

City of Sacramento



(916) 808-BLDC (2534)

Inspection Request # (916) 264-7622

Building Permit

George

Office Use Only

ISSUED

Permit No: 0403598
Date Issued: 3/12/04
Total Amount: 184,20
Inspr. Area #:

MAR 12 2004

Sacramento Building Division

Please Fill in the Following

Site Address: 5033 Lion Crata
Nature of Work: HVAC C/O

my

CONSTRUCTION LENDING AGENCY: I hereby affirm the work for which this permit is issued (Sec. 3097, Civ. C.) Lender's Name

under penalty of perjury that there is a construction lending agency for the performance of

Lender's Address

LICENSED CONTRACTORS DECLARATION: License Class C20 License Number 726129

by affirm under penalty of perjury that I am licensed under provisions of Chapter 9 Professions Code and my license is in full force and effect. Date 3/10/04 Signature

OWNER-BUILDER DECLARATION: I hereby affirm reason (Sec. 7031.5, Business and Professions Code; any city or prior to its issuance, also requires the applicant for such permit to License Law (Chapter 9 (commencing with Section 7000) of Div for the alleged exemption. Any violation of Section 7031.5 by a dollars (\$500.00);

or penalty of perjury that I am exempt from the contractors License Law for the following city which requires a permit to construct, alter, improve, demolish, or repair any structure, a signed statement that he or she is licensed pursuant to the provisions of the Contractors 8 of the Business and Professions Code) or that he or she is exempt therefrom and the basis applicant for a permit subjects the applicant to a civil penalty of not more than five hundred

I, as a owner of the property, or my employees with for sale (Sec. 7044, Business and Professions Code. The Contr who does such work himself or herself or through his/her own of the building or improvement is sold within one year of completi the purpose of sale.)

as a: their sole compensation, will do the work, and the structure is not intended or offered License Law does not apply to an owner of property who builds or improves thereon, and years, provided that such improvements are not intended or offered for sale. If, however, ne owner-builder will have the burden of proving that he/she did not build or improve for

I, as owner of the property, am exclusively contracti The Contractors License Law does not apply to an owner of prop; licensed pursuant to the Contractors License Law).

th licensed contractors to construct the project (Sec. 7044, Business and Professions Code: who builds or improves thereon, and who contracts for such projects with a contractor(s)

I am exempt under Sec. B &

for this reason:

Date Owner Signature

IN ISSUING THIS BUILDING PERMIT, the applicant all measurements and locations shown on the application or accor agreement relating to permissible or prohibited locations for such i or the violation of any private agreement relating to location of i

asserts, and the city relies on the representation of the applicant, that the applicant verified ring drawings and that the improvement to be constructed does not violate any law or private ovements. This building permit does not authorize any illegal location of any improvement vements.

I certify that I have read this application and state that all inform- to building construction and hereby authorize representative(s) o

is correct. I agree to comply with all city and county ordinances and state laws relating s city to enter upon the above mentioned property for inspection purposes.

Date 3/10/04 Applicant/Agent

Signature

WORKER'S COMPENSATION DECLARATION: I

I have and will maintain a certificate of consent to se performance of work for which the permit is issued X I have and will maintain workers' compensation insu this permit is issued. My workers' compensation insu Carrier Cambread Specialty Policy Number 005-00014360

by affirm under penalty of perjury one of the following declarations: sure for workers' compensation as provided for by Section 3700 of the Labor Code, for the

(This section need not be completed if the permit is I shall not employ any person in any manner so as i becomes subject to the workers' compensation provi

, as required by Section 3700 of the Labor Code, for the performance of the work for which ce carrier and policy number are:

Date 3/10/04 Applicant Sign

Exp. Co. Expiration Date 1/1/05

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION CA CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,0 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

(\$100 or less) I certify that in the performance of the work for which this permit is issued, score subject to the workers' compensation laws of California and agree that if I should of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Signature

IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION

THIS PERMIT SHALL EXPIRE BY LIB

ATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.



