

CITY OF SACRAMENTO

Permit No: 0511954

1231 I Street, Sacramento, CA 95814

Insp Area: 1
Thos Bros: 297H5

Site Address: 883 MISSION WY SAC
Parcel No: 008-0091-016

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

CONTRACTOR
OWNER BUILDER

OWNER
TSIHLAS MANUEL
503 27TH ST
SACRAMENTO, CA 95816

ARCHITECT

Nature of Work: RPLC2(E)FURNACESW/NEWSPLITSYSTEMHVAC;RPLC40GALW/HW/50GALPOWERVENTGASW/H;C/O
50AMP ELEC SVC TO
200AMP; CONVERT LNDRY RM TO BATHROOM

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 0 _____ Date _____
Contractor Signature _____

PAID
CITY OF SACRAMENTO

AUG 09 2005

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 8/9/05 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 8/9/05 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.

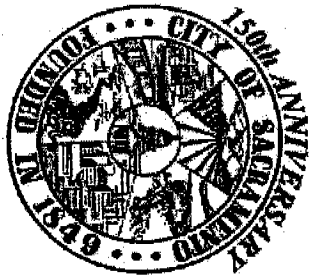
I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier _____ Policy Number _____ 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 8/9/05 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.



808-9370

0511954

DATE: 8/9/05

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
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 quad fee

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

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

JOB ADDRESS: 803 MISON WAY, 95819 UNIT # _____ CONTRACT PRICE \$ 11,000.00

CONTACT PERSON: MAUIEL THOMAS CONTRACT PHONE: 916-341-0405 / 916-505-3811 cell

Property Owner: MAUIEL THOMAS Contractor: _____ License # _____

Address: 503 27th STREET Address: _____

City/State/Zip: SACRAMENTO, CA 95816 City/State/Zip: _____

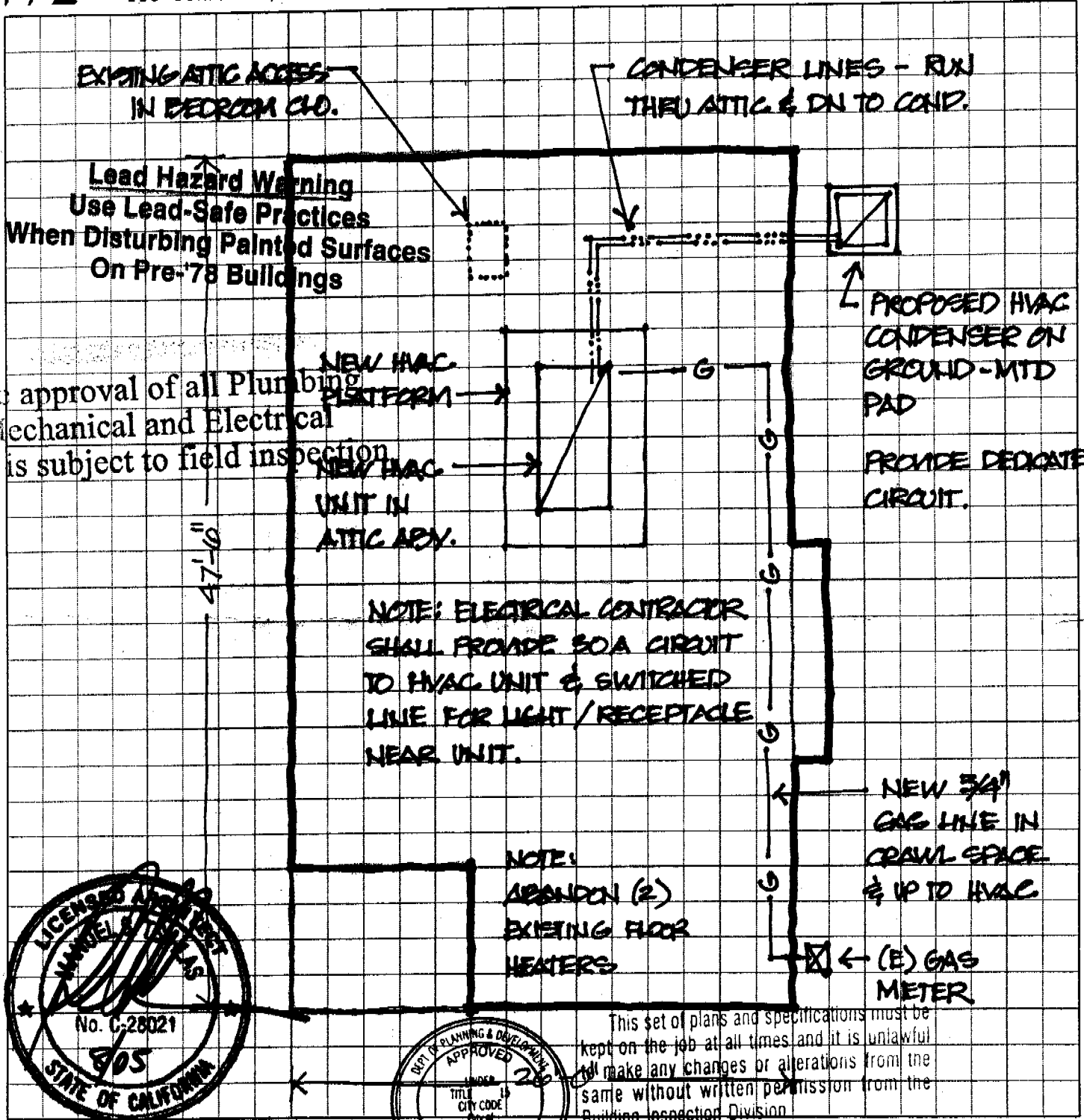
Phone: 916-341-0405 Phone: _____ FAX: _____

