

TRANSMISSION VERIFICATION REPORT

TIME : 08/11/2005 11:39
NAME : CITY OF SACRAMENTO
FAX : 9168085543
TEL : 9168085656
SER.# : BROH4J832840

DATE, TIME	08/11 11:38
FAX NO./NAME	93530283
DURATION	00:01:13
PAGE(S)	03
RESULT	OK
MODE	STANDARD ECM

**CITY OF SACRAMENTO
CASHIER'S WORKSHEET**

RECEIPT NUMBER: R0514870

TRANSACTION DATE: 08/11/2005
TRANSACTION AMOUNT: 78.85
NOTATION:

APD #: **0512132**
SITE ADDRESS: 159 RIVER CHASE CR SAC
PARCEL: 295-0520-006

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

Mixed Income Housing
Fee Program
??

TRANSACTION LIST

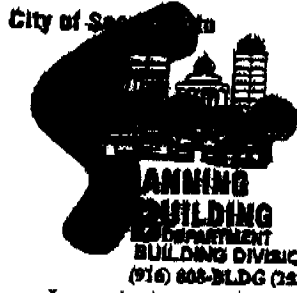
Type	Method	Description	Pymt Amount
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Payment	Cash		78.85

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Total Fee	Prev Pymt
Item #			
Current Pymt			
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PAID
CITY OF SACRAMENTO

AUG 11 2005



Building Permit

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

Permit No: 0512132
Date Issued: 8/11/05
Total Amount:
Insp Area #:

AUG 11 2005

Sacramento Building Division

KM

Inspection Request # (916) 264-7622

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

Site Address: 159 RIVERCHASE CIR
Nature of Work: Spa w/H c/o

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. 3697, 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 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 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 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, 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 project with a contractor(s) licensed pursuant to the Contractors License Law.

I am exempt under Sec. B & PC for this reason: AUG 11 2005

Date: Owner Signature: NEIGHBORHOODS, PLANNING AND DEVELOPMENT SERVICES

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 above-described property for inspection purposes.

Date: 8/10/05 Applicant/Agent 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 consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which this 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: CPS INS
Policy Number: CA 22-0030-853 Expiration Date: 4/1/06

(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: 8/10/05 Applicant 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.



FAXBACK PERMIT APPLICATION

(certain restrictions apply)

Failed 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: 159 RIVERCHASE CIRCLE
 Parcel Number: SP20
 CONTRACT PERSON: D. HOBSON
 Property Owner: RAY BUCKLEY / JIM ELLIOTT
 Address: 159 RIVERCHASE CIRCLE
 City/State/Zip: SACRAMENTO, CA 95816
 Phone: 933-8888
 CONTACT PHONE: 353-0203
 Contractor: DOMCO PLUMBING License # 826505
 Address: PO BOX 1388
 City/State/Zip: FOLSOM, CA 95763
 Phone: 353-0203
 Unit #

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

Description of Work: *with cap*

AUG 11 2005
 CITY OF SACRAMENTO

<input type="checkbox"/> REROOF (excluding tiles) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES 1 2 3+ <input type="checkbox"/> GARAGE <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	<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"/> Web furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describes below) Value of duct work: \$ Equipment: \$ Cabin: \$ * Design Review approval may be required.	<input type="checkbox"/> NEIGHBORHOODS TRAINING (Residential ONLY) <input type="checkbox"/> WATER HEATER DEVELOPMENT (Residential ONLY) <input checked="" type="checkbox"/> GAS <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocating <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITTE DAMAGE REPAIR <input type="checkbox"/> Flooding/Leak <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Mudd/Stains <input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SHAD <input type="checkbox"/> PG&E * NOTE: Corrosive Waste items will require an additional building permit.	<input type="checkbox"/> 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
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* Design Review approval may be required.