

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0519650

Insp Area: 3
Thos Bros: 317J1

Site Address: 5441 8TH AV SAC
Parcel No: 015-0054-027

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

CONTRACTOR
CAL SERVICE ELECTRIC INC
P O BOX 41942
SACRAMENTO CA 95841

OWNER
ANDERSON MARTHA L
5441 8TH AV
SACRAMENTO, CA 95820

ARCHITECT

Nature of Work: RE-WIRE HOUSE

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 _____ License Number 709122 Date _____ 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 (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 statement of intent 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 person who 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 shall 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 12/16/05 Owner Signature Martha Louise Anderson

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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 12/16/05 Applicant/Agent Signature Martha Louise Anderson

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 0021821-2005 Exp Date 01/01/2006

(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 X Applicant Signature X

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

www.cityofsacramento.org

Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT

Inspection Request: 1-916-808-7822

Downtown Permit Center
1231 I Street, Suite 200
Sacramento, CA 95814

North Permit Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834

Fax # 916-264-1901

MINOR PERMIT APPLICATION

Date: 12/16/05

Faxed/web request must be received in this office by 3:00 P.M. to be processed the following workday. Contractors must have a current certificate of Worker's Compensation Insurance. Note: Work started before a Building Permit is issued will be subject to quad fee.

Permits requiring Plan Review are not eligible for the MINOR PERMIT PROGRAM. Design Review and Historic Preservation approval may be required if job address is located in those areas (additional forms may be required).

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

Job Address: 5441 8th Avenue Bid Type: RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

CONTACT INFO Name: _____ Phone #: _____ Unit # _____ Contract Price 12,000

Property Owner: MARGA LOUISE ANDERSON Contractor: CAL SERVICE ELECTRICAL, INC License #: 709122

Address: 5441 8th Avenue Address: P.O. Box 41942

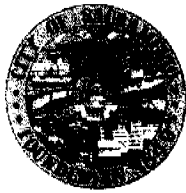
City/State/Zip: SACRAMENTO, CA, 95820 City/State/Zip: SACRAMENTO, CA

Phone: 916-452-2404 Phone: _____ Fax: _____

Nature of Work: Provide description of work & indicate type of work in selections below. Pre-Registered? YES NO Registration # _____

Description of Work:

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: _____ # Squares: _____ Material: _____ <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	<input type="checkbox"/> HVAC Installations (Residential Only) <input type="checkbox"/> Change-out <input type="checkbox"/> New <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"/> Other (describe below) Value of duct work: _____ Equipment: \$ _____ Out-in: \$ _____	<input type="checkbox"/> Water Heater (Residential Only) <input type="checkbox"/> Electric <input type="checkbox"/> Gas <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 <input type="checkbox"/> Damage Repair <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Mudsill/Studs <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior	<input type="checkbox"/> Minor Electric and/or Minor Plumbing (Residential Only) <input type="checkbox"/> Electric Service Change # amps _____ <input checked="" 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"/> Public Utilities Safety Inspection (Residential and single apartment units Only) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E * NOTE * Correction Notice items will require an additional building permit.	Office Use Only: Parcel #: _____ Date Received: _____ Date Issued: _____ Processor's Initials: _____ Permit #: _____
---	--	---	---	--	---



**CITY OF SACRAMENTO
DEVELOPMENT SERVICES DEPARTMENT
BUILDING DIVISION**

North Permit Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834
Inspection: (916) 808-4677

OWNER BUILDER VERIFICATION

1. Check one below - I or my immediate family (parent, spouse, or child) will perform:

- A - all the work authorized by this permit.
- B - a portion of the work.
- C - none of the work.

If B or C is checked, complete 2 or 3 below.

2. A State licensed contractor (*) will be hired to do:

- all of the authorized work.
- a portion of the authorized work.

Name _____ Phone _____

Address _____

Type of Work _____

Name _____ Phone _____

Address _____

Type of Work _____

Name _____ Phone _____

Address _____

Type of Work _____

Name _____ Phone _____

Address _____

Type of Work _____

3. I will utilize unlicensed person(s) other than my immediate family to perform all or portions of the authorized work. A Certificate of Workers Compensation must be on file at this office.

I declare under penalty of perjury that the above is true and correct. I have read and understand the owner-builder information on the reverse side of this form.

Signed: Property Owner Martha Louise Anden

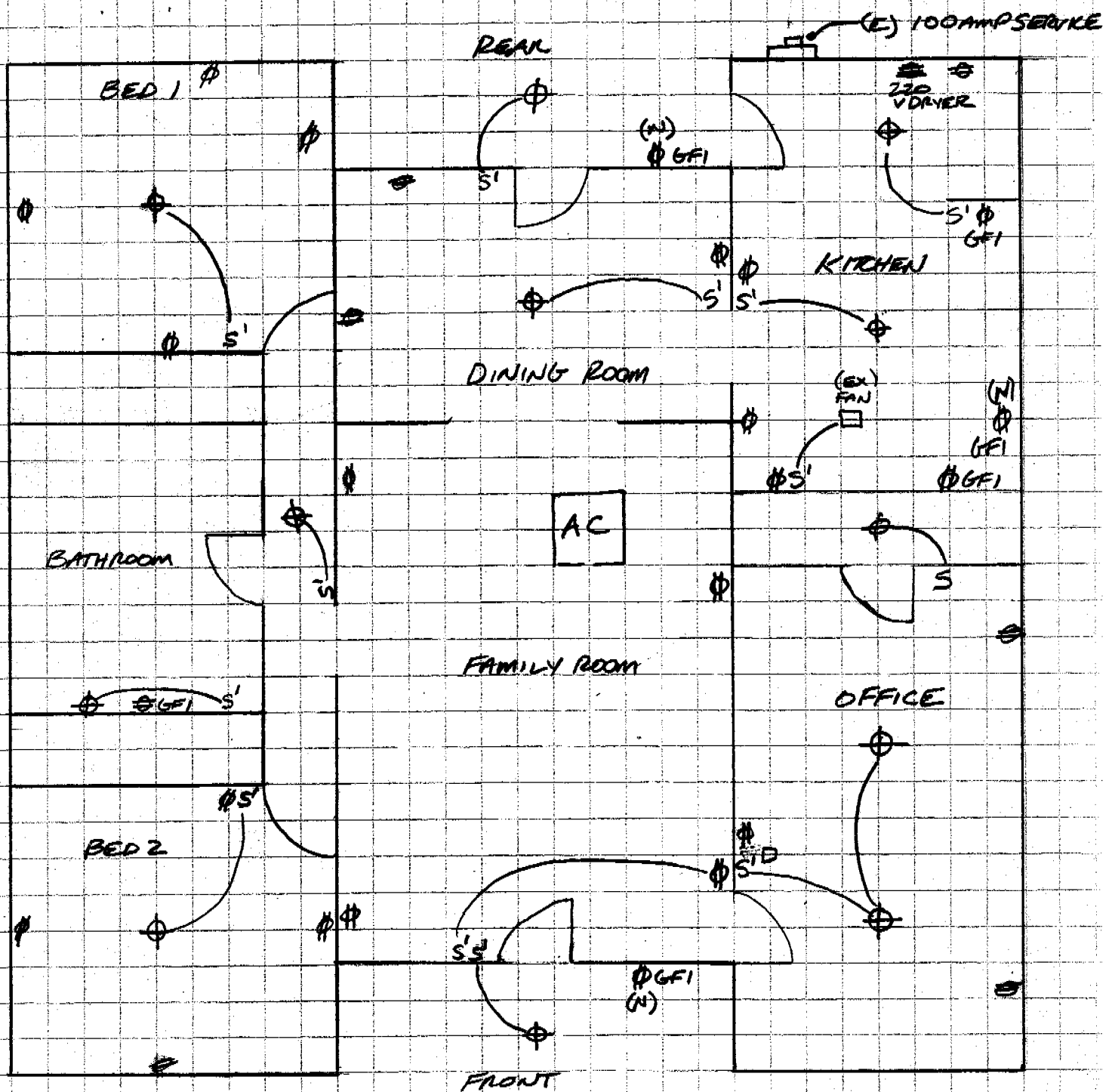
Date 12/16/05 Case No. _____ Permit No. 0519650

Job Address 5441 8th Ave

Note: * Information regarding unknown contractors or change in subcontractors shall be submitted to the Building Inspection field office.

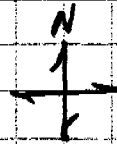
JOB: LOUISE ANDERSON
 5441 8TH AVE.
 SAC, 95820

- NOTES:
 1) EVERYTHING IS EXISTING AS IS
 U.O.N.
 2) DEVICE AND FIXTURE LOCATION
 TO STAY AS IS.



SCOPE OF WORK: Omit EXISTING NON-GROUNDED BRANCH CIRCUIT WIRING & DEVICES WHERE NEEDED. INSTALL NEW GROUNDING BRANCH CIRCUIT WIRING, DEVICES AND FIXTURES WHERE NEEDED AT EXISTING LOCATIONS. INSTALL ONE NEW GFI RECEPTACLE AND 2 - SMALL APPLIANCE CIRCUITS IN KITCHEN. INSTALL 2 - NEW EXTERIOR GFI'S. COMPLY WITH TITLE 24. INSTALL ARC FAULTS

8TH AVE.



EXISTING DWELLING UNIT

THIS COPY SHALL BE ON JOB SITE AT ALL TIMES

CONTRACTOR/OWNER LOUISE ANDERSON JOB ADDRESS: 5441 8TH AVE TOTAL SQ. FT. 1224

LOAD CALCULATION - N.E.C. 220-31

NUMBER	ITEM	WATTS
1224	Sq. ft @ 3 watts per sq. ft.	3672
2	20 Amp. Appliance circuits @ 1,500 watts each	3000
N/A	Range (Nameplate Rating = N.P.R.) GAS	
N/A	Oven (N.P.R.) GAS	
N/A	Water Heater (N.P.R.) GAS	
N/A	Dishwasher (N.P.R.)	
N/A	Disposal (N.P.R.)	
1	Washer [1500 watts min. - N.E.C. 220-16(b)]	1500
1	Dryer [5000 watts min. or N.P.R. if larger] N.E.C. 220-18)	5000
1	MICROWAVE	1600
1	Other (N.P.R.) KILN	11,520
1	Other (N.P.R.) FURNACE BLOWER	600

Air conditioning example (Not heat pump)
 Compressor 20 amps
 Fan 5 amps
 Unit Total Load - 25 amps x 240V
 Electric Furnace @ N.P.R. - 6,000 watts X 65% =
 3900 Watts
 Use 6000W., since it is larger.

Heat Pump Note:
 Be careful when doing load calculations where heat pumps are installed. The load for most heat pumps that are equipped with auxiliary heat strips will be larger under the demand for heat. For the purposes of load calculations only, on heat pumps, use 100% of the heat pump, compressor and fans and 65% of auxiliary heat load to show total heat pump load.

Heat Pump Example
 Compressor 20 Amps
 Fans 5 amps
 Heat Pump Load = 25A X 240V = 6,000
 Aux. Heat Strip = 6,000W X 65% = 3,900W
 Total Heat Pump Load = 9,900W

Sub-Total = 26,892 (Less 1st 8kW) - 8,000 @ 100% =	8,000 Watts
Remainder @ 40% 18,892 @ 40% =	7,557 Watts
Total Air Cond. and/or heat pump load =	5,040 Watts
Total Service Load 20,597	Total Service Load = 20,597 Watts
Service Size EXISTING SERVICE IS 100 AMP	watts + 240V = 86 AMPS

Air Conditioning Equipment
 Air Conditioning [cooling @ (N.P.R. X 100%)] = 5040
 Electrical Heating @ (N.P.R.) X 65% = GAS PACK
 NOTE: USE THE LARGEST LOAD - HEAT OR COOL = 5040
 Heat pump (compressor & fans) X 100% =
 Aux. heat strips (or elect. furnace) X 65% =
 Total Heat Pump Load =
 NOTE = AMPS X CIRCUIT VOLTAGE = WATTS