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

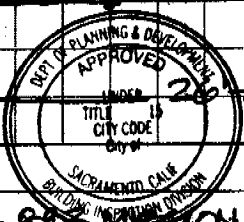
<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HORSE <input type="checkbox"/> GARAGE <input type="checkbox"/> # SQUARES: _____ Material: _____ <input type="checkbox"/> SIDING <input type="checkbox"/> WOOD <input type="checkbox"/> T-1-11 <input type="checkbox"/> Hardz <input type="checkbox"/> Yiny! <input type="checkbox"/> Stucco Note: Design Review approval may be required in certain areas.	<input checked="" 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 checked="" 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) <input checked="" type="checkbox"/> REMOVE (2) EXIST FURNACES Value of duct work: \$ _____ Equipment: \$ _____ Cut-in: \$ _____ Note: Design Review approval may be required for rooftop units.	<input checked="" type="checkbox"/> WATER HEATER (residential ONLY) <input type="checkbox"/> GAS <input type="checkbox"/> ELECTRIC <input checked="" type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input checked="" type="checkbox"/> REMOVE (E) 40 GALL <input checked="" type="checkbox"/> GAS, REMOVE W/ NEW <input checked="" type="checkbox"/> 50 GALL POWER VENT GAS <input type="checkbox"/> DRY ROT OR TERMITTE <input type="checkbox"/> DAMAGE REPAIR (Describe locations below) Note: Design Review approval may be required in certain areas.	<input checked="" type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING (residential ONLY) <input checked="" type="checkbox"/> Electric Service Change 50 AMP SVC <input checked="" type="checkbox"/> # amps <input checked="" type="checkbox"/> New 200 A SVC PANEL <input checked="" type="checkbox"/> New electric circuits <input checked="" type="checkbox"/> NEW TO HVAC UNITS & RE-WIRE POWDER ROOM <input type="checkbox"/> Water Service Replacement <input type="checkbox"/> Sewer Service Replacement <input type="checkbox"/> Gas Line Replacement NEW 3/4" GAS FOR <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste <input checked="" type="checkbox"/> ADD NEW WATER SUPPLY <input checked="" type="checkbox"/> 3" WASTE TO NEW POWDER ROOM. Note: Design Review approval may be required in certain areas.	<input checked="" type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTOR* (Residential and single apartment units ONLY) <input checked="" type="checkbox"/> SMUD SVC CHARGE <input checked="" type="checkbox"/> PGE 3/4" GAS WREG *NOTE: Correction Notice items will require an additional building permit
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

