

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

****PRELIMINARY****
FEE SUMMARY
FOR PERMIT #0313675

Bldg Minor Permit
as of 09-10-2003 Permit Status: APPLIED

Site Address: 400 SAN ANTONIO WY SAC

Parcel No: 004-0234-001

Thomas Bros: 297 H4

CONTRACTOR

CEN-CAL ROOFING & CONST
9237 CENTRAL AV
ORANGEVALE CA 95662
Phone: 916-987-9185

OWNER

KRIZMAN JOHN J/JOAN M
1045 45TH STREET
SACRAMENTO CA 95819
Phone: 628-5095

ARCHITECT

Phone:

Nature of Work: REMOVE EXIST. ROOFING, INSTALL NEW 30 YR COMP. SHINGLES, 22 SQ, 2 STORIES

Permit Valuation: \$5,314.00

Square Footage: 0

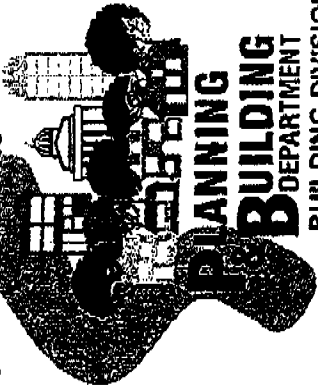
Building Permit	\$175.00	Water Development Fee:	\$0.00
Strong Motion Fee	\$0.53	Sewer Development Fee:	\$0.00
City Bus Oper Tax.....	\$2.13	Regional Sanitation Fee..	\$0.00
Technology Fee	\$7.00	Pocket Area Road	\$0.00
Housing Surcharge	\$0.00	SAFCA Fee	\$0.00
Res Const Tax	\$0.00	North Natomas	\$0.00
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 \$184.66

Payments

****PRELIMINARY** BALANCE DUE** \$184.66

AMOUNTS IN DOLLARS



**PLANNING
BUILDING
DEPARTMENT**

BUILDING DIVISION

Fax # (916) 264-1901

FAXBACK PERMIT APPLICATION

(certain restrictions apply)

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:

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

Job Address: 400 San Antonio Way, CA 95819	Contract Price \$ 3314.00	Unit #
Parcel Number: 004-0234-001	CONTACT PHONE: 825-3903	
CONTACT PERSON: George Vance	Contractor: George Vance License # 717320	
Property Owner: Joan K. Kigman	Address: 9237 Central Ave.	
Address: 1045 45th Street	City/State/Zip: Orangevale, CA 95462	
City/State/Zip: Sac. CA 95819	Phone: 987-9885 FAX: 987-9183	
Phone: 628-5055		

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

Description of Work: Tear-off 2 layers of Comp. Ins. stall 30 yr.

<input checked="" type="checkbox"/> REROOF (excluding tile) <input checked="" type="checkbox"/> TEAR-OFF RESHEET <input checked="" type="checkbox"/> HOUSE 20 # SQUARES <input checked="" type="checkbox"/> GARAGE 3+ # Stories: 2 Material: <u>Tear off Comp. Ins. replace with Comp.</u>	(Residential ONLY) <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) Value of duct work: \$ Equipment: \$ Cut-in: \$	(Residential ONLY) <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 TERMITE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Mudsill/Studs <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior * Design Review approval may be required.	(Residential ONLY) 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
<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	* Design Review approval may be required.		
* NOTE: Correction Notice items will require an additional building permit.			