

**APPLICATION FOR COMMERCIAL BUILDING PERMIT**

CITY OF SACRAMENTO  
 PLANNING & BUILDING DEPARTMENT  
 PERMIT SERVICES SECTION  
 1231 I Street, Suite 200  
 Sacramento, CA 95814 (916) 264-7619 FAX (916) 264-7046

ACTIVITY # <b>0609490</b>	Isnp. Area <b>3</b>
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*Applicant MUST complete ALL Unshaded areas*

ADDRESS 6050 SOUTH WATT AVE Suite \_\_\_\_\_  
 PARCEL # 062-0060-099-0000

<b>CONTACT</b>		<b>LICENSED CONTRACTOR</b> Lic No. # <u>768510</u>	
Name _____	Street Address _____	Name <u>PTRS INC/PRO-TECH ROOFING SYSTEMS</u>	Address <u>6735 32 ND STREET, SUITE "J"</u>
City/State/Zip _____	Phone _____ FAX _____	City/State/Zip <u>NORTH HIGHLANDS, CA 95660</u>	Phone <u>916-332-8202</u> FAX <u>332-8212</u>
E-mail: _____		E-mail: <u>PTRSINC@SBCGLOBAL.NET</u>	
<b>ARCHITECT/ENGINEER</b>		<b>OWNER</b>	
Name <u>N/A</u>	Address <u>N/A</u>	Name <u>BYRON L YOUNGER</u>	Address <u>6050 SOUTH WATT. AVE</u>
City/State/Zip _____	Phone _____ FAX _____	City/State/Zip <u>SACRAMENTO, CA 95829</u>	Phone <u>916-383-1070</u> FAX <u>383-7582</u>
E-mail: _____		E-mail: _____	

→ Will permittee have any employees on the jobsite?  No  Yes → INSURANCE CO: \_\_\_\_\_  
 → WORKER'S COMPENSATION POLICY # \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

**NATURE OF WORK IN DETAIL: REMOVE EXISTING 4 LAYER BUR ROOF SYSTEM AND INSTALL NEW 4 LAYER BUR SYSTEM OVER ROSKU PAPER OVER EXISTING WOOD DECK. CLASS "A" SPECIFICATION IS YEAR NDL # M-N-B4 WITH PLY-6 BY CERTANTIFIED SEE ATTACHED CUT SHEET**

OCCUPANT/TENANT: WESTERN BUILDING SPECIALTIES VALUATION: \$ 65,427.00

FLOOD STATUS <u>3'</u>				S.C.A.T.						
JOB DESCRIPTION		BLDG <input type="checkbox"/>	SHELL <input type="checkbox"/>	APT <input type="checkbox"/>	TI ( ) <input type="checkbox"/>	REM ( ) <input type="checkbox"/>	SW <input type="checkbox"/>	FIRE <input type="checkbox"/>	ADD <input type="checkbox"/>	OTHER <input type="checkbox"/>
INSPECTION DISCIPLINES		BLDG	MECH	PLUMB	ELEC	SITE	FIRE			
# Stories	1 <sup>st</sup> flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File	
						SPR	ALARM			
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>		<u>D</u>	<u>PW</u>	<u>UTIL</u>

COMMENTS:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

REGIONAL SANITATION FEES?  Yes  No HEALTH DEPARTMENT?  Yes  No  
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS?  Yes  No