

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

FEE SUMMARY
FOR PERMIT #0411517
Bldg Minor Permit
as of 07-19-2004 Permit Status: READY

Site Address: **6640 FRATES WY SAC**
Parcel No: 030-0030-012
Thomas Bros: 316G7

CONTRACTOR
JIM MOYLEN
9056 LISMORE DR
ELK GROVE 95624
Phone: 916-686-6590

OWNER
TOWNSEND SR RICHARD B & JENNIE
6640 FRATES WY
SACRAMENTO CA 95831
Phone:

ARCHITECT

Phone:

Nature of Work: T/O,RESHEET,&RROOF 1 STORY HOUSE & GARAGE W/30 SQS 40 YR
DIM COMP

Permit Valuation: \$11,000.00
Square Footage: 0

Fee Details

Class #	Description	Item #	Total Fee	Prev Pymt	Balance Due
200	Permit--Building-Res	1100	175.00	.00	175.00
206	City Business Oper Tax	1730	4.40	.00	4.40
207	Strong Motion (SMI)	1600	1.10	.00	1.10
259	Technology Surcharge	1750	7.00	.00	7.00

TOTAL FEES: \$187.50
Payments: \$0.00
BALANCE DUE: \$187.50

PAY TO
CITY OF SACRAMENTO

JUL 19 2004

NEIGHBORHOOD PLANNING
AND DEVELOPMENT SERVICES

IN PROGRESS INSPECTION REQUIRED

Jim



Building Permit

PAID

CITY OF SACRAMENTO

..... Office Use Only

Permit No. 04-111517
 Date Issued. 7/19/04
 Total Amount \$187.50
 INS.P. AREA 22
 Site Address. 6640 Frates Wy
 Nature of Work RE ROOF

JUL 17 2004
 NEIGHBORHOODS PLANNING
 AND DEVELOPMENT SERVICES

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 a chapter commencing with section 7000 of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class C-39 License Number 407605 Date 7-17-04 Signature *Jim Moylen*

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7011.5, Business and Professions Code, any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure and 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 3 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 Professions 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 & P 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 verifies 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 an 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 7-17-04 Applicant/Agent Signature *Jim Moylen*

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 773697-04 Expiration Date 10-04

If 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 7-17-04 Applicant Signature *Jim Moylen*

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 3700 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

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



BUILDING DEPARTMENT
 PLANNING
 Fax # (916) 264-1901

Permits requiring plan review are not eligible for FAXBACK
 In order to process this request, ALL of the following information MUST be provided:
 Permits requiring plan review are not eligible for FAXBACK
 Contractors must have a current certificate of Worker's Compensation Insurance
 Work started before a Building Permit is issued will be subject to quad fees

RESIDENTIAL APARTMENTS (4+ units per building)

COMMERCIAL (limited)

Job Address: 6640 - Frates Way
 Parcel Number: 030-0030-012
 CONTACT PERSON: Jim Moylen
 Property Owner: Richard Frates
 Address: 6640 Frates Way
 City/State/Zip: Sacto CA
 Phone: 531-2793
 CONTRACT PRICE: \$1,000
 CONTRACT PHONE: 531-2793
 Contractor: Jim Moylen License # 407605
 Address: 9056 Lismore Dr
 City/State/Zip: Elk Grove
 Phone: 6666590 FAX: 6862606

NATURE OF WORK: (Provide detailed description of work & indicate type of work in selections below)
Remove 4041 Comp

<input checked="" type="checkbox"/> REROOF (expanding tile) <input type="checkbox"/> REAR-OFF <input checked="" type="checkbox"/> HOUSE <input checked="" type="checkbox"/> GARAGE Material: <u>4041 Dimentional Comp.</u>	<input type="checkbox"/> HVAC INSTALLATIONS <input type="checkbox"/> NEW <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Duct remove <input type="checkbox"/> Duct <input type="checkbox"/> New duct work <input type="checkbox"/> Old duct work	<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"/> Replace <input type="checkbox"/> New	<input type="checkbox"/> MINOR ELECTRICAL and/or MINOR PLUMBING <input type="checkbox"/> Electric Service Change <input type="checkbox"/> New electric <input type="checkbox"/> Service <input type="checkbox"/> Replacements <input type="checkbox"/> Water Service <input type="checkbox"/> Sewer Service <input type="checkbox"/> Gas Service <input type="checkbox"/> Ventilation
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Residential (ONLY)
 DRY ROT OR TERMITES DAMAGE REPAIR
 PUBLIC UTILITIES SAFETY INSPECTION