

CITY OF SACRAMENTO CASHIER'S WORKSHEET

COPY 03/08/2005

RECEIPT NUMBER: R0503756

TRANSACTION DATE: 03/08/2005
TRANSACTION AMOUNT: 78.89
NOTATION:

ISSUED

MAR 08 2005

Sacramento Building Division

APD #: **0503096**
SITE ADDRESS: 1901 F ST SAC
PARCEL: 003-0124-019

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

Mixed Income Housing
Fee Program
??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Credit C	TEETER	78.89

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	75.00	.00	75.00
206	City Business Oper Tax	1730	.30	.00	.30
213	General Plan Surcharge	1760	.59	.00	.59
259	Bldg-Technology Surcharg	1750	3.00	.00	3.00

PAID

CITY OF SACRAMENTO

MAR 08 2005

NEIGHBORHOOD PLANNING
AND DEVELOPMENT SERVICES

City of Sacramento



BUILDING DIVISION (916) 808-BLDG (2534)

Building Permit

ISSUED

MAR 08 2005

Sacramento Building Division

Office Use Only

Permit No: 0503096
Date Issued: 4-16-05
Total Amount: 1799.40

Please Fill in the Following
Site Address: 1901 F STREET

Nature of Work: Install water line - install only, owner to trench & provide material

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: NIA
Lender's Address: NIA

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: C36 License Number: 702292 Date: 3/7/05

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, 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) 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: 3/7/05 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 abovementioned property for inspection purposes.
Date: 3/7/05 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.
[X] 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: Stone Fund
Policy Number: 13678579
Expiration Date: 2/10/06

(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: 3/7/05 Applicant Signature: [Signature]

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.

Jeffs



Fax # (916) 264-1901

FAXBACK PERMIT APPLICATION
(certain restrictions apply)

(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:

RESIDENTIAL

APARTMENTS (4+ units per building)

COMMERCIAL (limited)

Job Address: 1901 F St
 Parcel Number: 003-0124-019
 CONTACT PERSON: JANE WILKIE
 Property Owner: BILL WATSON
 Address: 1901 F St
 City/State/Zip: SACRAMENTO CA
 Phone: 451 3333

Contract Price \$ 750 -
 CONTACT PHONE: 427 6037
 Contractor: JERRY PUMPHREY License # 702292
 Address: P.O. BOX 231728
 City/State/Zip: SACRAMENTO CA 95822
 Phone: 427 6037 FAX: 391 0161

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

Description of Work: Provide water service (install only) owner to the back

REROOF (excluding tile)
 TEAR-OFF
 RESHEET
 GARAGE

HOUSE # SQUARES
 Stories: 1 2 3+
 Material: _____

SIDING
 Wood
 T-111
 Horiz
 Vinyl
 Shingle

HVAC INSTALLATIONS
 NEW CHANGE-OUT
 Heat Pump
 Package
 Split system
 Roof mount
 Cut-in
 Heat pump or elect. unit to gas.

WALL FURNACE
 FIRE PLACE INSERT
 Other (describe below)

Value of duct work _____
 Equipment _____
 Contractor _____

DRY ROT OR TERMITTE DAMAGE REPAIR
 Floor joists
 Roof Structure
 Exterior
 * Design Review approval may be required.

PUBLIC UTILITIES SAFETY INSPECTION
 (Residential and single apartment units only)
 SWIM
 PGM

MINOR ELECTRIC and/or MINOR PLUMBING
 Electric Service Change # amps
 New electric circuits
 Re-wire
 Replacement
 Water Service
 Sewer Service
 Gas Line
 Re-plumb
 Water
 Waste

AR

MODE = MEMORY TRANSMISSION

START=MAR-08 08:54

END=MAR-08 09:01

FILE NO. =403

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK		93910161	008/008	00:04:18

-CITY OF SACRAMENTO -

***** -PLAN CHECK - ***** 916 264 5987- *****

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Jeff