

CITY of Sacramento



FAXBACK PERMIT APPLICATION

(certain restrictions apply)

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 grad 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)

Credit Card Info on File? Yes No

Fax # (916) 264-1901

Inspection Request # (916) 264-7622

Job Address: 2416 37th Ave Sacramento Ca 95822 Unit # --

Parcel Number: CONTRACT PRICE \$

CONTACT PERSON: *Darrin Wright* CONTRACTOR PHONE: (916) 452-2477

Property Owner: *Bruce Ferrandez* Contractor: *Garick A/C Svcs* License # *5822046*

Address: *2416 37th Ave* Address: *2122 X ST*

City/State/Zip: *Sacramento Ca 95822* City/State/Zip: *Sacramento Ca* Phone: (916) 452-2477 FAX: 916 452-2437

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

Description of Work: *Kitchen package gas heat electric cook's w/ installation of ductwork.*

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES <input type="checkbox"/> GARAGE # Stories: 1 2 3+ Material:	<input checked="" type="checkbox"/> HVAC INSTALLATIONS <input checked="" type="checkbox"/> NEW <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> Heat Pump <input checked="" type="checkbox"/> Package <input type="checkbox"/> Split system <input checked="" type="checkbox"/> Roof mount <input checked="" type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ <i>2316.00</i> Equipment: \$ <i>1250.00</i> Cut-in:	<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 <input type="checkbox"/> REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Mudslit/Studs <input type="checkbox"/> Interior <input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> PG&E <input type="checkbox"/> SNUD.	(Residential ONLY) MINOR ELECTRIC and/or MINOR 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.

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*NOTE: Correction Notice items will require an additional building permit.

IVR Faxback Permit updated 12/09/01

02/15/05