DESCRIPTION OF WORK:

REMOVE OBSOLETE SYSTEMS IN (E) 1-STORY FRAME P.V. : 200 A EURE SVC + WFER,
 NEW 908 AFUE FURNACE & 13 SEER CONDENSER, NEW 50 GALL GAS HWH, NEW 3/4" GAS
 LINES FOR UNIT UPGRADES, (N) POWDER ROOM + LAUNDRY @ (E) & LAUNDRY



The approval of all Plumbing Mechanical and Electrical is subject to field inspection



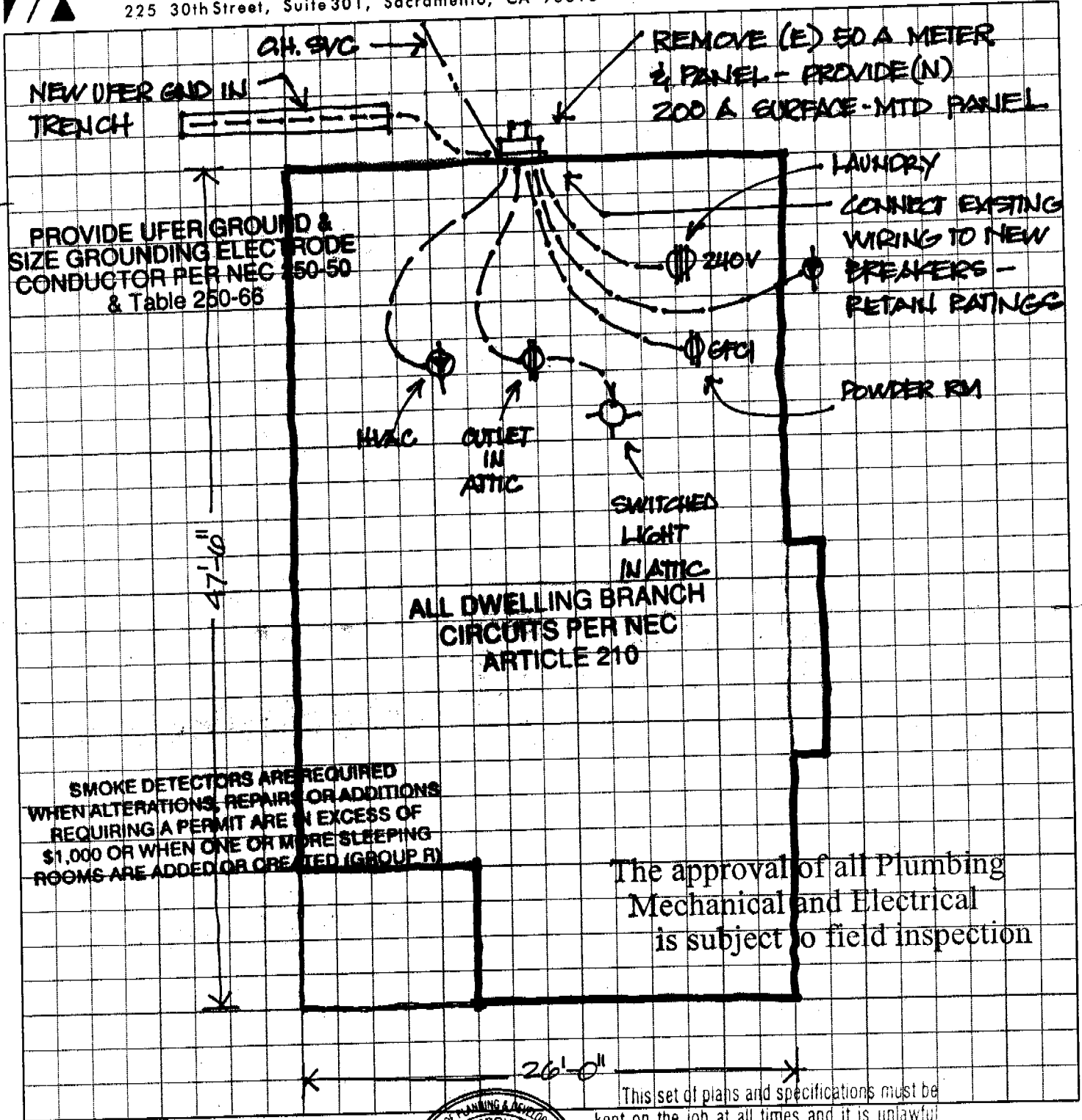
Project Title TSIHLIAS RESIDENCE - 805 30TH AVE SACRO, CA Project No. 099.02

