

**THIS IS A 2 PART FORM  
WRITE ON A FIRM SURFACE**

**USE BLACK INK BALL POINT PEN — PRESS FIRMLY  
SIGN PERMIT APPLICATION**

CONSTRUCTION LENDING AGENCY

SUITE

INSP. AREA

SITE ADDRESS **3201 FURIN PERKINS RD.**

**513**

I hereby affirm under penalty of perjury that there is a construction lending agency for the following address on the work for which this permit is issued (See 3997 CVC(1))

Name \_\_\_\_\_  
Company Address \_\_\_\_\_

**LICENSED CONTRACTORS DECLARATION**

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 commencing with Section 70000 of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class **C45** Lic. Number **70061240**  
Date **8-24-00** Contractor **[Signature]**

**OWNER - BUILDER DECLARATION**

I hereby affirm under penalty of perjury that I am exempt from the Contractors License Law for the following reason (See 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 certificate of insurance and an affidavit of bondedness with the provisions of the Contractors License Law (Chapter 9 commencing with Section 70000) of Division 3 of the Business and Professions Code or that the site is exempt therefrom and the basis for the exemption is as follows: Any violation of Section 7031.2 by any applicant for a permit under the application for a permit is not in excess of one hundred dollars.

I, the owner of the property on my employees with wages as their sole compensation for the work and the contractor, as set forth and offered for sale by the Contractors License Law (Chapter 9 of the Business and Professions Code) does not apply to an owner of property who builds or improves thereon. I am not a contractor as defined in Section 70000 of the Business and Professions Code. I am not a contractor as defined in Section 70000 of the Business and Professions Code. I am not a contractor as defined in Section 70000 of the Business and Professions Code. I am not a contractor as defined in Section 70000 of the Business and Professions Code.

**[Signature]**  
Contractor

**[Signature]**  
Contractor

ASSESSOR PARCEL NO. **079-0310-036** PERMIT NO. **0009952**

NAME OF APPLICANT **PROGRESSIVE IMAGE SAC, COMMON PROBATION** ADDRESS **4100C WANSIDE LN CARMICHAMPEL 3201 FURIN PERKINS SAC.** ZIP CODE **95108** PHONE NO. **971-0227**

- SIGN INFORMATION**
- ATTACHED
  - ILLUMINATED
  - INDIVIDUAL LETTERS
  - METAL
  - PLASTIC
  - WOODEN
  - INTERIOR / ELECT.
  - SINGLE FACED
  - BILLBOARD / SUBDIVISION
  - PAINTED ON BUILDING
  - LOGO
  - POLE
  - DOUBLE FACED
  - MONUMENT
  - VINYL/GATOR FOAM
  - PROJECTING
  - RE-FACE

SIGN COPY **"1060" NEIGHBORHOOD ALTERNATIVE CENTER**

**CITY OF SACRAMENTO PERMIT SERVICES BUILDING INSPECTION DIVISION 264-7619**

**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 the permit is issued. My certificate of consent to self-insure is attached to this permit application and policy number is \_\_\_\_\_

Carrier \_\_\_\_\_  
Policy Number \_\_\_\_\_

This section need not be completed if the permit is for one hundred dollars (\$100) or less. I certify that the performance of the work for which this permit is issued shall not employ any person in any manner which is to become subject to the workers' compensation laws of California and agree that if I should become subject to the workers' compensation laws of California, I shall comply with the provisions of Section 3700 of the Labor Code. I shall maintain complete and accurate records of the work performed under this permit and shall file a true and correct copy of these records with the State of California Department of Industrial Relations, Division of Workers' Compensation, 1700 Franklin Street, Sacramento, California 95833.

