

CITY OF SACRAMENTO

Permit No: 0614871

New City Hall, 915 I St., 3rd Floor, Sacramento, CA 95814

Insp Area: 4  
Thos Bros: 277H1

Site Address: 651 GRACE AV SAC  
Parcel No: 237-0490-070

Sub-Type: RES  
Housing (Y/N): N

CONTRACTOR

OWNER  
LESSO JUAN  
651 GRACE AV  
SACRAMENTO, CA 95838

ARCHITECT

Nature of Work: REPLACE APPROX 160 SF T-111 SIDING

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);

LLH 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 this reason: \_\_\_\_\_

Date 9-25-06 Owner Signature Juan Lasso Huchapan

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant that the applicant has 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 9-25-06 Applicant/Agent Signature Juan Lasso Huchapan

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 \_\_\_\_\_

LLH (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 9-25-06 Applicant Signature Juan Lasso Huchapan

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 - DESIGN REVIEW DISTRICTS  
PROJECT EXEMPT FROM DESIGN REVIEW  
REPAIR OR REPLACEMENT OF EXTERIOR SIDING**

Project Address: 651 Grace Ave. APN: 237-0490-070

Applicant's Name: Juan Lasso Hufchapan Phone: (916) 565-0155

Address: 651 Grace Av.

Property Owner's Name: Juan Lasso Hufchapan

Address: 651 Grace Av.

Design Review District: Expanded North

Brief Description of Project: replace 5 sheets of existing T-1-11 siding (rain damaged) to match existing.

The repair, replacement and/or maintenance of exterior siding in Design Review Districts are exempt from Design Review if they meet the following criteria:

- ① The value of the work does not exceed one thousand dollars (\$1,000) in a 36 month period.
- ② The portion of the exterior siding repaired or replaced does not exceed fifty percent (50%) of the existing exterior siding in a 36 month period.
- ③ The repair or replacement of the exterior siding shall match the design and materials existing on the structure at the time of the proposed work.
- ④ The project will not expand the existing structure.

I have read the criteria listed above. My project will comply with the above criteria.

Juan Lasso Hufchapan 9-25-06  
Applicant's signature Date

Monica [Signature] 9.25.06  
Exemption Issued By (Staff Signature) Date

White Copy: City Planning Division  
Yellow Copy: Applicant



CITY OF SACRAMENTO

www.cityofsacramento.org
Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT
Inspection: 1-916-808-7622

New City Hall
915 I Street, 3rd Floor
Sacramento, CA 95814

North Permit Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834

OWNER BUILDER VERIFICATION

1. Check one below - I or my immediate family (parent, spouse, or child) will perform:

- A - [X] all the work authorized by this permit.
B - [ ] a portion of the work.
C - [ ] none of the work.

If B or C is checked, complete 2 or 3 below.

2. A State licensed contractor (\*) will be hired to do:

- [ ] all of the authorized work. [ ] a portion of the authorized work.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Type of Work \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Type of Work \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Type of Work \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Type of Work \_\_\_\_\_

3. [ ] I will utilize unlicensed person(s) other than my immediate family to perform all or portions of the authorized work. A Certificate of Workers Compensation must be on file at this office.

I declare under penalty of perjury that the above is true and correct. I have read and understand the owner-builder information on the reverse side of this form.

Signed: Property Owner [Signature]
(Printed name) (Signature)

Date 9-25-06 Case No. Permit No. 0614871

Job Address 651 Grace Av.

Note: \* Information regarding unknown contractors or change in subcontractors shall be submitted to the Building Inspection field office.



**CITY OF SACRAMENTO**

www.cityofsacramento.org  
 Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT  
 Inspection Request: 1-916-808-7622

New City Hall  
 -915 I Street, 3<sup>rd</sup> Floor  
 Sacramento, CA 95814  
 North Permit Center  
 2101 Arena Blvd., Suite 200  
 Sacramento, CA 95834  
 Fax # 916-808-1901

**MINOR PERMIT APPLICATION**

Date: \_\_\_\_\_

*Faxed/web request must be received in this office by 3:00 P.M. to be processed the following workday. Contractors must have a current certificate of Worker's Compensation Insurance. Note: Work started before a Building Permit is issued will be subject to quad fee.*

*Permits requiring Plan Review are not eligible for the MINOR PERMIT PROGRAM  
 Design Review and Historic Preservation approval may be required if job address is located in those areas (additional forms may be required)*

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

Bldg Type:  RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (limited)  
 Unit # \_\_\_\_\_ Contract Price 250 \_\_\_\_\_

Job Address: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

CONTACT INFO Name: \_\_\_\_\_

Property Owner: Joan Vesso Contractor: \_\_\_\_\_ License #: \_\_\_\_\_

Address: 651 Grace Av Address: \_\_\_\_\_

City/State/Zip: Sacramento ca City/State/Zip: \_\_\_\_\_

Phone: (916) 568-0455 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Nature of Work: Provide description of work & indicate type of work in selections below.  
 Pre-Registered?  YES  NO  Registration # \_\_\_\_\_

**Description of Work:**

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: _____ # Squares: _____ Material: _____ <input checked="" type="checkbox"/> Siding <input type="checkbox"/> Wood <input checked="" type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco	<input type="checkbox"/> HVAC Installations (Residential Only) <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"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: \$ _____ Equipment: \$ _____ Cut-in: \$ _____	<input type="checkbox"/> Water Heater (Residential Only) <input type="checkbox"/> Electric <input type="checkbox"/> Gas <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 Repair <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Mud/sill/Studs <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior	<input type="checkbox"/> Minor Electric and/or Minor Plumbing (Residential Only) <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 (Residential and single apartment units Only) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E * NOTE * Correction Notice items will require an additional building permit.
Office Use Only: _____	Parcel #: _____	Date Received: _____	Date Issued: _____	Permit #: _____