

City of Sacramento



**PLANNING
BUILDING
DEPARTMENT**
BUILDING DIVISION
(916) 808-BLDG (2534)

Building Permit

ISSUED

***** Office Use Only *****

Permit No: 03-17006

Date Issued: 10/31/03

Total Amount: \$ 79.22

OCT 31 2003
Sacramento Building Division

***** Please Fill in the Following *****

Site Address: 4108 MCKINLEY BL

Nature of Work: SEWERLINE REPLACMT
ON PROPERTY.

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 C36 License Number 902532 Date 10-30-03 Signature Jim Davies

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 3 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 10-30-03 Applicant/Agent Signature Jim Davies

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

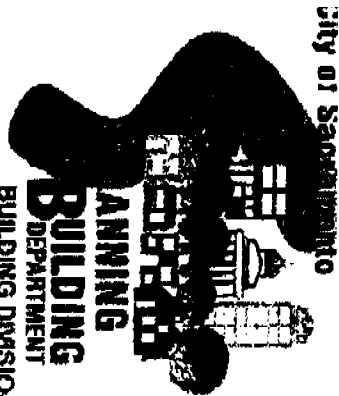
I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.
 I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor 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 1727633-2003 Expiration Date 2-1-2004

(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 10-30-03 Applicant Signature Jim Davies

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.



BUILDING DIVISION
Fax # (916) 264-1901

FAXBACK PERMIT APPLICATION

(certain restrictions apply)

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:

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

Job Address: 4108 McKelley Blvd. Sacramento 95819 UNIT # _____
 Parcel Number: 004-00912009
 CONTACT PERSON: Jim Davies
 Property Owner: Karen Roulsen
 Address: same
 City/State/Zip: SA
 Phone: 957-6163
 CONTRACT PRICE \$: 3059.00
 CONTRACT PHONE: 916-223-7179
 Contractor: Signature Plumbing License # 802532
 Address: P.O. Box 4974
 City/State/Zip: Arbuckle CA 95604-4974
 Phone: _____ FAX: _____

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

Description of Work: Replace sewer line

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES <input type="checkbox"/> GARAGE Stories: 1 2 3+ Material: _____	<input type="checkbox"/> HVAC INSTALLATIONS <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"/> Ch-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wet furnace <input type="checkbox"/> Fire Place insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ _____ Equipment: \$ _____ Cut-in: \$ _____	<input type="checkbox"/> WATER HEATER <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"/> DRY ROT OR TERMITE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Mudset/Studs <input type="checkbox"/> Extentior * Design Review approval may be required.	<input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION * Residential and single apartment units ONLY <input type="checkbox"/> SMOUD <input type="checkbox"/> PG&E	(Residential ONLY) MINOR ELECTRIC and/or MINOR PLUMBING <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Water Service <input type="checkbox"/> Sewer Service <input checked="" type="checkbox"/> Gas Line <input type="checkbox"/> Re-dialnd <input type="checkbox"/> Water <input type="checkbox"/> Waste

* Design Review approval may be required.

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NVR Faxback Permit updated 12/03/01

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

FEE SUMMARY
FOR PERMIT #0317006
Bldg Minor Permit
as of 10-31-2003 Permit Status: READY

Site Address: 4108 MC KINLEY BL SAC
Parcel No: 004-0071-009
Thomas Bros: 297 J4

CONTRACTOR
SIGNATURE PLUMBING
910 SIERRA VIEW CIR
AUBURN CA 95603
Phone: 530-823-7738

OWNER
POULSEN KAREN
4108 MC KINLEY BL
SACRAMENTO CA 95819
Phone:

ARCHITECT

Phone:

Nature of Work: REPLACE SEWERLINE WITHIN THE PROPERTY LINE

Permit Valuation: \$3,059.00
Square Footage: 0

Building Permit	\$75.00	Water Development Fee:	\$0.00
Strong Motion Fee	\$0.00	Sewer Development Fee:	\$0.00
City Bus Oper Tax.....	\$1.22	Regional Sanitation Fee.:	\$0.00
Technology Fee	\$3.00	Pocket Area Road	\$0.00
Housing Surcharge	\$0.00	SAFCA Fee	\$0.00
Res Const Tax	\$0.00	North Natomas	\$0.00
Penalty Fee	\$0.00	FBA-Jacinto Creek.....	\$0.00
Inspections	\$0.00	Refund	\$0.00
Replace Cards	\$0.00		
Renewal Fee	\$0.00	Additional Fees	\$0.00
Water Meter Fee	\$0.00		
		TOTAL FEES	\$79.22
		Payments	\$0.00
		BALANCE DUE	\$79.22

PAID
CITY OF SACRAMENTO

OCT 31 2003

NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES

MODE = MEMORY TRANSMISSION

START=OCT-31 11:40

END=OCT-31 11:44

FILE NO. =328

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK		915308236832	003/003	00:04:05

-CITY OF SACRAMENTO -

***** -PLAN CHECK - ***** 916 264 5987- *****
 10/30/2003 20:53 15308236832 SIGNATURE PLUMBING PAGE 02
 OCT-20-2002 21:52 CITY OF SACRAMENTO



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Carrier SURE FUND Policy Number 17A7033-2003 Expiration Date 2-1-2004

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