

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0609911

Insp Area: 2

Thos Bros: 336G2

Site Address: 7317 RIVERWIND WY SAC

Parcel No: 031-0590-083

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR

QUALITY APPLIANCE INSTALLATION
4555 AUBURN BLVD #2
SACRAMENTO 95841

OWNER

GEOFFREY R CATHLEEN JOINT LIVING TRUST
7317 RIVERWIND WY
SACRAMENTO, CA 95831

ARCHITECT

Nature of Work: C/O GAS WATER HEATER

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: C31

License Number: 604654

Date: 7-7-06

Contractor 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 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

PAID
CITY OF SACRAMENTO
JUL 03 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 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: 7-9-06

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: EXEMPT

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.

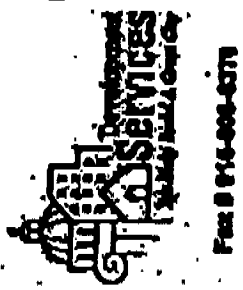
Date: 7-9-06

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.

06059911
 5789



CITY OF SACRAMENTO
 PLANNING & BUILDING DEPARTMENT
 BUILDING DIVISION
 2027 J Street, Sacramento, CA 95814
 Help Line: 1-916-408-5009 OR 1-800-52-PERMIT
 Inspection: 916-408-7022

Activity # _____
 Downtown Permit Center, New City Hall
 815 I Street, 3rd Floor, Sacramento, CA 95814
 North Permit Center
 2101 Arroyo Blvd, Suite 200, Sacramento, CA 95834
 Fax: 916-408-6378

FAXED PERMIT APPLICATION
 (certain restrictions apply)

Date: 6-26-06

Faxed request must be received in this office by 3:00 P.M. to be processed the following working day.
 Note: Contractors must have a current certificate of Worker's Compensation Insurance.

Note: Work started before a Building Permit is issued will be subject to a fine.

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

RESIDENTIAL APARTMENTS (4 units per building) COMMERCIAL (Building Unit # _____ Contract Price \$ 500 —)

Job Address: 2117 Riverwind Way
 Contact Person: Art Gionardi
 Property Owner: Geo Frew Charlew
 Address: 2117 Riverwind Way
 City/State/Zip: Sac CA 95831
 Phone: 916-408-4049
 Contact Phone: 971-8161
 Contractor: Charley Capital Union & Bakery
 Address: 5495 Chubbuck Blvd
 City/State/Zip: Sac CA 95841
 Phone: 971-8161 Fax: _____

Nature of Work: sp gr water tank
 Description of Work: sp gr water tank

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Patched <input type="checkbox"/> Flash <input type="checkbox"/> Gutter <input type="checkbox"/> Parapet <input type="checkbox"/> Square Material: <input type="checkbox"/> Shingles <input type="checkbox"/> Slate <input type="checkbox"/> Tile <input type="checkbox"/> Metal <input type="checkbox"/> Other (specify below)	<input type="checkbox"/> HVAC Installations (Mechanical 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"/> Heat pump <input type="checkbox"/> Chiller <input type="checkbox"/> Heat pump or chiller tank to gas <input type="checkbox"/> Wild fire/smoke <input type="checkbox"/> Other (specify below) Value of equipment: \$ _____ Equipment # _____ Make # _____ * Design Review approval may be required.	<input checked="" type="checkbox"/> Water Heater (Standard 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 Termite Damage Repair (Describe Location below) * Design Review approval may be required.	<input type="checkbox"/> Major Electric and/or Gas Plumbing (Standard Only) <input type="checkbox"/> Electric Service Change if 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 (Standard and high pressure water only) <input type="checkbox"/> EACUD <input type="checkbox"/> POAB * NOTE: Correction Notice items will require an additional building permit.
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