**8-24-00** **[Signature]**

APPROVED BY <b>[Signature]</b> DATE <b>8-25-00</b>	RECEIVED <b>[Signature]</b> DATE <b>8-25-00</b>
FINAL INSPECTIONS	AMOUNT
BEFORE INSPECTOR <b>[Signature]</b> DATE <b>8-25-00</b>	
AFTER INSPECTOR <b>[Signature]</b> DATE <b>8-25-00</b>	
OTHER	
<b>TOTAL FEES \$</b>	

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

**THIS IS A 2 PART FORM  
WRITE ON A FIRM SURFACE**

**USE BLACK INK BALL POINT PEN — PRESS FIRMLY  
SIGN PERMIT APPLICATION**

CONSTRUCTION LEADING AGENCY

SITE ADDRESS

SUITE

INSP AREA

I hereby affirm under penalty of perjury that there is a construction leading agency for the jurisdiction of the work for which this permit is issued. See 30927 C.A.C.

Contractor Name: \_\_\_\_\_  
Contractor Address: \_\_\_\_\_

**LICENSED CONTRACTORS DECLARATION**

I hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 7 (commencing with Section 70001) of Division 3 of the Business and Professions Code and my license is in full force and effect.

License Class: C45 Lic. Number: 7949126  
Date: 8-24-03 Contractor: [Signature]  
(Signature)

**OWNER BUILDER DECLARATION**

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I hereby affirm under penalty of perjury that more than two hundred dollars of my own money is being expended on this project.

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I hereby affirm under penalty of perjury that more than two hundred dollars of my own money is being expended on this project.

3201 Florio Parkis

1

ASSESSOR PARCEL NO. 679-0310-036 PERMIT NO. 0009754

NAME OF APPLICANT: Progressive Image ADDRESS: 4100 C Wills St W ZIP CODE: 95608 PHONE NO.: 971-0227

LICENSED CONTRACTOR: Progressive Image BUSINESS OWNER: 3201 Florio Sae

SAC County Probation DeKris Sae SIGN INFORMATION: 875-0206

**SIGN INFORMATION**

- ATTACHED  INTERIOR/ELECT.  SINGLE FACED
- ILLUMINATED  NON-ILLUMINATED  BILLBOARD/SUBDIVISION
- INDIVIDUAL LETTERS  PAINTED ON BUILDING  LOGO
- METAL  POLE  DOUBLE FACED
- PLASTIC  MONUMENT  VINYL/GATOR FOAM
- WOODEN  PROJECTING  RE-FACE

SIGN COPY: 290" NEIGH BEHOOD

ALTERATIVE

Center

CITY OF SACRAMENTO PERMIT SERVICES  
BUILDING INSPECTION DIVISION 264-7619

**WORKER'S COMPENSATION DECLARATION**

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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 worker's compensation insurance affects only my property.

Carrier: \_\_\_\_\_

Policy Number: \_\_\_\_\_

This section need not be completed if the permit is for one hundred dollars (\$100) or less. I certify that on the performance of the work for which this permit is issued, I shall not employ any person who is not so insured, become subject to the workers' compensation law, or otherwise agree that I should become the worker's compensation carrier. I agree that I shall become the worker's compensation carrier with the provisions of Section 3700 of the Labor Code shall comply with these provisions.

8-24-03

[Signature]  
APPLICANT (Signature)  
APPLICANT (Name)  
APPLICANT (Address)  
APPLICANT (City/State/Zip)

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

TOTAL FEES \$ \_\_\_\_\_

OTHER \_\_\_\_\_

APPROVED BY: [Signature] DATE: 8-25-03

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APPROVED BY: [Signature] DATE: 8-25-03

APPROVED BY: [Signature] DATE: 8-25-03

APPROVED BY: [Signature] DATE: 8-25-03

APPROVED BY: [Signature] DATE: 8-25-03

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APPROVED BY: [Signature] DATE: 8-25-03

APPROVED BY: [Signature] DATE: 8-25-03

APPROVED BY: [Signature] DATE: 8-25-03

APPROVED BY: [Signature] DATE: 8-25-03

APPROVED BY: [Signature] DATE: 8-25-03



DWG # 0823-200 / STATE: N.Y.S.

