



Form # 916-264-1901

Excess request must be received in this office by 3:00 p.m. to be processed the following work day.
Notes: 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.

OS/1233
HARRIS

FROM: MICHELLE K

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

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

JOB ADDRESS: 5338 TROUTDALE WAY UNIT # _____ CONTRACT PRICE \$ 4,800.00

CONTACT PERSON: DRUE KLUNKER CONTACT PHONE: 800-956-1996

Property Owner: DRUE RUGGIERO
Address: 5338 TROUTDALE WAY
City/State/Zip: SAC, CA 95823
Phone: 916-394-9683

Contractor: ALYR CR. ROOFING License # 129314
Address: 2988 WINDSOR COURT
City/State/Zip: RESERVE, CA 95612
Phone: 916-956-4996 FAX: 5956

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

<input checked="" type="checkbox"/> REMOVE (including 100%) <input checked="" type="checkbox"/> TRAIL-OFF <input type="checkbox"/> REINFORCE <input checked="" type="checkbox"/> HOUSE GARAGE <input checked="" type="checkbox"/> HOUSE STAIRS <input checked="" type="checkbox"/> HOUSE FOUNDATION Material: <u>COMPOSITION</u> <input type="checkbox"/> SIPING <input type="checkbox"/> wood <input type="checkbox"/> T-111 <input type="checkbox"/> Fibre <input type="checkbox"/> vinyl <input type="checkbox"/> silicone	<input type="checkbox"/> HVAC INSTALLATIONS (exhaust 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"/> Cool-dry <input type="checkbox"/> Heat pump or elect. unit to gen. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work & equipment: \$ _____ Cost: \$ _____ Notes: Designer/Reviewer approval may be required for rooftop units.	<input type="checkbox"/> WATER HEATER (exhaust ONLY) <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> Change-out <input type="checkbox"/> Relocate to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITTE DAMAGE REPAIR (Describe location below) Notes: Designer/Reviewer approval may be required in certain areas.	<input type="checkbox"/> MINOR ELECTRICAL REPAIR <input type="checkbox"/> MINOR PLUMBING (exhaust ONLY) <input type="checkbox"/> Electric Service Change <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"/> Rerouting <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> PUBLIC UTILITY SAFETY INS (identified and cited under ONLY) <input type="checkbox"/> SIMI <input type="checkbox"/> PDI *NOTE: Corrections Not will require an building permit
---	--	---	--	--

DESCRIPTION OF WORK: 1 YEAR DEF COMP ROOFING, GUTTER, 30 US Felt, INSTALL 30 year composition
30 year Owens Corning

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0511432

Insp Area: 2

Thos Bros: 337A2

Site Address: 957 SHELLWOOD WY SAC

Parcel No: 031-0730-070

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

TEA KOANG G/CHERRY M WAR
957 SHELLWOOD WY
SACRAMENTO, CA 95831

Nature of Work: PAPERLESS, TEAR OFF SHAKE, INSTALL 15 LB FELT AND REROOF WITH 21 SQUARES OF 30 YR COMP - IN PROGRESS, INSPECTION REQUIRED

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 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 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 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 8/2/05 Applicant/Agent Signature

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

Policy Number

PAID AUG 02 2005 CITY OF SACRAMENTO

(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. I shall forthwith comply with those provisions of the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions of the NEIGHBORHOODS, PLANNING AND DEVELOPMENT SERVICES

Date 8/2/05 Applicant Signature

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.