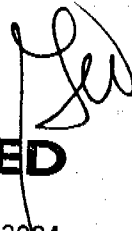


CITY OF SACRAMENTO CASHIER'S WORKSHEET

RECEIPT NUMBER: R0422308

TRANSACTION DATE: 12/08/2004
TRANSACTION AMOUNT: 190.30
NOTATION:

ISSUED



DEC 08 2004

APD #: **0419796**
SITE ADDRESS: 2500 CURTIS WY SAC
PARCEL: 013-0222-009 **Sacramento Building Division**

TYPE: Bldg Minor Permit
SUB-TYPE: RES
HOUSING: N
STATUS: **ISSUED**

Mixed Income Housing
Fee Program
??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Credit C	TEETER	190.30

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	175.00	.00	175.00
206	City Business Oper Tax	1730	2.86	.00	2.86
207	Strong Motion (SMI)	1600	.72	.00	.72
213	General Plan Surcharge	1760	4.72	.00	4.72
259	Bldg-Technology Surcharg	1750	7.00	.00	7.00

RAID
CITY OF SACRAMENTO

DEC 08 2004

**NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES**

City of Sacramento



BUILDING DIVISION (916) 808-BLDG (2534)

Building Permit

Handwritten signature and 'FAX'D' stamp

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

ISSUED

DEC 08 2004

Permit No: 0419796
Date Issued:
Total Amount: \$190.30
INSR Area: 3R

Sacramento Building Division

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

Site Address: 2500 Curtis Way
Nature of Work: Tear off shingle, install OSB and comp.

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 C-39 License Number 790945 Date 11/1/02 Signature Lisa Suggatz

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 to be 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 11/29/04 Applicant/Agent Signature Lisa Suggatz

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:

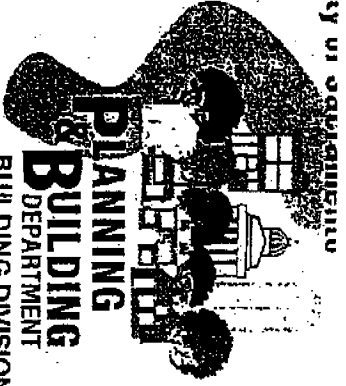
Carrier State Fund
Policy Number 285212905 Expiration Date 2/30/05

(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 11/29/04 Applicant Signature Lisa Suggatz

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.



FAXBACK PERMIT APPLICATION
(certain restrictions apply)

NOV 29 FAXD

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

BUILDING DIVISION
Fax # (916) 264-1901

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

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

Job Address: <u>2570 Curtis Way</u>	Contract Price \$ <u>7148.00</u>	Unit #
Parcel Number: <u>013-0222-0092</u>	CONTACT PHONE: <u>426-5500</u>	
CONTACT PERSON: <u>Lisa Taggart</u>	Contractor: <u>Anderson Roofing</u>	License # <u>790945</u>
Property Owner: <u>Stull Property</u>	Address: <u>233 Technology Way Unit A-7</u>	
Address: <u>2570 Curtis Way</u>	City/State/Zip: <u>Rocklin CA 95745</u>	
City/State/Zip: <u>Sacramento, CA 95817</u>	Phone: <u>426-5500</u>	FAX: <u>426-5500</u>
Phone: <u>987-1138</u>		

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

Description of Work: Tear off shingles, install OSB and comp.

<input checked="" type="checkbox"/> REROOF (excluding tile) <input checked="" type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> GARAGE # Stories: <u>1</u> # SQUARES: <u>2</u> 3+ Material: <u>Asph</u>	<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: \$	<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"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Mudsill/Studs <input type="checkbox"/> Public Utilities Safety Inspection * (Residential and single apartment units ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E	<input type="checkbox"/> MINOR ELECTRICAL 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.

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*NOTE: Correction Notice items will require an additional building permit.

NR Faxback Permit updated 12/09/01

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

**FEE SUMMARY
FOR PERMIT #0419796**

**Bldg Minor Permit
as of 11-30-2004 Permit Status: READY**

Site Address: 2500 CURTIS WY SAC

Parcel No: 013-0222-009

Thomas Bros: 317E1

CONTRACTOR

ANDERSON ROOFING
233 TECHNOLOGY WY
ROCKLIN CA 95765
Phone: 916-626-5500

OWNER

HACKETT SUSAN M
6933 WALNUT AV
ORANGEVALE, CA 95662
Phone: 916-987-1138

ARCHITECT

Phone:

Nature of Work: REROOF - TEAR OFF, RESHEET INSTALL 16 SQ COMP. 1 STROY

Permit Valuation: \$7,148.00

Square Footage: 0

Fee Details

Class #	Description	Item #	Total Fee	Prev Pymt	Balance Due
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213	General Plan Surcharge	1760	4.72	.00	4.72
259	Technology Surcharge	1750	7.00	.00	7.00

TOTAL FEES: \$190.30

Payments: \$0.00

BALANCE DUE: \$190.30

**PAID
CITY OF SACRAMENTO**

DEC 0 8 2004

**NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES**

MODE = MEMORY TRANSMISSION

START=DEC-08 11:33

END=DEC-08 11:41

FILE NO.=271

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK	*	96265506	003/003	00:01:36

-CITY OF SACRAMENTO -

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

CITY OF SACRAMENTO CASHIER'S WORKSHEET

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RAID
CITY OF SACRAMENTO

DEC 0 8 2004

**NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES**