

CITY OF SACRAMENTO

Permit No: 9804052

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 3949 FOLSOM BL SAC

Sub-Type: RES

Parcel No: 0080254015

Housing (Y/N): N

CONTRACTOR

ALLSTATE
1820 DIESEL DR #50
SACRAMENTO CA

95838

OWNER

SAILORS IRENE B
3949 FOLSOM BL
SACRAMENTO CA

95819

ARCHITECT

Nature of Work: PG&E METER MOVE

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 P3 License Number 576501 Date 5-14-98 Contractor Signature [Signature]

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 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 above mentioned property for inspection purposes.

Date 5-14-98 Applicant/Agent Signature [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 State Fund Policy Number 146933797

(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 5-14-98 Applicant Signature [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.

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

PERMIT SERVICES USE ONLY  
PV# 400718



PERMIT NUMBER (Required)  
# 9804052R  
Attach job copy of permit

CITY OF SACRAMENTO  
NEIGHBORHOODS, PLANNING & DEVELOPMENT SERVICES DEPARTMENT

DEVELOPMENT SERVICES DIVISION  
1231 I STREET, RM. 200  
SACRAMENTO, CA 95814

PERMIT SERVICES  
916-264-7619  
FAX 916-264-7046

BUILDING INSPECTIONS  
916-264-5716  
FAX 916-264-8370

**REQUEST FOR PERMIT REFUND**

JOB ADDRESS: 3949 Folsom Blvd  
DATE OF WRITTEN REQUEST: 5-21-98 DATE REQUEST RECEIVED: 5-21-98  
PERMIT FOR: P & E METER MOVE  
REASON FOR REFUND: JOB CANCELLED  
CONTRACTOR: ALLSTATE OWNER: ERENE SAIBOES  
ADDRESS: 1820 Diesel Dr # 50 ADDRESS: 3949 Folsom Bl.  
CITY/ST/ZIP: SACRA CA 95833 CITY/ST/ZIP: SACRA CA  
PHONE: (916) 454-0972 PHONE: (916) 456-4221

REFUND RECIPIENT:  CONTRACTOR  OWNER  OTHER: \_\_\_\_\_

**ORIGINAL PERMIT "JOB COPY" IS REQUIRED FOR REFUND (SCC SECTION 9.01.051)**

AMOUNT PAID		AMOUNT TO BE REFUNDED	
Permit Value	999.00	Adj. Value	999.00
BPF pd	35.00	BPF pd	35.00
PC/PPF pd	49.00	PC/PPF pd	0
SMI pd	0	SMI pd	0
CBL pd	40	CBL pd	40
Tech pd	216	Tech pd	216
Other		Other	
Other		Other	
Other		Other	
Other		Other	
Other		Other	
Other		Other	
Other		(Comm/Res Adman)	30.00 (-50.00)
Total Paid	563.00	Total Refund Amount	736.00

PERMIT SERVICES USE ONLY

Job Card Attached

App. Book Marked

Permit Canceled

Supp. Paper Work

Letter Mailed

REFUND PROCESSED BY: John J. Boyd DATE: 6-27-98  
REFUND APPROVED BY: David P. Brock DATE: 6-28-98

PLEASE ALLOW 30 DAYS FOR PROCESSING