

**SMOKE DETECTORS ARE REQUIRED WHEN ALTERATIONS, REPAIRS OR ADDITIONS REQUIRING A PERMIT ARE IN EXCESS OF BUILDING WHEN ONE OR MORE SLEEPING ROOMS ARE ADDED OR CREATED (GROUP R)**

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

**ISSUED**  
MAR 24 2003

Permit No: 03-03883  
Date Issued: 3/29/03  
Total Amount: \$ 80.72

Sacramento Building Division

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

Site Address: 4820 Hulsboro Way Lane  
Nature of Work: Trenchless Sewer Replacement

**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-10 License Number 313506 Date 3/21/03 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 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 \_\_\_\_\_ 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 3/21/03 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  
Policy Number 713247102 Expiration Date 10/2/03

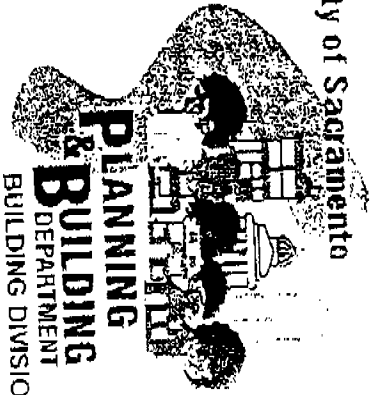
(This section need not be completed if the permit is for \$100 or less) I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 3/27/03 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.

City of Sacramento



Fax # (916) 264-1904

**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: 4820 Hillside Lane	Contract Price \$109,351.13	Unit #
Parcel Number: 016-0152-004	CONTACT PHONE: 455-4548	
CONTACT PERSON: Jerry Greenberg	Contractor: ACE Plumbing License # 313506	
Property Owner: Mark Hayes	Address: 4405 Sacramento Blvd	
Address: 4820 Hillside Lane	City/State/Zip: Sacramento, CA 95822	FAX: 455-10380
City/State/Zip: Sacramento, CA 95822	Phone: 455-4548	
Phone: 480-10962		

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

replace water line

Description of Work: _____ _____ _____	<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 type="checkbox"/> HVAC INSTALLATIONS <input type="checkbox"/> NEW <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Roof material <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Fire Place Insert <input type="checkbox"/> Other (rescribe below)	<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 <input type="checkbox"/> Medsill/Studs <input type="checkbox"/> Public Utilities Safety Inspection* (Residential and single apartment units ONLY) <input type="checkbox"/> S/MUD <input type="checkbox"/> PG&E	<input type="checkbox"/> Minor Electric and/or Plumbing <input type="checkbox"/> Electric Service Change* <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire Replacement <input checked="" type="checkbox"/> Water Service <input checked="" 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: \$ Cut-in: \$	*NOTE: Correction Notice items will require an additional building permit.	IWR Faxback Permit undated 1206015	

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**\*\*PRELIMINARY\*\***  
**FEE SUMMARY**  
**FOR PERMIT #0303883**  
**Bldg Minor Permit**  
**as of 03-24-2003 Permit Status: APPLIED**

**Site Address: 4820 HILLSBORO LN SAC**  
Parcel No: 016-0152-004  
Thomas Bros: 317 B3

CONTRACTOR  
ACE PLUMBING  
4405 FRANKLIN BLVD.  
SACTO. CA. 95820  
Phone: 916-455-4548

OWNER  
TERRY HAYES  
4820 HILLSBORO LN  
SACRAMENTO CA 95822  
Phone: 686-6962

ARCHITECT  
  
Phone:

**Nature of Work: REPLACE SEWER LINE**

Permit Valuation: \$6,935.13  
Square Footage: 0

Building Permit .....	\$75.00	Water Development Fee:	\$0.00
Strong Motion Fee .....	\$0.00	Sewer Development Fee:	\$0.00
City Bus Oper Tax.....	\$2.77	Regional Sanitation Fee.:	\$0.00
Technology Fee .....	\$3.00	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		
		<b>TOTAL FEES .....</b>	<b>\$80.77</b>
		Payments .....	\$0.00
		<b>**PRELIMINARY** BALANCE DUE .....</b>	<b>\$80.77</b>

PAID  
CITY OF SACRAMENTO  
MAR 24 2003  
NEIGHBORHOODS, PLANNING  
AND DEVELOPMENT SERVICES

MODE = MEMORY TRANSMISSION

START=MAR-23 10:37

END=MAR-23 10:39


FILE NO.=977

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK		94556380	003/003	00:01:58

-CITY OF SACRAMENTO -

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

**SMOKE DETECTORS ARE REQUIRED WHEN ALTERATIONS ARE MADE TO SLEEPING ROOMS IN EXCESS OF 250 SLEEPING ROOMS ADDED OR UNLINED (GROUP R)**



**PLANNING & BUILDING DEPARTMENT**  
BUILDING DIVISION  
(916) 808-BLDG (2534)

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License Class 6-12 License Number 213506 Date 3/21/03 Signature [Signature]

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Carrier State Fund  
Policy Number 313244107 Expiration Date 10/2/03

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