

MODE = MEMORY TRANSMISSION

START=JUL-25 08:20

END=JUL-25 08:25

FILE NO.=622

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK	*	93575570	003/003	00:01:06

-CITY OF SACRAMENTO -

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

## CITY OF SACRAMENTO CASHIER'S WORKSHEET

**ISSUED**

JUL 25 2005

*George*

Sacramento Building Division

RECEIPT NUMBER: R0513410  
 TRANSACTION DATE: 07/25/2005  
 TRANSACTION AMOUNT: 191.49  
 NOTATION:

APD #: 0510809  
 SITE ADDRESS: 1762 SUNLAND VISTA AV SAC  
 PARCEL: 031-0155-003  
 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	191.49

**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	3.34	.00	3.34
207	Strong Motion (SMJ)	1600	.84	.00	.84
213	General Plan Surcharge	1760	5.31	.00	5.31
259	Bldg-Technology Surcharg	1750	7.00	.00	7.00

**PAID**  
 CITY OF SACRAMENTO

JUL 25 2005

NEIGHBORHOODS PLANNING  
 AND DEVELOPMENT SERVICES

*Superb*



Building Permit

**ISSUED**

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

Permit No: 0510809  
 Date Issued: 7.22.05  
 Total Amount: 191.49  
 Insp Area #: 2

JUL 25 2005

Sacramento Building Division

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

Site Address: 1262 Sunland Drive  
 Nature of Work: TEAR OFF SHAKES Re-sheet Install 40 year ELK Shingles

**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-39 License Number 714481 Date 7/20/05 Signature Mark Moran

**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 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 7/20/05 Applicant/Agent Signature Mark Moran

**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 046-010909 Expiration Date 1/1/06

(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 7/20/05 Applicant Signature Mark Moran

**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

### 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:

Credit Card Info on File? Yes  No  RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (limited)

0510809

Job Address: 1262 SWILAND DRIVE Unit #

Parcel Number:

CONTACT PERSON: MARK McRAN

Property Owner: MARGARITE MEYERS

Address: 1262 SWILAND DRIVE

City/State/Zip: SACRAMENTO CA 95831

Phone: 421-0646

Contract Price \$ 2350

CONTACT PHONE: 916-638-2536

Contractor: SUPERB ENTERPRISES

Address: 916 NATOMA STREET

City/State/Zip: FOLSOM CA 95630

Phone: 628-2536

License # 714481

FAX: 916-357-5570

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

Description of Work: TEAR OFF SHAKES Re-shaft OSB Board Install 40 year SLK

<input checked="" type="checkbox"/> REROOF (excluding tile) <input checked="" type="checkbox"/> TEAR-OFF <input checked="" type="checkbox"/> RESHIFT <input checked="" type="checkbox"/> GARAGE HOUSE 23 * SQUARES # Stories 2 Material: 40 year CLR 1/2" sheetrock	<input type="checkbox"/> HVAC INSTALLATIONS (Residential ONLY) <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 mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ Equipment: \$ Cut-in: \$	<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 TERMITE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Mudset/Studs <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SNUD <input type="checkbox"/> PG&E	<input type="checkbox"/> MINOR ELECTRICAL 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
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\* Design Review approval may be required.

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\*NOTE: Correction Notice items will require an additional building permit.

NR Faxback Permit updated 1208/01

031-0155-003