

CITY OF SACRAMENTO  
1231 I Street, Sacramento, CA 95814

Permit No: 0610689  
Insp Area: 2  
Thos Bros: 336F2

Site Address: 371 RIVER ISLE WY SAC  
Parcel No: 031-0590-064

Sub-Type: RES  
Housing (Y/N): N

**CONTRACTOR**  
ALTA CAL ROOFING  
2720 DANUBE AV  
DAVIS CA 95616

**OWNER**  
BLAND DAYMOND L  
371 RIVER ISLE WY  
SACRAMENTO, CA 95831

**ARCHITECT**

Nature of Work: RE-ROOF, T/O, RESHEET, INSTALL 24 SQ'S DIM LAM COMP ROOF\*\*INPROGRESS INSPECTION REQUIRED\*\*

**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 C-39 License Number 729314 Date 7-19-06 Contractor Signature Ronald F Bell

**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 abovementioned property for inspection purposes.

Date 7-19-06 Applicant/Agent Signature Ronald F Bell

**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 7-19-06 Applicant Signature Ronald F Bell

**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.



CITY OF SACRAMENTO  
 www.cityofsacramento.org  
 Help Line: 1-816-808-6656 OR 1-866-EZ-PERMIT  
 Inspection Request: 1-816-808-7622

Downtown Center  
 1231 I Street 200  
 Sacramento 95814  
 North Center  
 2101 Ave., Suite 200  
 Sacramento 95834  
 Fax 1264-1901

# 0610689  
 \$192.65

MINOR PERMIT APPLICATION

Date: 7/16

Faced/web request must be received in this office by 3:00 P.M. to be processed the following workday. Contractors must have a current certificate of Worker's Compensation Insurance. Note: Work started before a Building Permit is issued will be subject to audit fee.

Permits require the City Review are not eligible for the MINOR PERMIT PROGRAM  
 Design Review and Historic Preservation approval may be required if job address is located in these areas (additional forms are required)

IN ORDER TO PROCESS THE REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDED:

Job Address: 391 RIVER ISLE WAY 95831  
 CONTACT INFO Name: Dave Klinker Bidg Type: RESIDENTIAL  
 Property Owner: ALITHA BLIND APARTMENTS (4+ units per building) Unit # Contract Price 9,200  
 Address: 391 RIVER ISLE WAY 95831 Phone # 900-956-1996 Email: NONE  
 City/State/Zip: SACRAMENTO, CA 95831 Contractor: ALITHA CML ROOFING License # 9314  
 Address: 2988 WINOOSA CT  
 City/State/Zip: RESOLVE, CA 95822  
 Phone: 800-956-1996 Fax: 594-5946  
 Pre-Registered? YES NO Registration #

Description of Work: TENT OFF SHAKE ROOF, INSULATION & FLASH SHEETING, DUSTY 50YK COMPRESSOR

<input checked="" type="checkbox"/> Reroof (excluding tile) <input checked="" type="checkbox"/> Tear-Off <input checked="" type="checkbox"/> Reroof <input checked="" type="checkbox"/> House <input type="checkbox"/> Garage # Stories: 1 # Squares: 24 Material: compo <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Hotz <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco	<input type="checkbox"/> HVAC Installations (Residential Only) <input type="checkbox"/> Change-out <input type="checkbox"/> New <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input 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"/> Other (describe below) Value of duct work: Equipment \$ Out-in: \$	<input type="checkbox"/> Water Heater (Residential Only) <input type="checkbox"/> Electric <input type="checkbox"/> Gas <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 Termitte <input type="checkbox"/> Damage Repair <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Keadall/Studs <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior	<input type="checkbox"/> Minor Electric and/or Minor Plumbing (Residential Only) <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Water Service Replacement <input type="checkbox"/> Sewer Service Replacement <input type="checkbox"/> Gas Line Replacement <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> Public Utility Inspection <input type="checkbox"/> Residential single apartment (Only) <input type="checkbox"/> SUD <input type="checkbox"/> G&E NOT: Correction Notices will require an additional permit.
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Office Use Only:

Parcel #:

Date Received:

Date Issued:

Processor's Initials:

Permit #: