		Payments	\$0.00
		BALANCE DUE	\$191.50

PAID
CITY OF SACRAMENTO

JAN 08 2004

NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES

MODE = MEMORY TRANSMISSION

START=JAN-08 11:54

END=JAN-08 12:01

FILE NO. =060

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK	*	94511228	002/002	00:00:54

-CITY OF SACRAMENTO -

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

Jan 07 04 04:35p

Curtis Roofing

9164511228

P. 2

IN PROGRESS INSPECTION REQUIRED

Building Permit

City of Sacramento



BUILDING DIVISION
(916) 804-BLDG (2534)

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

ISSUED

JAN 08 2004

Permit No: 0400264
 Date Issued: 1-8-04
 Total Amount: 191.50

Sacramento Building Division

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

Site Address: 422 S Street
 Nature of Work: Remove 3 roofs, install OSB
Re-roof 304K dim, install window gutters

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).
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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 C39 License Number 182191 Date 1-7-04 Signature Barclay

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I, as 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.)

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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 Combined Specialty Ins. Co. (Virginia Surety Co.)
 Policy Number 005-00018265-5282 Expiration Date 01-01-05

(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 1-7-04 Applicant Signature Barclay

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