BUILDING DIVISION
BUILDING DEPARTMENT

Fax # (916) 264-1901

Inspection Request # (916) 264-7622

Credit Card Info on File? Yes No

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: 5033 1 st St. Codevilla | Contract Price \$ 5500 | Unit # |
| Parcel Number: 17-0611-020 | CONTACT PHONE: 685-4616 | |
| CONTACT PERSON: Evan Gaffney | Contractor: Bell Bros. Heating / Air | License # 726129 |
| Property Owner: Joaquin Guerrero | Address: 995 Sweeney Rd. | |
| Address: 5033 1 st St. Codevilla | City/State/Zip: Elk Grove, CA 95624 | |
| City/State/Zip: SAC 95823 | Phone: 685-4616 | FAX: 686-6293 |
| Phone: 295-8100 | | |

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

| | | | |
|--|--|--|---|
| <input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES 1 2 3+ <input type="checkbox"/> GARAGE <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 | <input checked="" type="checkbox"/> HVAC INSTALLATIONS <input type="checkbox"/> NEW <input checked="" type="checkbox"/> CHANGE-OUT <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input checked="" 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"/> 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 TERMITES DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Mud sill/Studs <input type="checkbox"/> Exterior * Design Review approval may be required. <input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION * (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) 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 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 |
|--|--|--|---|

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

FEE SUMMARY
FOR PERMIT #0403598

Bldg Minor Permit
as of 03-12-2004 Permit Status: **READY**

Site Address: 5033 LION GATE WY SAC

Parcel No: 117-0611-020

Thomas Bros: 337J5

CONTRACTOR

BELL BROTHERS HEAT & AIR
9195 SURVEY RD
ELK GROVE, CA 95624
Phone: 916-685-4616

OWNER

GUERRERO JOAQUIN R/ADELA J
5033 LION GATE WY
SACRAMENTO CA 95823
Phone:

ARCHITECT

Phone:

Nature of Work: RES HVAC ROOF MOUNT CHANGEOUT.

Permit Valuation: \$5,500.00

Square Footage: 0

| | | | |
|-------------------------|----------|---------------------------|-----------------|
| Building Permit | \$175.00 | Water Development Fee: | \$0.00 |
| Strong Motion Fee | \$0.00 | Sewer Development Fee: | \$0.00 |
| City Bus Oper Tax..... | \$2.20 | Regional Sanitation Fee.. | \$0.00 |
| Technology Fee | \$7.00 | 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 | \$184.20 |
| | | Payments | \$0.00 |
| | | BALANCE DUE | \$184.20 |

PAID
CITY OF SACRAMENTO
MAY 12 2004
PERMITTING AND DEVELOPMENT SERVICES

MODE = MEMORY TRANSMISSION

START=MAR-12 11:48

END=MAR-12 11:53

FILE NO.=865

| STN NO. | COMM. | ONE-TOUCH/ ABBR NO. | STATION NAME/EMAIL ADDRESS/TELEPHONE NO. | PAGES | DURATION |
|---------|-------|---------------------|--|---------|----------|
| 001 | OK | 2 | 96865293 | 008/008 | 00:04:25 |

-CITY OF SACRAMENTO -

***** -PLAN CHECK - ***** 916 264 5987- *****

CITY OF SACRAMENTO CASHIER'S WORKSHEET

RECEIPT NUMBER: R0403740

TRANSACTION DATE: 03/12/2004
TRANSACTION AMOUNT: 184.20

NOTATION:

APD #: **0403598**

SITE ADDRESS: 5032 LION GATE WY SAC
PARCELS: 117-0611-020

TYPE: Bldg Minor Permit
SUB-TYPE: RES
HOUSING: N
STATUS: ISSUED

Mixed Income Housing
Fee Program
??

TRANSACTION LIST

| Type | Method | Description | Pymt Amount |
|---------|--------|-------------|-------------|
| Payment | Check | | 184.20 |

RECEIPT ACCOUNT ITEM LIST

| Class # | Description | Item # | Total Fee | Prev Pymt | Current Pymt |
|---------|------------------------|--------|-----------|-----------|--------------|
| 200 | Permit--Building-Res | 1100 | 175.00 | .00 | 175.00 |
| 206 | City Business Oper Tax | 1730 | 2.20 | .00 | 2.20 |
| 259 | Technology Surcharge | 1750 | 7.00 | .00 | 7.00 |

PAID
CITY OF SACRAMENTO

MAR 12 2004

NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES