

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0509990
Insp Area: 2
Thos Bros: 336H1

Site Address: 7045 WAVECREST WY SAC
Parcel No: 030-0640-045

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

CONTRACTOR
WEATHERTITE ROOFING
4661 SUMMER CREEK CT
SHINGLE SPRINGS, CA 95682

OWNER
JANG RONALD W/PAULINE T
7045 WAVECREST WY
SACRAMENTO, CA 95831

ARCHITECT

Nature of Work: In Progress Insp. required. T/O, Resheet and reroof with light weight tile.

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 420375 Date 7/8/05 Contractor Signature Carolyn Peir

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 8 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 contractor 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: JUN 08 2005

Date _____ Owner Signature NEIGHBORHOODS PLANNING AND LEVEL SERVICE

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 7/8/05 Applicant/Agent Signature Carolyn Peir

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 1271896-2004 Exp Date 10/01/2005

(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 7/8/05 Applicant Signature Carolyn Peir

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.



OFFICE OF SALES & LICENSES
 DEVELOPMENT SERVICES DIVISION
 PERMIT APPLICATION (General Instructions apply)
 FAXED PERMIT APPLICATION (General Instructions apply)
 FAX # 972-254-1911

Permit request must be received in this office by 1:00 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.

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

RESIDENTIAL APARTMENTS (see unit per building) COMMERCIAL (Industrial) **050 9990**

ADDRESS: 7045 Wavercrest Way UNIT # _____ CONTRACT PRICE \$ 18,000

CONTACT PERSON: Larry Rose CONTRACT PHONE: 849-1977

BY Owner Mr. Jang Contractor Deedhantle Roofing License # 420375
7045 Wavercrest Way Address 4611 Summer Creek Ct
 Austin, TX 78746 City/State/Zip Shingle Springs, CA 95682
 Phone 530-678-1113 FAX: 530-678-1113

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

<input type="checkbox"/> HVAC INSTALLATIONS <small>(Residential ONLY)</small> <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"/> Chiller <input type="checkbox"/> Other (specify or effect): Unit in gas <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below)	<input type="checkbox"/> WATER HEATER <small>(Residential ONLY)</small> <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> Change out <input type="checkbox"/> Storage Gas <input type="checkbox"/> Recirculate <input type="checkbox"/> New	<input type="checkbox"/> MINOR ELECTRICAL <small>(Residential ONLY)</small> <input type="checkbox"/> Electric Service Change # amps _____ <input type="checkbox"/> New electric service <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"/> Fire alarm <input type="checkbox"/> Other _____	<input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTOR <small>(Residential and single apartment ONLY)</small> OSMUD OPRG
<input type="checkbox"/> GOLF (excluding tee) <input type="checkbox"/> TEAR OUT <input type="checkbox"/> RESURF USE <input checked="" type="checkbox"/> GARAGE STORIES _____ OR _____ <u>348</u> Light weight 140	<input type="checkbox"/> ENVIRONMENTAL DAMAGE REPAIR <small>(Describe locations below)</small> <input type="checkbox"/> Water <input type="checkbox"/> Air <input type="checkbox"/> Noise <input type="checkbox"/> Other _____	<input type="checkbox"/> SOIL <input type="checkbox"/> WATER <input type="checkbox"/> AIR <input type="checkbox"/> OTHER	*NOTE: Correction Notice file will require an additional building permit

PERMIT TYPE: FEAR OFF SHAKES, RESTORE, REPLACE, REPLACE WITH LIGHT WEIGHT ICE