

TRANSMISSION VERIFICATION REPORT

TIME : 08/25/2006 14:52
 NAME : CITY OF SACRAMENTO
 FAX : 9168085543
 TEL : 9168085656
 SER.# : BROH4J832840

DATE, TIME	08/25 14:50
FAX NO./NAME	93861400
DURATION	00:01:13
PAGE(S)	03
RESULT	OK
MODE	STANDARD ECM

Downtown - New City Hall
 915 I Street, 3rd Floor
 Sacramento, CA 95814

North Permit Center
 2101 Arena Blvd, Suite 200
 Sacramento, CA 95834

CITY OF SACRAMENTO

****PRELIMINARY**
 FEE SUMMARY
 FOR PERMIT #0613030**

**Bldg Minor Permit
 as of 08-24-2006 Permit Status: APPLIED**

**ISSUED
 CITY OF SACRAMENTO
 AUG 25 2006**

**DOWNTOWN PERMIT
 CENTER**

Site Address: 3950 Y ST SAC
 Parcel No: 014-0072-015
 Thomas Bros: 297G7

CONTRACTOR
 SOUTHGATE ROOFING
 P.O. BOX 292776
 SACRAMENTO, CA. 95829-2776
 Phone: 386-2401

OWNER
 WEIHING TIMOTHY M/JENNIFER N
 3950 Y ST
 SACRAMENTO, CA 95817
 Phone:

ARCHITECT

 Phone:

Nature of Work: RE-ROOF REMOVE EXISTING ROOF& INSTALL 30YR DIMENSIONAL COMP 21SQ

Permit Valuation: \$5,000.00
 Square Footage: 0

Fee Details

Class #	Description	Fee	Prev Pymt	Balance Due
200	Permit--Building-Res	175.00	.00	175.00
206	City Business Oper Tax	2.00	.00	2.00
207	Strong Motion (SMI)	.50	.00	.50
213	General Plan Surcharge	.00	.00	.00

PAID
 CITY OF SACRAMENTO
 AUG 25 2006

Building Permit



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

Permit No: 0613030
Date Issued: 8-24-06
Total Amount: 187.48

ISSUED
CITY OF SACRAMENTO
AUG 25 2006

***** Please Fill in the Following *****
Site Address: 3950 Y STREET
Nature of Work: ROOF, Removal of
Replacement 30 sq. 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. 1090, Ch. 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 am licensed in the following office:
License Class C-39 License Number 591816 Date 07/21/05 Signature [Signature]

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractor 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 to furnish a signed statement that he or she is exempt pursuant to the provisions of the Contractor License Law (Chapter 9 (commencing with Section 7000) of Division 3 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 owner of the property, or my employee with wages of their own compensation, will do the work, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code: The Contractor 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 Contractor License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor.)
I am insured under Sec. _____ B & PC for this reason: _____

Date _____ Owner Signature _____

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city affirms on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvements to be constructed does not violate any law or private agreement relating to prohibited or restricted 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 above-referenced property for inspection purposes.

Date 8/21/06 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 coverage 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 STATE FUND
Policy Number 091-2395-06 Expiration Date 1/6/10

(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 8/21/06 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.

700 (SMALL) 50748 700 (SMALL) 50748 700 (SMALL) 50748



CITY OF SACRAMENTO
 www.cityofsacramento.org
 Help Line: 1-916-808-5656 OR 1-868-EZ-PERMIT
 Inspection Request: 1-916-808-7822

Downtown Permit Center
 1291 I Street, Suite 200
 Sacramento, CA 95814
 North Permit Center
 2101 Arena Blvd., Suite 200
 Sacramento, CA 95834
 Fax # 916-264-1901

MINOR PERMIT APPLICATION

Date: 8/21/06

For web request must be received in this office by 3:00 P.M. to be processed the following workday. 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.

Permits requiring Plan Review are not eligible for the MINOR PERMIT PROGRAM

Design Review and Historic Preservation approval may be required if job address is located in those areas (additional forms may be required)

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

Job Address: 3950 Y Street Bid Type: RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)
 CONTACT INFO Name: Charlie Phone #: 916-707-8 Unit # _____ Contract Price: \$5,000
 Property Owner: Deblina Contractor: Southgate Roofing License #: 591816
 Address: 3950 Y Street Address: P.O. Box 292776
 City/State/Zip: Sacramento, CA 95817 City/State/Zip: Sacramento, CA 95829
 Phone: 916-467-3 Phone: 386-2401 Fax: 386-1400
 Pre-Registered? YES NO Registration # _____

Nature of Work: Provide description of work & indicate type of work in selections below.

Description of Work: Roof - Remove Existing roof 30 year Almansara Comp

<input checked="" type="checkbox"/> Reroof (excluding tile) <input checked="" type="checkbox"/> Tear-Off <input type="checkbox"/> Resheel <input checked="" type="checkbox"/> House Garage # Stories: <u>1</u> # Squares: <u>21</u> Material: <u>Asph/Flt Comp</u> <input type="checkbox"/> Sliding <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco	<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: \$ _____ Out-in: \$ _____	<input type="checkbox"/> Water Heater (Residential Only) <input type="checkbox"/> Electric <input type="checkbox"/> Gas <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 Termitic Damage Repair <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Mudsill/Studs <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior	<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 Inspections (Residential and single apartment units Only) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E * NOTE * Correction Notice items will require an additional building permit.
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Office Use Only:

Parcel #:

Date Received:

Date Issued:

Processor's Initials:

Permit #: