

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0008769
Insp Area: 2

Site Address: 4171 SOLEDAD WY SAC
Parcel No: 022-0181-020 GREATER HILL ZION MBC

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

CONTRACTOR
R C MEEKS & ASSOCIATES
1240 NORTH AV
SAC CA 95838

OWNER
GREATER HILL ZION MBC
4171 SOLEDAD WY
SAC CA

ARCHITECT

Nature of Work: INTERIOR REMODEL/MOVE AND UPGRADE SVC PANEL/NEW HVAC'S/ADA
R ROOMS

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.

X License Class B License Number 697903 Date 7/31/2000 Contractor Signature Alex Lowell

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);

CANCELLED COUNTY JOB REFUND 8-3-00

I, as a owner of the property, or my employee, with wages on 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 or 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 contractor(s) 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.

X Date 7/31/2000 Applicant/Agent Signature Alex Lowell

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:

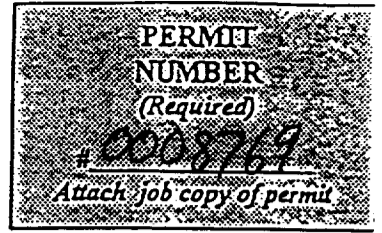
Carrier STATE FUND Policy Number 1313430-00 Exp Date 07/01/2001

(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.

X Date 7/31/2000 Applicant Signature Alex Lowell

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
NEIGHBORHOODS, PLANNING & DEVELOPMENT SERVICES DEPARTMENT

DEVELOPMENT SERVICES DIVISION
1231 I STREET, RM. 200
SACRAMENTO, CA 95814

00-08769C

PERMIT SERVICES
916-264-7619
FAX 916-264-7046

BUILDING INSPECTIONS
916-264-5716
FAX 916-264-8370

REQUEST FOR PERMIT REFUND

JOB ADDRESS: 4171 SOLEDAD WAY
DATE OF WRITTEN REQUEST: _____ DATE REQUEST RECEIVED: 8/3/00
PERMIT FOR: REMODEL & ELEC. UPGRADE
REASON FOR REFUND: JOB IN COUNTY
CONTRACTOR: RC MEERS & ASSOCIATES OWNER: GREATER ZION MBC
ADDRESS: 1240 NORTH AVE. ADDRESS: 4171 SOLEDAD WAY
CITY/ST/ZIP: SAC, CA 95838 CITY/ST/ZIP: SAC, CA.
PHONE: (916) 929-5099 PHONE: (916) 386-2207

Alex Powell 923-2150 # 8769

REFUND RECIPIENT: CONTRACTOR OWNER OTHER: PLEASE CALL ALEX POWELL WHEN THE REFUND IS READY SO HE CAN PICK UP THE CHECK & GO TO THE COUNTY FOR HIS PERMIT.

ORIGINAL PERMIT "JOB COPY" IS REQUIRED FOR REFUND (SCC SECTION 9.01.051)

AMOUNT PAID		AMOUNT TO BE REFUNDED	
Permit Value	25,000.00	Adj. Value	25,000.00
BPF pd	484.00	BPF pd	484.00
PC/PPF pd	250.00	PC/PPF pd	250.00
SMI pd	5.25	SMI pd	5.25
CBL pd	10.00	CBL pd	10.00
Tech pd	29.36	Tech pd	29.36
Other	FILE 121.60	Other	FILE 121.60
Other		Other	
Other		Other	
Other		Other	
Other		Other	
Other		Other	
Other		Other	
Other		(Comm/Res Adman)	(-30.00) (-50.00)
Total Paid	<u>\$ 900.21</u>	Total Refund Amount	<u>\$ 900.21</u>

PERMIT SERVICES USE ONLY

Job Card Attached

App. Book Marked

Permit Canceled

Supp. Paper Work

Letter Mailed

CITY ERROR, NO ADMIN FEES

REFUND PROCESSED BY: John J. Boyd DATE: 8/3/00
REFUND APPROVED BY: David P. Brock DATE: 8/3/00

PLEASE ALLOW 30 DAYS FOR PROCESSING

9	6	7	8	0	8	09	N	FIRE SP.	A	CONSTR. TYPE	OCCUP. GROUP	STREET WIDTH	NO.	PLUM CHECK NO.	2C	INSUR. AREA
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