

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0112544

Insp Area: 4

Thos Bros: 257B6

Site Address: 2059 BLACKRIDGE AV SAC

Parcel No: 225-1400-036

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR

G PIERRE MARCHAL II  
P O BOX 211  
PENRYN CA 95663

OWNER

CHANDRAPPA SURESH  
2059 BLACKRIDGE AVE  
SACRAMENTO CA 95835

ARCHITECT

Nature of Work: REMOVE & REPLACE VINYL WINDOWS DMAGED BY HEAT REPLACE STUCCO AROUND WINDOWS

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.

X License Class B1 License Number 448169 X Date 9-28-01 X Contractor Signature S.P. Marchal II

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).

CITY OF SACRAMENTO

I am exempt under Sec. B & PC for this reason: SEP 28 2001

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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

X Date 9-28-01 X Applicant/Agent Signature S.P. Marchal II

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 ACCEPTANCE INDEMNITY Policy Number FW99984946 Exp Date 06/01/2002

(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.

X Date 9-28-01 X Applicant Signature S.P. Marchal II

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.



CITY OF SACRAMENTO  
 DEVELOPMENT SERVICES DIVISION  
 FAXED PERMIT APPLICATION (certain restrictions apply)  
 Fax # 916-264-1901

Faxed request must be received in this office by 3:00 p.m. to be processed the following work 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 quad fee

DATE: \_\_\_\_\_

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

RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (limited)  
 JOB ADDRESS: 2059 Blackridge Ave UNIT # \_\_\_\_\_ ⇒ CONTRACT PRICE \$ \_\_\_\_\_  
 ⇒ CONTACT PERSON: Pierre ⇒ CONTACT PHONE: 916-663-3614/257 5926

Contractor: Marchal Gen. Cont. License # 448169  
 Address: P.O. Box 211  
 City/State/Zip: Penryn CA 95663  
 Phone: 916 663 3614 FAX: 916 663-0167  
 Property Owner: Suresh Chandrappe  
 Address: 2059 Blackridge Ave  
 City/State/Zip: Sacramento, CA 95835  
 Phone: 916 419-0748

NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE <input type="checkbox"/> GARAGE #SQUARES _____ Material: _____ <input checked="" type="checkbox"/> SIDING <input type="checkbox"/> wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> vinyl <input checked="" type="checkbox"/> stucco Note: Design Review approval may be required in certain areas.	<input 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: \$ _____ Cut-in: \$ _____ Note: Design Review approval may be required for rooftop units.	<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 TERMITE DAMAGE REPAIR (Describe locations below) Note: Design Review approval may be required in certain areas.	<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"/> SMUD <input type="checkbox"/> PGE *NOTE: Correction Notice items will require an additional building permit
---	--	--	---	--

DESCRIPTION OF WORK: Remove and replace vinyl windows damaged by heat. Remove and replace around window areas. All replacements are to stucco match existing.

CITY OF SACRAMENTO - DESIGN REVIEW DISTRICTS  
PROJECT EXEMPT FROM DESIGN REVIEW  
REPAIR OR REPLACEMENT OF WINDOWS  
AND EXTERIOR DOORS

Project Address: 2059 Blackridge Ave APN: \_\_\_\_\_  
Applicant's Name: Marchel Gea. Coat. Phone: 916 663-3614  
Address: P.O. Box 211 Penryn CA.  
Property Owner's Name: Suresh Chandrappz  
Address: 2059 Blackridge Ave. SAC  
Design Review District: Expanded North Area Design Review  
Brief Description of Project: Remove & Replace windows  
damaged by heat. AS existing.

The repair, replacement and/or maintenance of windows and exterior doors in Design Review Districts are exempt from Design Review if they meet the following criteria:

1. The value of the work does not exceed one thousand dollars (\$1,000) in a 36 month period.
2. The portion of the windows and exterior doors repaired or replaced does not exceed fifty percent (50%) of the existing windows and fifty percent (50%) of the existing doors of the structure in a 36 month period.
3. The repair or replacement of windows and exterior doors shall match the design and materials existing on the structure at the time of the proposed work.
4. The project will not expand the existing structure.

I have read the criteria listed above. My project will comply with the above criteria.

*S. D. Marchel* 9-28-01  
Applicant's signature Date  
*Lindy Olager* 9/28/01  
Exemption Issued By (Staff Signature) Date

White Copy: City Planning Division  
Yellow Copy: Applicant

S:\FORMS\Counter applications\Drewindowdoor.wpd