

**CITY OF SACRAMENTO**

1231 I Street, Sacramento, CA 95814

Permit No: 0405089

Insp Area: 1

Thos Bros: 297H4

Site Address: 257 36TH WY SAC

Parcel No: 004-0113-028

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR

THE TRENCHLESS CO  
3721 BUSINESS DR SUITE 200  
SACRAMENTO CA 95820

OWNER

OLVERA LEWIS M & DOREEN  
257 36TH WY  
SACRAMENTO CA 95819

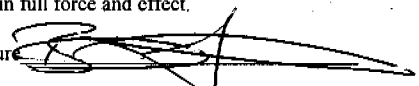
ARCHITECT

Nature of Work: SEWER LINE REPLACEMENT TRENCHLESS

**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 3 of the Business and Professions Code and my license is in full force and effect.

License Class C36 License Number 775703 Date 4/5/04 Contractor Signature 

**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(s) licensed pursuant to the Contractors License Law).

I am exempt under Sec. \_\_\_\_\_ B & PC for the 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 4/5/04 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 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:

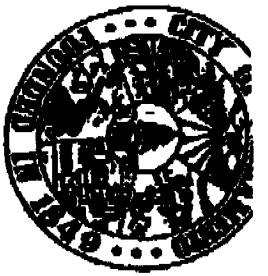
Carrier HARBOR SPECIALTY INSURANCE CO. Policy Number ADP053923-01 Exp Date 07/25/2004

(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 4/5/04 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.**



CITY OF SACRAMENTO  
 DEVELOPMENT SERVICES DIVISION  
 FAXED PERMIT APPLICATION (certain restrictions apply)  
 Fax # 916-264-1901

Request request must be received in this office by 3:00 p.m. to be processed the following work day.  
 Notes: Contractors must have a current certificate of Worker's Compensation Insurance.  
 Note: Work started before a Building Permit is issued will be subject to fines.

5089

IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDED:

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

JOB ADDRESS: 257 3LUTH STREET UNIT # \_\_\_\_\_ CONTRACT PRICE \$ 4890.00

→ CONTACT PERSON: BRIAN FITZHERPES → CONTACT PHONE: (916) 455-4433

Property Owner: LEWIS OVERA  
 Address: 257 3LUTH ST WY7  
 City/State/Zip: SACRAMENTO, CA 95819  
 Phone: \_\_\_\_\_

Contractor: THE TRENCHLESS CO. License # 775703  
 Address: 372 BUSINESS DR # 200  
 City/State/Zip: SACRAMENTO CA 95820  
 Phone: (916) 455-4433 FAX: (916) 451-4859

**NATURE OF REQUEST:** Indicates from the subsection below & provide details under description of work.

<input type="checkbox"/> REMODE (including tile) <input type="checkbox"/> TEAR-OUT <input type="checkbox"/> REPAIRS <input type="checkbox"/> ROOF <input type="checkbox"/> GUTTER SQUARE _____ MATERIAL _____	<input type="checkbox"/> HVAC INSTALLATIONS (include ONE?) <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"/> Cur-in <input type="checkbox"/> Heat pump or direct unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below)	<input type="checkbox"/> WATER HEATER (include ONE?) <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocates <input type="checkbox"/> New	<input type="checkbox"/> MINOR ELECTRICAL and/or MINOR PLUMBING (include ONE?) <input type="checkbox"/> Electric Service Change # amps _____ <input type="checkbox"/> New electric circuits <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"/> Waste	<input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Qualify and single specimen with ONE?) <input type="checkbox"/> SNUD <input type="checkbox"/> PGB
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Notes: Design Review approval may be required in certain areas.

Value of fuel work: Equipment \$ \_\_\_\_\_  
 Cost: \$ \_\_\_\_\_

Notes: Design Review approval may be required for roofing work.

Notes: Design Review approval may be required in certain areas.

TRENCHLESS SEWER LINE REPLACEMENT

4204

PERMIT NO.  
0405089

CITY OF SACRAMENTO  
2101 ARENA BLVD, #200  
BUILDING INSPECTIONS DIVISION

AREA NO.  
1

WHEN CORRECTIONS HAVE BEEN MADE, CALL 264-7622 FOR REINSPECTION OF WORK.

JOB LOCATION 257 Blk W  
Sewer Line

INSPECTION REQUESTED

THE UNDERSIGNED  BUILDING  PLUMBING  MECHANICAL  ELECTRICAL  
INSPECTOR THIS DAY INSPECTED THIS STRUCTURE FOR THE REQUESTED INSPECTION AND FOUND THE FOLLOWING VIOLATIONS OF CITY AND/OR STATE LAWS GOVERNING SAME:

1) Provide Green - sewer use ferris

2) OK to cover.

INSPECTOR

R. Anderson 808 8019

DATE

4/27/09

BUILDING INSPECTIONS 808-5716

INSPECTOR'S COPY