



CITY OF SACRAMENTO  
DEVELOPMENT SERVICES DIVISION  
PERMIT APPLICATION (certain restrictions apply)  
Fax # 916-264-1901

Final request must be received in this office by 3:00 p.m. to be processed the following work day.  
Note: Contractors must have a current certificate of Worker's Compensation Insurance.  
Note: Work started before a Building Permit is issued will be subject to a fine.

0509142

IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION **MUST** BE PROVIDED:

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

JOB ADDRESS: 5323 Jerome UNIT # \_\_\_\_\_ CONTRACT PRICE \$ 4600  
 CONTACT PERSON: Joe DeLuca CONTACT PHONE: 916 922 2775

Property Owner: Manny Ramirez Contractor: AFFORDABLE Heat & Air License # 647672  
 Address: 2160 Oxford St. #1120 Address: 14320 N. Curry Ave.  
 City/State/Zip: Woodland Hills CA 91367 City/State/Zip: Ch 95240  
 Phone: 818 702 9044 Phone: 916 922 2775 FAX: 916 334 3349

NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.

<input type="checkbox"/> <b>RENOV</b> (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHIRT <input type="checkbox"/> HOUSE <input type="checkbox"/> GARAGE <input type="checkbox"/> # of STORIES _____ MATERIALS _____ <input type="checkbox"/> SIDING <input type="checkbox"/> wood <input type="checkbox"/> T-111 <input type="checkbox"/> fiber <input type="checkbox"/> vinyl <input type="checkbox"/> stucco Note: Design Review approval may be required in certain areas.	<input checked="" type="checkbox"/> <b>HVAC INSTALLATIONS</b> (residential ONLY) <input type="checkbox"/> CHANGE-OUT <input checked="" type="checkbox"/> NEW <input type="checkbox"/> Heat Pump <input checked="" type="checkbox"/> Package <input type="checkbox"/> Split system <input checked="" type="checkbox"/> Room mount <input checked="" type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of fuel work: \$ _____ Equipment \$ _____ Cost: \$ _____ Note: Design Review approval may be required for rooftop units.	<input type="checkbox"/> <b>WATER HEATER</b> (residential ONLY) <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 (Describe locations below) Note: Design Review approval may be required for certain areas.	<input type="checkbox"/> <b>MINOR ELECTRIC and/or MINOR PLUMBING</b> (residential ONLY) <input type="checkbox"/> Electric Service Change @ amps _____ <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Water Service Replacement <input type="checkbox"/> Sewer Service Replacement <input type="checkbox"/> Gas Line Replacement <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> <b>PUBLIC UTILITIES SAFETY INSPECTION*</b> (Residential and single apartment units ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> POE *NOTE: Correction Notice items will require an additional building permit
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DESCRIPTION OF WORK: new GAS Pass & Ducting - unit on Roof.