

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0510596
Insp Area: 3
Thos Bros: 298G7

Site Address: 8665 EVERGLADE DR SAC
Parcel No: 078-0152-011

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

ARCHITECT

CONTRACTOR
ALTA CAL ROOFING
2720 DANUBE AV
DAVIS CA 95616

OWNER
LACK MCAUTHER & VIRGINIA
8665 EVERGLADE DR
SACRAMENTO, CA 95826

Nature of Work: PAPERLESS, TEAR OFF SHAKES, RESHEET, AND INSTALL 25 SQUARES OF 40 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 39 License Number 729314 Date 7/22/05 Contractor Signature [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 true and correct. I hereby authorize representative of this city to enter upon the abovementioned property for inspection purposes.

Date 7/22/05 Applicant/Agent Signature [Signature]

WORKER'S COMPENSATION DECLARATION: I have and will maintain a certificate of consent to self-insure or workers' compensation insurance 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 NO EMPLOYEES Policy Number _____ Exp Date _____

(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 7/22/05 Applicant Signature [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.

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

FAXED PERMIT APPLICATION (certain restrictions apply)

Fax # 916-264-1901

Faxed 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 fines.



OS 0590
AREA 3

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

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

CONTRACT PRICE \$ 9,100.00

JOB ADDRESS: 8665 EVERGLADE DR UNIT # _____

CONTACT PERSON: DAVE RLINKER

CONTACT PHONE: 800-956-1996

Contractor: ALTA CAL ROOFING License # 229314

Address: 2928 WINDROOF COURT

City/State/Zip: ESCROW, CA 95622

Phone: 800-956-1996 FAX: 530-6765794

Property Owner: MAC POK

Address: 8665 EVERGLADE DR

City/State/Zip: SAC, CA 95826

Phone: 916-323-3426

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

ROOF (including tile)

TEAR-OFF

RE-SHIFT

HOUSE

GARAGE

STAIRS

INQUIRY

Material: COMPOSITE

SIDING

wood

T-111

fiber

vinyl

stucco

HVAC INSTALLATIONS (residential ONLY)

CHANGE-OUT NEW

Heat pump

Package

Split system

Roof mount

Cut-in

Heat pump or elec. unit to gas

Well service

Other (describe below)

Value of dual vents equipment \$ _____

Cost \$ _____

Note: Design Review approval may be required for rooftop units.

WATER HEATER (residential ONLY)

GAS ELECTRIC

Change-out

Electric to Gas

Refabricate

New

DRY ROT OR TERMITTE DAMAGE REPAIR (Describe locations below)

Note: Design Review approval may be required in certain areas.

MINOR ELECTRIC and/or MINOR PLUMBING (residential ONLY)

Electric Service Change of size

New electric circuits

Re-wire

Water Service Replacement

Sewer Service Replacement

Gas Line Replacement

Re-plumb Water Waste

PUBLIC UTILITY SAFETY INS (Residential and other utility ONLY)

BSI

PGI

*NOTE: Corrections Not will require an building permit

Note: Design Review approval may be required in certain areas.

DESCRIPTION OF WORK: TEAR OFF SHAKES, INSTAL 2 inch sheering, INSTAL 40 year composition. YOUR OWNERS CORNER.