

City of Sacramento

# FAXBACK PERMIT APPLICATION

(certain restrictions apply)

0508417

Faxed request received in this office before 3:00 p.m. will be processed the following work day. Contractors must have a current certificate of Worker's Compensation Insurance. Work started before a Building Permit is issued will be subject to quad fees.



Permits requiring plan review are not eligible for FAXBACK

In order to process this request, ALL of the following information MUST be provided:

Fax # (916) 264-1901

Inspection Request # (916) 264-7622

Credit Card Info on File? Yes  No

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

Unit # \_\_\_\_\_

Job Address: 1309 Valley Way	Contract Price \$ 29,000
Parcel Number: 012-0727-011	CONTACT PHONE: LISA 3627
CONTACT PERSON: D. Lopez	Contractor: Zimman Building
Property Owner: Robert Smith	Address: 3075 R Street
Address: 1309 Valley Way	City/State/Zip: SACRAMENTO 95818
City/State/Zip: SACRAMENTO 95818	Phone: 916-3627
Phone: 916-264-1901	FAX: 916-264-1901

NATURE OF WORK: (Provide detailed description of work & indicate type of work in selections below.)

Description of Work: Root patch 12x12 1012 Single Family  
Root patch 12x12 1012 Single Family  
Heavy Chokes

<input type="checkbox"/> <b>REEROOF</b> (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES 2 <input checked="" type="checkbox"/> GARAGE 3+ # Stories 1 Material: Wood Siding	(Residential ONLY) <input type="checkbox"/> <b>HVAC INSTALLATIONS</b> <input type="checkbox"/> NEW <input type="checkbox"/> CHANGE-OUT <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"/> Fireplace insert <input type="checkbox"/> Other (describe below) Value of duct work: Equipment: \$ _____ Cut-in: \$ _____ * Design Review approval may be required.	(Residential ONLY) <input type="checkbox"/> <b>WATER HEATER</b> <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> <b>DRY ROT OR TERMITES DAMAGE REPAIR</b> <input type="checkbox"/> Flooding/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Mud/Silt/Sluds <input type="checkbox"/> Exterior * Design Review approval may be required. <input type="checkbox"/> <b>PUBLIC UTILITIES SAFETY INSPECTION</b> * (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.	(Residential ONLY) <input type="checkbox"/> <b>MINOR ELECTRIC and/or MINOR PLUMBING</b> <input type="checkbox"/> Electric Service Change # amps _____ <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Replacement <input type="checkbox"/> Water Service <input type="checkbox"/> Sewer Service <input type="checkbox"/> Gas Line <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste
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NR Faxback Permit updated 12/09/01