

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0402038

Insp Area: 3

Thos Bros: 317G1

Site Address: 3741 6TH AV SAC

Parcel No: 013-0301-025

Oak Park Design Review

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR

ERIC ERNEST NELSON  
PO BOX 5961  
VACAVILLE CA 95696

OWNER

MCFADDEN CHRISTIAN  
2634 MEADOWLARK CIR  
WEST SACRAMENTO CA 95691

ARCHITECT

Nature of Work: REROOF-TEAR OFF, RESHEET, INSTALL 13SQ OF COMP

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 B License Number 734268 Date 2/11/04 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 [Signature] JAN 11 2004

IN ISSUING THIS BUILDING PERMIT, the applicant represents, **NEIGHBORHOODS PLANNING AND DEVELOPMENT SERVICES** that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvements 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 2/11/04 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 NO EMPLOYEES 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 2/11/04 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.



0402038

DATE: 2/10/04

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)
- CONTACT PERSON: Eric Nelson • CONTRACT PRICE \$ 4,250

Property Owner: Chris McFadden License # 734268  
 Address: 2634 Mcadams Circle  
 City/State/Zip: West Sacramento, CA 95691  
 Phone: (916) 374-9216  
 Contractor: Eric Nelson  
 Address: Po Box 5961  
 City/State/Zip: Vacaville, CA 95696  
 Phone: 707-290-5091 FAX: \_\_\_\_\_

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

<ul style="list-style-type: none"> <li>• REROOF (excluding tile)           <ul style="list-style-type: none"> <li>• TEAR-OFF RESHEET</li> </ul> </li> <li>• HOUSE • GARAGE</li> <li>• SQUARES <u>13</u></li> <li>Material: <u>Composite Shingle</u></li> <li>• SIDING           <ul style="list-style-type: none"> <li>• wood</li> <li>• T-111</li> <li>• Horz</li> <li>• vinyl</li> </ul> </li> <li>• stucco</li> </ul> <p>Note: Design Review approval may be required in certain areas.</p>	<ul style="list-style-type: none"> <li>• HVAC INSTALLATIONS (residential ONLY)</li> <li>• CHANGE-OUT • NEW           <ul style="list-style-type: none"> <li>• Heat Pump</li> <li>• Package</li> <li>• Split system</li> <li>• Roof mount</li> <li>• Cut-in</li> <li>• Heat pump or elect. unit to gas.</li> <li>• Wall furnace</li> <li>• Other (describe below)</li> </ul> </li> </ul> <p>Value of duct work: _____    Equipment: \$ _____    Cut-in: \$ _____</p> <p>Note: Design Review approval may be required for rooftop units.</p>	<ul style="list-style-type: none"> <li>• WATER HEATER (residential ONLY)</li> <li>• GAS • ELECTRIC           <ul style="list-style-type: none"> <li>• Change-out</li> <li>• Electric to Gas</li> <li>• Relocate</li> <li>• New</li> </ul> </li> <li>• DRY ROT OR TERMITTE DAMAGE REPAIR (Describe locations below)</li> </ul> <p>Note: Design Review approval may be required in certain areas.</p>	<ul style="list-style-type: none"> <li>• MINOR ELECTRIC and/or MINOR PLUMBING (residential ONLY)</li> <li>• Electric Service Change # amps</li> <li>• New electric circuits</li> <li>• Re-wire</li> <li>• Water Service Replacement</li> <li>• Sewer Service Replacement</li> <li>• Gas Line Replacement</li> <li>• Re-plumb</li> <li>• Water • Waste</li> </ul>	<ul style="list-style-type: none"> <li>• PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY)</li> <li>• SMUD</li> <li>• PGE</li> </ul> <p>*NOTE: Correction Notice items will require an additional building permit</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

DESCRIPTION OF WORK: Removing & Replacing old Composite Shingle.

# ROOFING QUESTIONNAIRE

Applicant's name: ERIC NELSON Phone: (707) 290-5091

Project Address: 3741 6th Ave Sec

Please check the appropriate boxes. Only check a box if it accurately and completely describes your proposed work, otherwise leave boxes blank.

## 1. ROOFING TYPE

- a.  The existing roofing material is composition shingle, wood shake or shingle, tile or metal. The new roofing material shall be:

Existing      Proposed

30 year laminated dimensional composition

wood shake or shingle

tile

metal that simulates one of the above listed materials

- a.  The existing roofing material is built up, foam or membrane with a roof pitch of 2:12 or less. The new roofing material shall be:

Existing      Proposed

Built up

Foam

Membrane

## 1. GUTTERS

- a.  The existing gutters are fascia gutters.

There is no change proposed to existing gutters.

New fascia gutters shall be provided.

Gutters shall be repaired and/or replaced to match existing.

- b.  The existing gutters are Ogee gutters.

There is no change proposed to existing gutters.

New Ogee gutters shall be provided.

Gutters shall be repaired and/or replaced to match existing.

- c.  There are no existing gutters.

No new gutters are proposed.

New Ogee gutters shall be provided.

## 3. RAFTER TAILS


- a.  There are no exposed rafter tails.

- b.  There are exposed rafter tails.

There is no change or cutting proposed to existing rafter tails.

Rafter tails shall be repaired and replaced to match existing.

By signing below, the applicant certifies that this form accurately describes the proposed work.

Applicant's signature:  Date: 2/1/04

For City Staff use only

Counter Staff LV

- In a DR District Meets DR criteria?  Yes  No (route to DR staff)  
 In a P area or listed (route to P staff)  
 Not in DR/P area