

CITY OF SACRAMENTO CASHIER'S WORKSHEET

RECEIPT NUMBER: R0507847

TRANSACTION DATE: 05/06/2005
TRANSACTION AMOUNT: 196.10
NOTATION:

APD #: **0506358**
SITE ADDRESS: 4421 CAPRI WY SAC
PARCEL: 017-0081-015

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

Mixed Income Housing
Fee Program
??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Cash		196.10

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	5.14	.00	5.14
207	Strong Motion (SMI)	1600	1.29	.00	1.29
213	General Plan Surcharge	1760	7.67	.00	7.67
259	Bldg-Technology Surcharg	1750	7.00	.00	7.00

PAID
CITY OF SACRAMENTO
MAY 06 2005
NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES

City of Sacramento



Inspection Request # (916) 264-7622

Building Permit

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

ISSUED

Permit No: 0506356
Date Issued: 05/06/05
Total Amount: \$196.10
Insp Area #: 2

MAY 05 2005

Sacramento Building Division

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

Site Address: 4421 Capri Way
Nature of Work: Ho Shake Re Robt 3D yr o.c. comp 44 ft

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 7 of the Business and Professions Code and my license is in full force and effect. License Class 039 License Number 7603169 Date 5/5/05 Signature Alana Gonzalez

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 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) 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 5/5/05 Applicant/Agent Signature Alana Gonzalez

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 Fund Policy Number 713-04-2021 Expiration Date 10/1/05

(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 5/5/05 Applicant Signature Alana Gonzalez

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. MAY 11 2005

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

TRANSMISSION VERIFICATION REPORT

TIME : 05/06/2005 09:55
 NAME : CITY OF SACRAMENTO
 FAX : 9168085543
 TEL : 9168085656
 SER.# : BROH4J832840

DATE, TIME 05/06 09:53
 FAX NO./NAME 94553784
 DURATION 00:01:43
 PAGE(S) 04
 RESULT OK
 MODE STANDARD
 ECM

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