

TRANSMISSION VERIFICATION REPORT

TIME : 08/31/2006 12:18
NAME : CITY OF SACRAMENTO
FAX : 9168085543
TEL : 9168085656
SER. # : BROH4J832840

DATE, TIME 08/31 12:17
FAX NO./NAME 99789672
DURATION 00:00:56
PAGE(S) 03
RESULT OK
MODE STANDARD
ECM

Zumwalt

**CITY OF SACRAMENTO
CASHIER'S WORKSHEET**

**ISSUED
CITY OF SACRAMENTO
AUG 31 2006
DOWNTOWN PERMIT
CENTER**

RECEIPT NUMBER: R0616211
TRANSACTION DATE: 08/31/2006
TRANSACTION AMOUNT: 94.11
NOTATION:

APD #: 0612891
SITE ADDRESS: 3625 CYPRESS ST SAC
PARCEL: 251-0132-007
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	94.11

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	87.50	.00	87.50
206	City Business Oper Tax	1730	.84	.00	.84
207	Strong Motion (SMI)	1600	.50	.00	.50
213	General Plan Surcharge	1760	1.77	.00	1.77



Inspection Request # (916) 264-7622

Building Permits ISSUED CITY OF SACRAMENTO

Office Use Only

Permit No: 0612891
Date issued: 8-29-06
Total Amount: \$94,110
Insp Area #: 4

AUG 31 2006 DOWNTOWN PERMIT CENTER

Please Fill in the Following

Site Address: 3625 CYPRESS STREET SAC CA 95833
Nature of Work: REMOVE CONDO ON LEFT OF GARAGE AND BLDG. INSTALL NEW SOYR CONDO AND TOUCH DOWN

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.)

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.

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractor License Law for the following reason (Sec. 7011.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, maintain, 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 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 7011.5 by my 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 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 Professions 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 am exempt under Sec. B & PC for this reason:

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 local laws 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 mentioned property for inspection purposes.

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:

Policy Number: WCA 782000

(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.

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 3700 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

FAXBACK PERMIT APPLICATION
 (certain restrictions apply) **8612891**

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:

Fax # (916) 264-1901
 Inspection Request # (916) 264-7622
 Credit Card Info on File? Yes No

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

Job Address: **3025 CYPRESS STREET** Unit # _____
 Parcel Number: _____
 CONTACT PERSON: **TERRY NEWTON**
 Property Owner: **LAURENCE BOHNN**
 Address: **3025 CYPRESS STREET**
 City/State/Zip: **SAC 95838**
 Phone: **218-8374-1891**
 Contract Price: **2100**
 CONTACT PHONE: **978-9600**
 Contractor: **ZUMWALT & ASSOC License # 762019**
 Address: **4887 PASADENA AVE**
 City/State/Zip: **SAC CA 95841**
 Phone: **978-9600** Fax: **978-9672**

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

Description of Work: **REMOVE COMPOSITION FROM LEFT SIDE OF GARAGE ONLY AND BULK UP ROOFING FROM CONNECTING PORCH. INSTALL NEW 30 YR COMP ON GARAGE AND TORCH DOWN ROOFING ON PORCH.**

<input checked="" type="checkbox"/> REROOF (excluding tile) <input checked="" type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES 5 <input type="checkbox"/> GARAGE # SQUARES 2 <input type="checkbox"/> 3+ Material: 30 YR COMP	(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"/> Cullen <input type="checkbox"/> Heat pump or elec. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ _____ Equipment: \$ _____ Cullen: \$ _____ * Design Review approval may be required.	(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 TERMITTE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Mud/Spluds <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior * Design Review approval may be required. <input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMOUD <input type="checkbox"/> PG&E *NOTE: Correction Notice items will require an additional building permit.	(Residential ONLY) MINOR ELECTRIC and/or MINOR PLUMBING <input type="checkbox"/> Electric Service Change # amps _____ <input type="checkbox"/> New electric circuits <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 IRR Faxback Permit updated 12/09/01
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