3201 FARRIN-SPRINGS RD.

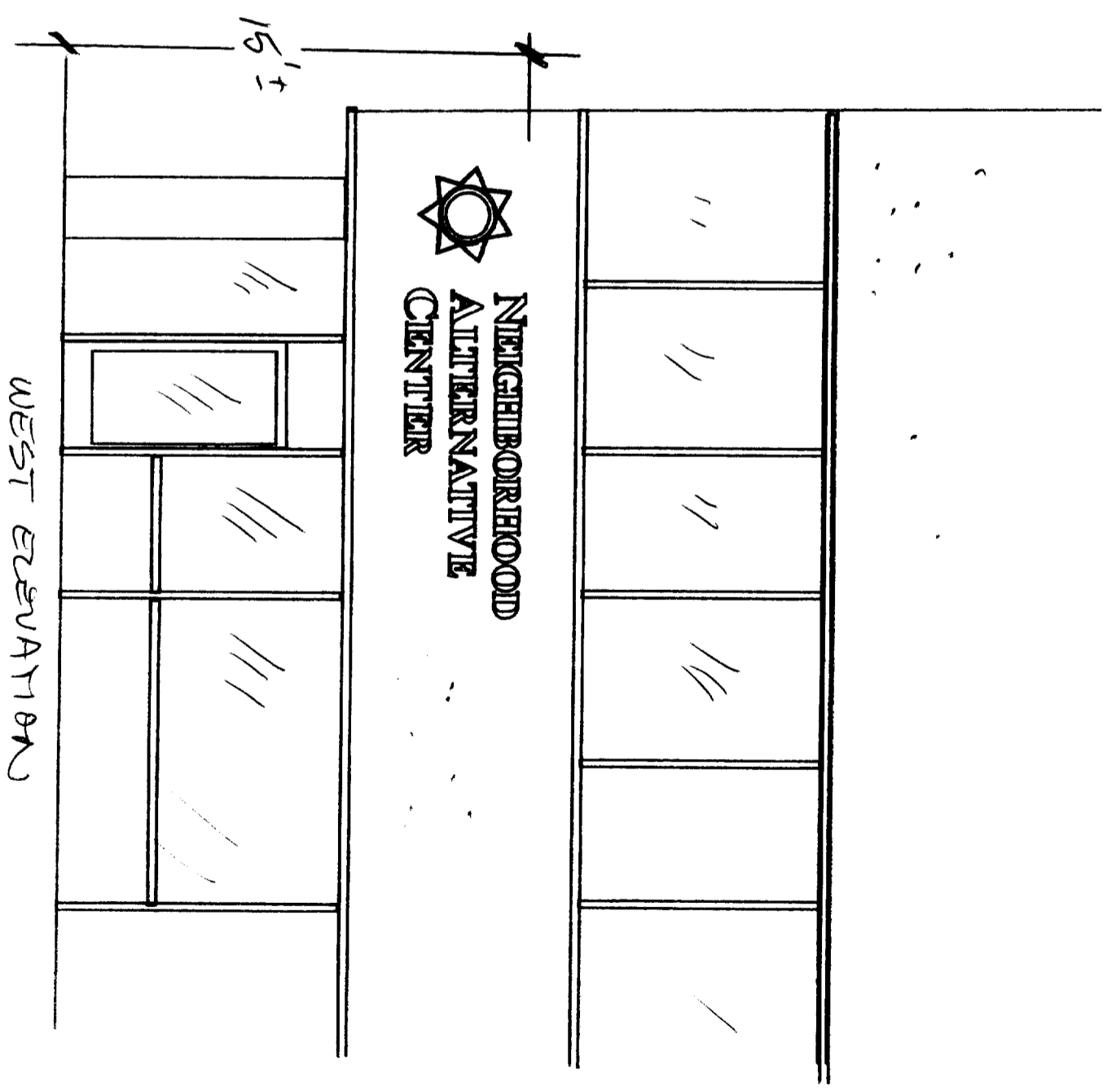
