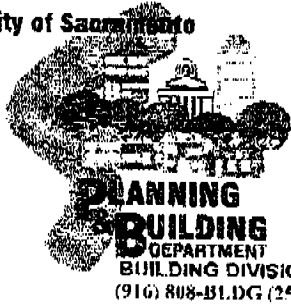


City of Sacramento



Building Permit

ISSUED

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

Permit No: 0509457
Date Issued: 6/29/05
Total Amount: 187.82
Insp Area #: 2

JUN 29 2005 Km
Sacramento Building Division

Inspection Request # (916) 264-7622

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

Site Address: 695 Cotting Way
Nature of Work: Ho shake on roof w/30 yr o.c. comp 18 sq ft

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 C39 License Number 703169 Date 6/29/05 Signature Alma Gonzalez

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 Professions 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: PAID CITY OF SACRAMENTO
Date _____ Owner Signature _____ JUN 29 2005

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city certifies, that the applicant has provided all measurements and locations shown on the application or accompanying drawings and that the applicant has verified the applicability of 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 6/29/05 Applicant/Agent Signature Alma Gonzalez

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.
as 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 713-04-2021 Expiration Date 10/1/05

(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 6/29/05 Applicant Signature Alma Gonzalez

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.

PBF10004

City of Sacramento

FAXBACK PERMIT APPLICATION

(certain restrictions apply)

0509457

Area 2



PLANNING & BUILDING DEPARTMENT

BUILDING DIVISION

Fax # (916) 264-1901

Inspection Request # (916) 264-7522

Credit Card Info on File? Yes No

RESIDENTIAL

APARTMENTS (4+ units per building)

COMMERCIAL (limited)

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:

Job Address: 695 Cutting Blvd	Contract Price: \$ 5700	UNIT #
Parcel Number: 031-11602-0701	CONTACT PHONE: 454-3443	
CONTACT PERSON: Alvin Vazquez	Contractor: Zimmerman P. Roofing	License # 763169
Property Owner: Alvin Vazquez	Address: 3675 P Street	
Address: 695 Cutting	City/State/Zip: Sac. Calif. 95816	Phone: 454-3443
City/State/Zip: Sac. Calif. 95831	Phone: 454-3443	FAX: 455-3784

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

PAID

Description of Work: Roof pitch 12/12 Shale Re-Roof w/ 30 yr O.C. Comp CITY OF SACRAMENTO

JUN 29 2005

<input checked="" type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESH-EET <input type="checkbox"/> HOUSE # SQUARES 2 <input checked="" type="checkbox"/> GARAGE # SQUARES 3+ Material: 30 yr O.C. Comp	(Res detail ONLY) <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"/> C.U.H. <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> F replace insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ Equipment: \$ Cut-in: \$	(Residential ONLY) <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 <input type="checkbox"/> REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior * Design Review approval may be required.	NEIGHBORHOODS PLANNING & BUILDING DEPARTMENT 995 S. BROADWAY SACRAMENTO, CA 95811 (916) 264-1901 FAX: (916) 264-7522 WWW.CITYOF.SACRAMENTO.CA.GOV
<input type="checkbox"/> SIDING <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco	* Design Review approval may be required.	* PUBLIC UTILITIES SAFETY INSPECTION * (Residential and single apartment units ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E	(Residential and single apartment units ONLY) * Design Review approval may be required.

* NOTE: Correction Notice items will require an additional building permit.

NR Faxback Permit updated 12/03/01