

Building Permit

City of Sacramento



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

Permit No: 0314150
Date Issued: 09-17-03
Total Amount: 183.80

SEP 17 2003

Sacramento Building Division

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

Site Address: 5433 Meadow Park Way
Nature of Work: replace package roof unit

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 CAOHC License Number 327383 Date 9-17-03 Signature Debra Carlson

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 subject to the Contractors License Law shall be a misdemeanor punishable by a fine of not more than five hundred dollars (\$500.00):

SMOKE DETECTORS ARE REQUIRED WHEN ALTERATIONS, REPAIRS OR ADDITIONS REQUIRING A PERMIT ARE IN EXCESS OF \$1000 OR WHEN ONE OR MORE SLEEPING ROOMS ARE ADDED OR CREATED (GROUP B)

I, as a owner of the property, or my employees with wages as their sole compensation, or as a contractor, or as a contractor's agent, or as a contractor's employee, or as a contractor's subcontractor, or as a contractor's subcontractor's employee, or as a contractor's subcontractor's subcontractor, or as a contractor's subcontractor's subcontractor's employee, who does such work himself or herself or through his/her own employees, provided that such work is not done for the purpose of sale, 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 above mentioned property for inspection purposes.

Date 9-17-03 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:

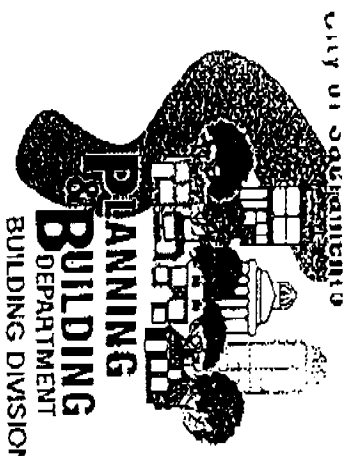
Carrier State Fund Expiration Date 11-03
Policy Number 713-02

(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 9-17-03 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 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

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



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:

RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

Job Address: 5433 Woodrow Park Way SAC 95823 Unit # _____
 Parcel Number: _____ Contract Price \$ 4500--
 CONTACT PERSON: NORU Galloper CONTACT PHONE: 415-845-3248
 Property Owner: NORU Galloper Contractor: Valley Heating & Air License # 321383
 Address: 5433 Woodrow Park Way Address: 8238 Four Oaks Blvd
 City/State/Zip: SAC TO, CA 95823 City/State/Zip: Carmichael CA 95008
 Phone: 916-415-845-3248 Phone: 916-944-3783 FAX: 916-944-3053

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

Description of Work: replace package roof unit

# Stories: 1 2 3+ Material: _____	<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES _____ <input type="checkbox"/> GARAGE	(Residential ONLY) <input checked="" type="checkbox"/> HVAC INSTALLATIONS <input checked="" type="checkbox"/> NEW <input type="checkbox"/> CHANGE-OUT <input checked="" type="checkbox"/> Package <input type="checkbox"/> Heat Pump <input type="checkbox"/> Spilt system <input type="checkbox"/> Roof mount <input type="checkbox"/> Cur-in <input type="checkbox"/> Heat pump or elect. unit to gas.	(Residential ONLY) <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	(Residential ONLY) <input type="checkbox"/> DRY ROT OR TERMITTE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Mudset/Studs <input type="checkbox"/> Exterior	(Residential ONLY) <input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING <input type="checkbox"/> Electric Service Change # 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
	<input type="checkbox"/> SIDING <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco	Value of duct work: \$ _____ Equipment: \$ _____ Cur-in: \$ _____	<input type="checkbox"/> Wall furnace <input type="checkbox"/> Fire Place Insert <input type="checkbox"/> Other (describe below)	<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.

* Design Review approval may be required.

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CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

****PRELIMINARY****
FEE SUMMARY
FOR PERMIT #0314150
Bldg Minor Permit
as of 09-17-2003 Permit Status: APPLIED

Site Address: 5433 MEADOW PARK WY SAC
Parcel No: 117-0440-039
Thomas Bros: 338 A5

CONTRACTOR
VALLEY HEATING AND AIR
8232 FAIR OAKS BLVD
CARMICHAEL CA 95608
Phone: 916-944-3723

OWNER
GALLAGHER MARY E
208 FRANKFORT ST
DALY CITY CA 9401414
Phone: 415-845-3248

ARCHITECT

Phone:

Nature of Work: REPLACE EXIST. HVAC WITH NEW PACKAGE, ROOF MOUNTED UNIT

Permit Valuation: \$4,500.00
Square Footage: 0

Building Permit	\$175.00	Water Development Fee:	\$0.00
Strong Motion Fee	\$0.00	Sewer Development Fee:	\$0.00
City Bus Oper Tax.....	\$1.80	Regional Sanitation Fee.:	\$0.00
Technology Fee	\$7.00	Pocket Area Road	\$0.00
Housing Surcharge	\$0.00	SAFCA Fee	\$0.00
Res Const Tax	\$0.00	North Natomas	\$0.00
Penalty Fee	\$0.00	FBA-Jacinto Creek	\$0.00
Inspections	\$0.00	Refund	\$0.00
Replace Cards	\$0.00		
Renewal Fee	\$0.00	Additional Fees	\$0.00
Water Meter Fee	\$0.00		
		TOTAL FEES	\$183.80
		Payments	\$0.00
		PRELIMINARY BALANCE DUE	\$183.80

MODE = MEMORY TRANSMISSION START=SEP-17 10:45 END=SEP-17 11:01

FILE NO.=908

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK	2	99443053	003/003	00:03:28

-CITY OF SACRAMENTO -

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

FROM : VALLEY HEATING & AIR

FAX NO. : 916 944 3053

Sep. 17 2003 07:37AM P2

Building Permit



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ISSUED

Permit No: 0314150
 Date Issued: 09-17-03
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SEP 17 2003
 Sacramento Building Division

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

Site Address: 5433 Mordan Park Way
 Nature of Work: replace package roof vent

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Carrier State Fund
 Policy Number 713-02 Expiration Date 11-03

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