Location MI - PROPOSED NEW HVAC SYSTEM Date 8-2-05

Present 800-7172

Notes By: MANUEL TSIHLIAS Page 1 of 5

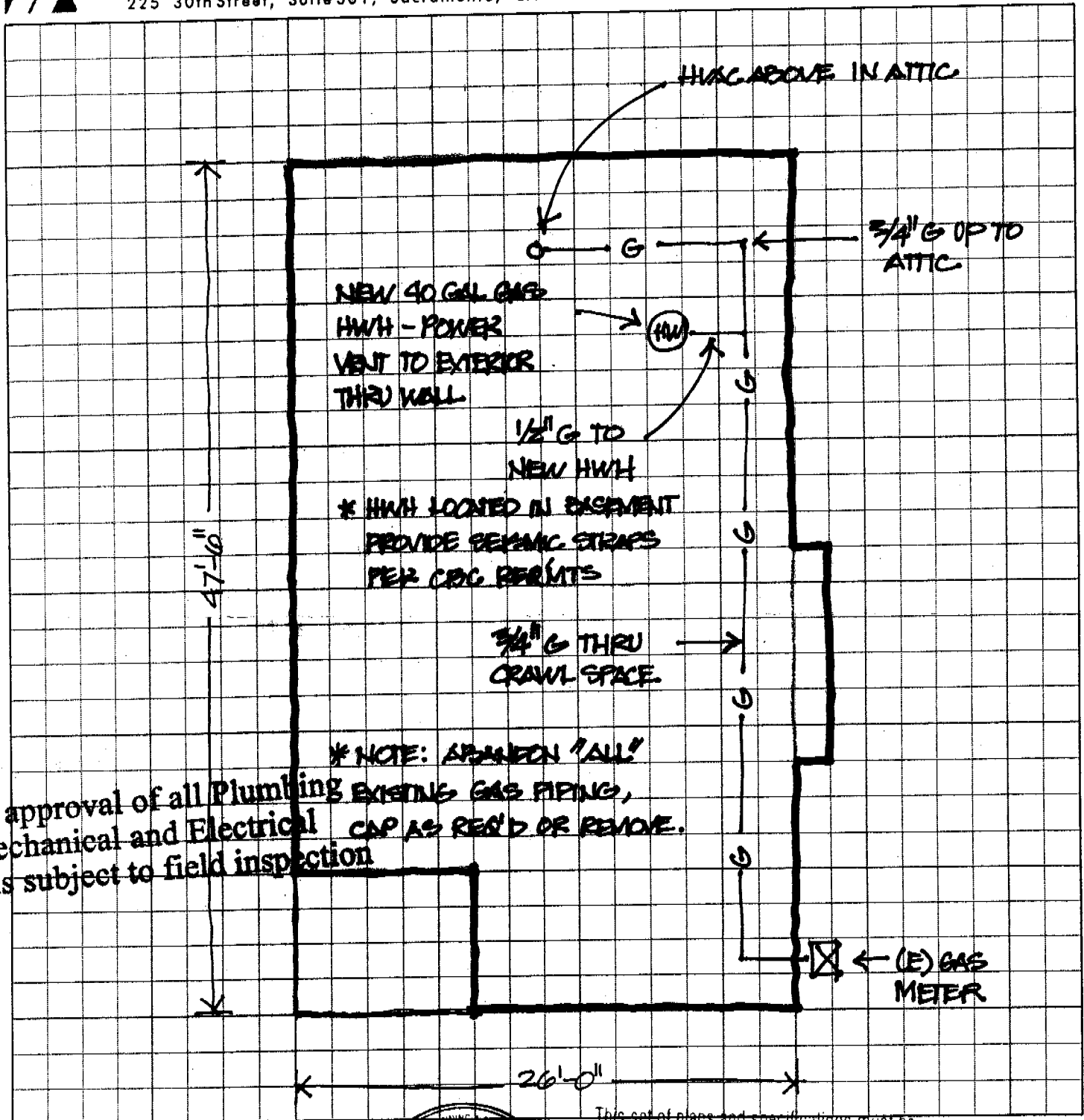
OFFICE COPY



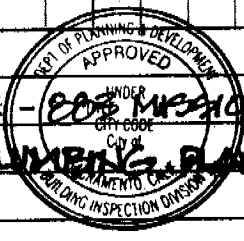
Project Title TSIHLAS RESIDENCE - 803 REVISION W/OUT PERMITS ON Project No. 099.02
 Location EI - PROPOSED ELECTRICAL SERVICE CHANGEOUT Date 8-2-05
 Present _____



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the original without the written permission from the Building Inspection Division. The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.



The approval of all Plumbing Mechanical and Electrical is subject to field inspection



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

The approval of this plan and specification SHALL NOT be held to permit or approve the violation of any City Ordinance or State Law.

