

CITY OF SACRAMENTO

Permit No: 0602153

1231 I Street, Sacramento, CA 95814

Insp Area: 4

Thos Bros: 277H2

Site Address: 630 REGGINALD WY SAC

Sub-Type: RES

Parcel No: 237-0120-055

Housing (Y/N): N

CONTRACTOR
GUDGEL YANCEY ROOFING
5321 84TH ST
SACRAMENTO CA 95826

OWNER
EVANGELISTA NORMAN R/CHRISTIE L
630 REGGINALD WY
SACRAMENTO, CA 95838

ARCHITECT

Nature of Work: T/O & REROOF 20SQ'S WITH 30YR COMP. D.R. AREA, NEEDS INPROGRESS INSP.

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 39 License Number 589559 Date 2/22/06 Contractor Signature B. Gudgel

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 CITY OF SACRAMENTO

Date Owner Signature FEB 22 2006

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 improvement. This 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 2-22-06 Applicant/Agent Signature B. Gudgel

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 American Home Assurance Policy Number 9687167 Exp Date 10/01/2006

(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 2/22/06 Applicant Signature B. Gudgel

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.



*Wm Florence*  
**CITY OF SACRAMENTO**  
[www.cityofsacramento.org](http://www.cityofsacramento.org)  
Help Line: 1-916-808-6656 OR 1-888-EZ-PERMIT  
Inspection: 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

**ROOFING QUESTIONNAIRE**

Applicant's Name: Gudgel/Yancey Roofing Phone: 387-6900  
Project Address: 630 Reginald way Phone: 923-1151

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 will be:

- |                                     |                                     |  |
|-------------------------------------|-------------------------------------|--|
| Existing                            | Proposed                            |  |
| <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | 30 year laminated dimensional composition              |
| <input type="checkbox"/>            | <input type="checkbox"/>            | 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 |

b.  The new roofing material will be:

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

**2. 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 no existing gutters.

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

Applicant's signature: Brandy Gudgel Date: 2-22-06

FOR CITY STAFF USE ONLY Counter Staff: [Signature]

- 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 a DR or P area