

**CITY OF SACRAMENTO
CASHIER'S WORKSHEET**

COPY 05/24/2005

RECEIPT NUMBER: R0509108

TRANSACTION DATE: 05/24/2005
TRANSACTION AMOUNT: 191.57
NOTATION:

APD #: **0507319**
SITE ADDRESS: 778 BOWLES ST SAC
PARCEL: 263-0204-018

TYPE: Bldg Minor Permit
SUB-TYPE: RES
HOUSING: N
STATUS: **ISSUED**

Mixed Income Housing
Fee Program
??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Cash		191.57

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	175.00	.00	175.00
206	City Business Oper Tax	1730	3.67	.00	3.67
213	General Plan Surcharge	1760	5.90	.00	5.90
259	Bldg-Technology Surcharg	1750	7.00	.00	7.00

CITY OF SACRAMENTO
BUILDING DIVISION
JLM

ISSUED

MAY 24 2005

Sacramento Building Division

City of Sacramento



Inspection Request # (916) 264-7622

Building Permit

***** Office Use Only *****

ISSUED

Permit No: 0507319
Date Issued: 5-24-05
Total Amount: \$ 170,57
Insp Area #: 4

MAY 24 2005
Sacramento Building Division

***** Please Fill in the Following *****

Site Address: 778 Bowles Street, Sacramento 95815
Nature of Work: HVAC change out like for like

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: C-20 License Number: 401509 Date: 5-23-05 Signature: [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 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(s) licensed pursuant to the Contractors License Law.

I am exempt under Sec. B & PC 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 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: 5-23-05 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: State Fund
Policy Number: 17591063-04 Expiration Date: 10/2005

(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: 5-23-05 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 3704 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

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

TOTAL P.01

HEATING AND COOLING EQUIPMENT QUESTIONNAIRE

Applicant's name: J.R. Putman, Inc. Phone: 638.2442
 Project Address: 778 Bowles Street, Sacto 95815

Please check the appropriate boxes. Only check a box if it accurately and completely describes your proposed work, otherwise leave boxes blank.

1. GROUND-MOUNTED UNIT

- a. There is an existing ground-mounted unit.
 - The existing unit shall be removed. The new unit shall be placed in the same location as the existing unit and shall not exceed the size of the existing unit by more than 25%.
 - The new unit differs in location from the existing unit.
 - The new unit is fully screened behind a solid fenced area and will not be visible from any street views.
 - Existing shrubs or buildings will screen the unit from being visible from any street views.
- b. There is no unit in the proposed location.
 - The new unit will be fully screened behind a solid fenced area and will not be visible from any street views.
 - Existing shrubs or buildings will screen the unit from being visible from any street views.

2. ROOF-MOUNTED UNIT

- a. There is an existing roof-mounted unit.
 - The existing unit shall be removed. The new unit shall be placed in the same location as the existing unit and shall not exceed the size of the existing unit by more than 25%.
 - The new unit differs in location from the existing unit. The new unit shall be screened from street views by the building with no portion of the new unit being visible from any street views.
- b. There is no existing roof-mounted unit
 - The new unit shall be screened from street views by the building with no portion of the new unit being visible from any street views

By signing below, the applicant certifies that this form accurately describes the proposed work.

Applicant's signature: J. Putman Date: 5-23-05

For City Staff use only

Counter Staff (initials)

- In a DR District Meets DR criteria? Yes No (route to DR staff)
- In a P area or listed (route to P staff)
- Not in DR/P area

0507319

North Sacramento DRD

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TOTAL P.01



FAXBACK PERMIT APPLICATION

(certain restrictions apply)

Faxed request received in this office before 3:00 p.m. will be processed the following work day. 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.

Permits requiring plan review are not eligible for FAXBACK

In order to process this request, ALL of the following information **MUST** be provided:

Job Address: 778 Bowles Street

RESIDENTIAL

APARTMENTS (4+ units per building)

COMMERCIAL (limited)

Parcel Number: _____

Contract Price \$ 9123-

Unit # _____

CONTACT PERSON: Erin Putman

CONTACT PHONE: 538-2442

Property Owner: William & Lathi Brown

Contractor: JE Putman, Inc. License # 401802

Address: 778 Bowles Street

Address: 519 Pittsburg Rd.

City/State/Zip: Sacramento, CA 95815

City/State/Zip: Panorama City, CA 91302

Phone: 916-671-1760

Phone: 818-2442 FAX: 818-1577

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

HVAC change out, like for like

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES <input type="checkbox"/> GARAGE # Stories: 1 2 3+ Material: _____		<input checked="" type="checkbox"/> HVAC INSTALLATIONS (Residential ONLY) <input type="checkbox"/> NEW <input checked="" type="checkbox"/> CHANGE-OUT <input type="checkbox"/> Heat Pump <input checked="" type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Cdn <input type="checkbox"/> Heat pump or elec unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ _____ Equipment \$ _____ Cdn: \$ _____ * Design Review approval may be required.		<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"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITTE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior * Design Review approval may be required. <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.		(Residential ONLY) <input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING <input type="checkbox"/> Electric Service Changes # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Replacement <input type="checkbox"/> Water Service <input type="checkbox"/> Sewer Service <input type="checkbox"/> Gas Line <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste IPR Feedback Permit updated 12/29/01	
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2507319

TRANSMISSION VERIFICATION REPORT

TIME : 05/24/2005 14:40
 NAME : CITY OF SACRAMENTO
 FAX : 9168085543
 TEL : 9168085656
 SER.# : BROH4J832840

DATE, TIME 05/24 14:39
 FAX NO./NAME 96382577
 DURATION 00:01:23
 PAGE(S) 07
 RESULT OK
 MODE STANDARD
 ECM

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