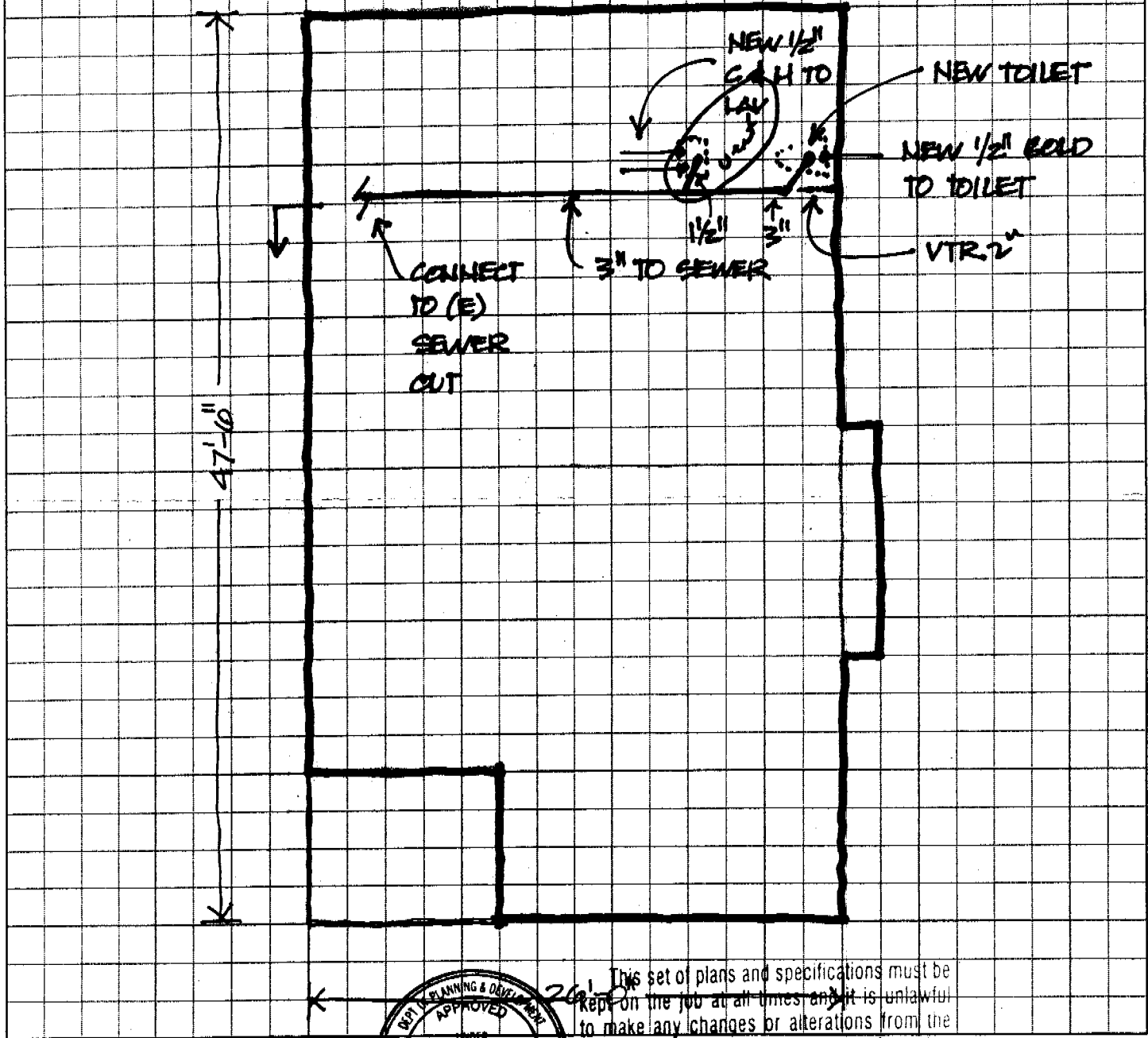
Project Title TSIHLAS RESIDENCE - 808 MISSION WAY, SACRAMENTO, CA Project No. 099.02

Location P1 - PROPOSED PLUMBING PLAN Date 8-2-05

Present _____



The approval of all Plumbing
Mechanical and Electrical
is subject to field inspection



This set of plans and specifications must be kept on the job at all times, and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

Project Title TSIHLAS RESIDENCE - 6023 MISSION WAY SACRAMENTO, CA Project No. 099.02

Location P2 - PROPOSED PLUMBING PLAN Date 8-2-05

Present _____



The approval of all Plumbing
Mechanical and Electrical
is subject to field inspection

~~The approval of all Plumbing
Mechanical and Electrical
is subject to field inspection~~

NEW HOOKUP FOR W/D

TO STORAGE
MECHANICAL
ROOM

NEW 2X4 OF
STUD WALLS
AT TOP LANDING

NEW TOILET

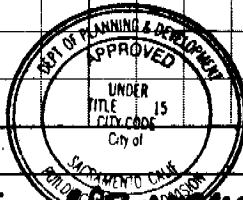
48"

ALL DWELLING BRANCH
CIRCUITS PER NEC
ARTICLE 210

NEW FEDERAL
LAVATORY

1/4" = 1'-0"

NEW POWDER ROOM AT EXISTING
TOP LANDING



This set of plans and specifications must be kept on the job at all times and it is unlawful to make any changes or alterations from the same without written permission from the Building Inspection Division.

Project Title TSIHLAS RESIDENCE - 503 MISSION WAY, SACO, CA Project No. 099.02

Location POWDER ROOM PLAN Date 8-2-05

Present _____

Notes By: MANUEL TSIHLAS Page 5 of 5