

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0419764

Insp Area: 2

Thos Bros: 317C3

Site Address: 1916 ARGAIL WY SAC

Parcel No: 017-0095-003

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

GREENBAUM NANCY D
1916 ARGAIL WY
SACRAMENTO, CA 95822

Nature of Work: REPAIR DRY ROTT IN WALLS, AROUND WINDOWS, IN FLOORS, PATCH STUCCO, REPAIR LEAKING PLUMBING.

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 _____ License Number _____ Date _____ 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);

NA 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.)

AA 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 11-29-04 Owner Signature [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 above mentioned property for inspection purposes.

Date 11-29-04 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 _____ Policy Number _____ Exp Date _____

NA (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 11-29-04 Applicant Signature [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.



**AUTO & HOME
INSURANCE PLUS**

Home Office:
San Mateo, CA

Coverage provided by: **CALIFORNIA CASUALTY INDEMNITY EXCHANGE**

RENEWAL

Property Policy Declarations

HOMEOWNER

NAMED INSURED(S):

SANCHEZ, NANCY D
1916 ARGAIL WAY
SACRAMENTO

CA 95822

For questions on your policy, call
800-800-9410
To report an accident or loss, call
800-800-9410

YOUR POLICY IS BILLED
TO MORTGAGE COMPANY.
Billing information will be
mailed separately.

POLICY NUMBER

201 2525919 03 02

POLICY PERIOD (As of 12:01 a.m. Standard time at the premises covered by this policy.)

Effective Expiration
09/13/04 09/13/05

THE PREMISES COVERED BY THIS POLICY IS LOCATED AT:

1916 ARGAIL WAY

SACRAMENTO

CA 95822

RATING INFORMATION:

AUTOMATIC VALUE-UP AT RENEWAL, FRAME, PRIMARY RESIDENCE, PROTECTION CLASS 02,
TERRITORY 74, \$ 500 SECTION I LOSS DEDUCTIBLE, 1 FAMILY, INSIDE CITY
LIMITS.

COVERAGE AT THE ABOVE DESCRIBED LOCATION IS PROVIDED ONLY WHERE A LIMIT OF LIABILITY IS
SHOWN OR A PREMIUM IS STATED.

SECTION I COVERAGE

LIMIT OF LIABILITY

PREMIUMS

DWELLING	\$ 182,000	\$ 1072.00
OTHER STRUCTURES	\$ 18,200	INCLUDED
PERSONAL PROPERTY	\$ 98,280	INCLUDED
LOSS OF USE	\$ 36,400	INCLUDED

SECTION II COVERAGE

PERSONAL LIABILITY	\$ 300,000 EACH OCCURRENCE	\$ 25.00
MEDICAL PAYMENTS TO OTHERS	\$ 2,000 EACH PERSON	INCLUDED

ADDITIONAL COVERAGES

HO90 WORKERS' COMPENSATION		\$ 5.00
HO314 DWELLING REPLACEMENT COST		\$ 1.00

TOTAL POLICY PREMIUM

\$ 1,103.00

LOAN #0075748988
CITIMORTGAGE INC
ITS SUCCESSORS AND ASSIGNS
PO BOX 7706
SPRINGFIELD OH 45501

Your Property policy consists of the Declarations and documents listed below. Please keep this information
for your records.

UP-426 0595 HO300CA 0595 HO996 0684 HO-290 0595 HO-216 0782
HO-90 0784 HO-314 0595 HO-322 0790

THIS POLICY DOES NOT INCLUDE BUILDING CODE UPGRADE COVERAGE.
THIS POLICY DOES NOT PROVIDE EARTHQUAKE COVERAGE

Your premium for this policy reflects the following additional coverages and discounts:

NON-SMOKER DISCOUNT