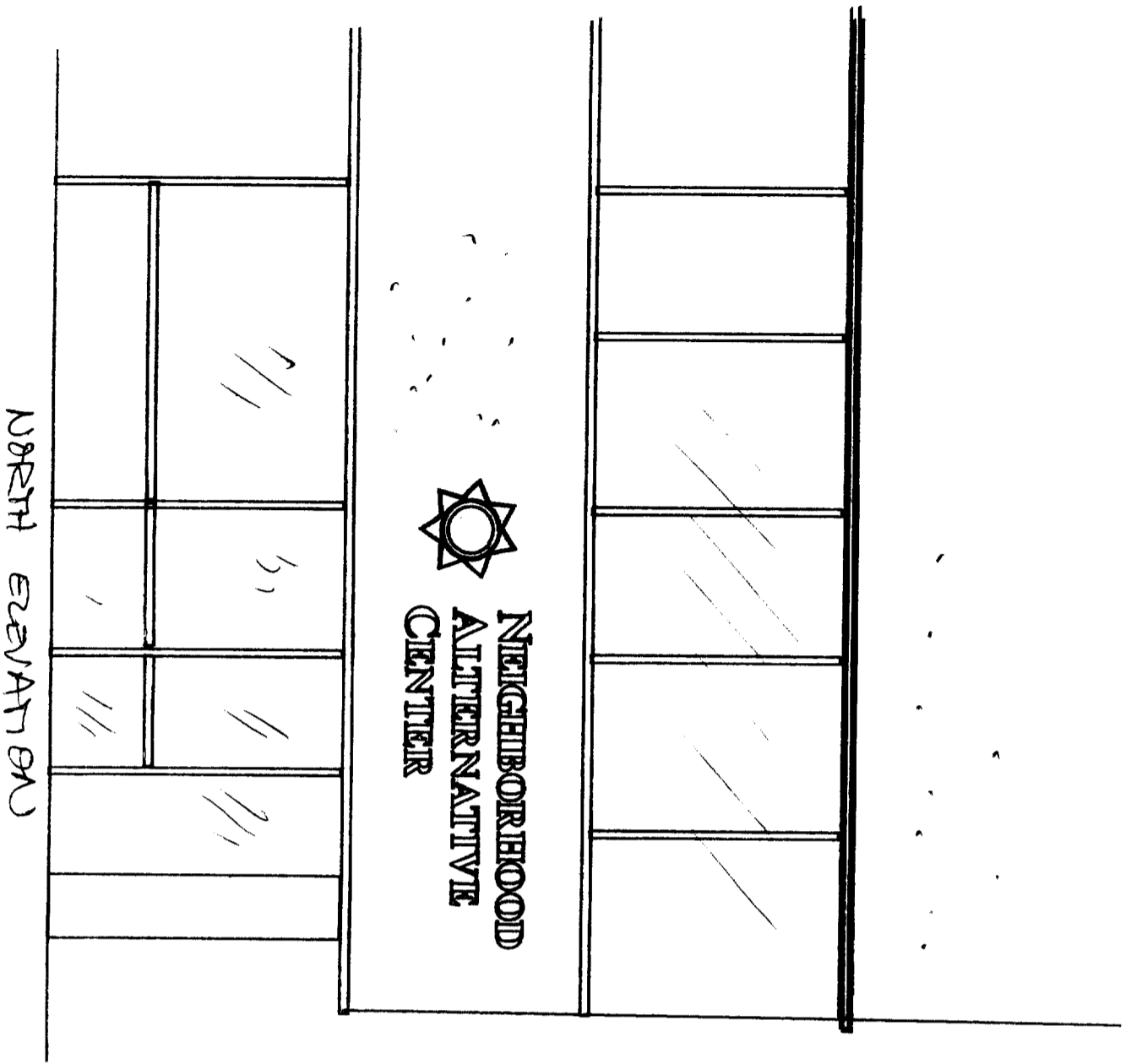


PHOTO 0823-300 / SAME: U.T.S.

3201 FURIN-PERKINS RD.

