

TRANSMISSION VERIFICATION REPORT

TIME : 09/21/2005 13:07
NAME : CITY OF SACRAMENTO
FAX : 9168085543
TEL : 9168085656
SER.# : BROH4J832840

DATE, TIME 09/21 13:05
FAX NO./NAME 94523439
DURATION 00:02:07
PAGE(S) 03
RESULT OK
MODE STANDARD

**CITY OF SACRAMENTO
CASHIER'S WORKSHEET**

COPY 09/21/2005

RECEIPT NUMBER: R0518086

TRANSACTION DATE: 09/21/2005
TRANSACTION AMOUNT: 186.86
NOTATION:

ISSUED *Sc*
CITY OF SACRAMENTO
SEP 21 2005
**DOWNTOWN PERMIT
CENTER**

APD #: **0514681**
SITE ADDRESS: 9 RIVERBREA CT SAC
PARCEL: 031-0240-045

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	186.86

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Total Fee	Prev Pymt
	Current Pymt		

PAID
CITY OF SACRAMENTO
SEP 21 2005

NEIGHBORHOODS PLANNING
COMMUNITY DEVELOPMENT



Inspection Request # (916) 264-7622

Building Permit ISSUED

***** Office Use Only **CITY OF SACRAMENTO

Permit No: 0514681
 Date Issued: 9/21/05
 Total Amount: 18686 DOWNTOWN PERMIT
 Insp Area #: _____ CENTER

SEP 21 2005

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

Site Address: 9 Riverbrea Ct. Sac, CA 95831
 Nature of Work: Furnace and coil change out like for like

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, Ch. C).
 Lender's Name: NA

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 10/20 License Number 582046 Date 9/20/05 Signature [Signature]

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the provisions of Chapter 9 (commencing with section 7000) of Division 3 of the 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 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 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 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, payor, and the city or county, on the basis of the information provided, do 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 9/20/05 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 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:
 Carrier State Comp. Fund
 Policy Number 7138120-02 Expiration Date 10-01-05

(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 9/20/05 Applicant Signature [Signature]

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.

PBF10004



CITY OF SACRAMENTO
 PLANNING & BUILDING DEPARTMENT
 BUILDING DIVISION
 www.cityofsacramento.org
 Help Line: 1-916-24-5656 OR 1-866-EZ-PERMIT
 Inspection: 1-916-808-4877



Downtown Permit Center 1-916-264-6907
 1231 I Street, Suite 200, Sacramento, CA 95811

North Permit Center 1-916-808-364
 2101 Arena Blvd, Suite 200, Sacramento, CA 95834

Fax # 916-264-1901

0514681

FAXBACK PERMIT APPLICATION
 (certain restrictions apply)

Permits requiring plan review are not eligible for FAXBACK
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In order to process this request, ALL the following information MUST be provided:

Credit Card Information on File? Yes No
 Job Address: 9 Riverbrea Ct. Sac, CA 95831
 Contact Person: Warren Wright
 Property Owner: Howard Shumfaka
 Address: Riverbrea Ct.
 City/State/Zip: Sac, CA 95831
 Phone: (916) 345-7833
 Description of Work: furnace and coil change out like ceiling

Unit #: 452 2477
 Contact Phone: 452 2477
 Contractor: Garick He Service
 Address: 2122 Y St
 City/State/Zip: Sac, CA 95818
 Phone: (916) 452 2477 Fax 452-3439

Nature of Work: (Provide detailed description of work & indicate type of work in selections below)

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> T-1 or T-2 <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: _____ # Squares: _____ Material: _____ <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Shuco	<input checked="" 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"/> Head pump or elec unit to gas <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of direct work: <u>1985.00</u> Equipment: \$ _____ Cont-in: \$ _____	<input type="checkbox"/> Water Heater (Residential Only) <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"/> Drykit or Termitite <input type="checkbox"/> Darnig Repair (Describe Locations Below)	<input type="checkbox"/> Minor Electric and/or Minor Plumbing (Residential Only) <input type="checkbox"/> Electric Service Change # _____ <input type="checkbox"/> New electric circuit <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"/> Paste	<input type="checkbox"/> Public Utilities Safety Inspection (Residential and single apartment units Only) <input type="checkbox"/> SMTUD <input type="checkbox"/> PG&E ◆ NOTE: Correction Notice items will require an additional building permit.
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PBF-10002