

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0513581

Insp Area: 2

Thos Bros: 337D2

Site Address: 7464 TAMOSHANTER WY SAC

Parcel No: 048-0245-015

Sub-Type: RES

Housing (Y/N): N

CONTRACTOR
OWNER BUILDER

OWNER
HIDALGO MARY RUTH
7464 TAMOSHANTER WY
SACRAMENTO, CA 95822

ARCHITECT

Nature of Work: PAPERLESS - T/O, RESHEET, REROOF 18SQ 30YR DIM COMP - IN PROGRESS INSPECTION REQUIRED

ISSUED

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).

CITY OF SACRAMENTO

SEP 06 2005

Lender's Name _____ Lender's Address _____

LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that I am licensed in accordance with Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.

DOWNTOWN PERMIT
CENTER

License Class _____ License Number 0 _____ Date _____ Contractor 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 9-6-2005 Owner Signature [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 9-6-2005 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:

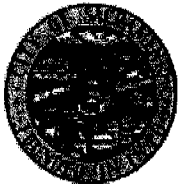
Carrier _____ Policy Number _____ Exp Date _____

(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 9-6-2005 Applicant Signature [Signature]

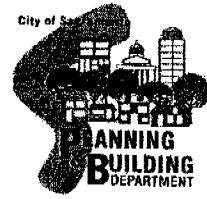
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

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



CITY OF SACRAMENTO
 PLANNING & BUILDING DEPARTMENT
 BUILDING DIVISION
 www.cityofsacramento.org

Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT
 Inspection: 1-916-808-5191



Downtown Permit Center
 1231 I Street, Suite 200, Sacramento, CA 95814

North Permit Center
 2101 Arena Blvd., Suite 200, Sacramento, CA 95834

PRELIMINARY RESIDENTIAL APPLICATION
 1-916-808-5656 OR 1-866-EZ-PERMIT

\$ 186.14

7464 TAMOSHANTER WY, SACTO, CA 95822
 BUILDING SITE ADDRESS SUITE INSP. AREA

APN # 048-0245-015-0000
 ASSESSOR'S PARCEL NO. COMMUNITY PLAN NO. PLAN CHECK NO.

NAME OF APPLICANT	ADDRESS	ZIP CODE	PHONE #	FAX #
HIDALGO MARY RUTH	7464 TAMOSHANTER WY SACTO, CA 95822		(916) 230-3388	
PROPERTY OWNER				
ISSUED				
LICENSED CONTRACTOR			LICENSE # CITY OF SACRAMENTO	
			SEP 06 2005	
ARCHITECT/ENGINEER			DOWNTOWN PERMIT CENTER	

No. of Stories	No. of Rooms	Roof Covering	Area 1 st Floor	Total Area	Garage Area	Patio Area
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THIS PERMIT IS FOR:

- BUILDING MECHANICAL PLUMBING ELECTRICAL SITE FIRE

NATURE OF WORK IN DETAIL

RE-ROOF 18 SQ (30 YRS. DIMENSIONAL & RE-SHEATHING)

\$ 6,000 -
 VALUATION

OS 3581

12/28/2004

AUTHORIZATION REQUESTED

Date : Sept. 6, 2005

To: Building Department

I, MARY RUTH HIDALGO as an owner of 7464 TAMCASHAN FEE
WAY, SACRAMENTO, CA 95822. I authorize Florence Auyeung
(Manlin Auyeung) as my representative to handle all the procedures
with your department.

Any further information, please contact to her as your convenience.

Thank you for your attention.

Sincerely,

Mary Ruth Hidalgo
Owner



CITY OF SACRAMENTO

Downtown Permit Center
1231 I Street, Suite 200
Sacramento, CA 95814

www.cityofsacramento.org

Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT
Inspection: 1-916-808-7622

North Permit Center
2101 Arena Blvd., Suite 200
Sacramento, CA 95834

OWNER BUILDER VERIFICATION

1. Check one below - I or my immediate family (parent, spouse, or child) will perform:

- A - [X] all the work authorized by this permit.
B - [] a portion of the work.
C - [] none of the work.

If B or C is checked, complete 2 or 3 below.

2. A State licensed contractor (*) will be hired to do:

- [] all of the authorized work. [] a portion of the authorized work.

Name _____ Phone _____

Address _____

Type of Work _____

Name _____ Phone _____

Address _____

Type of Work _____

Name _____ Phone _____

Address _____

Type of Work _____

Name _____ Phone _____

Address _____

Type of Work _____

3. [] I will utilize unlicensed person(s) other than my immediate family to perform all or portions of the authorized work. A Certificate of Workers Compensation must be on file at this office.

I declare under penalty of perjury that the above is true and correct. I have read and understand the owner-builder information on the reverse side of this form.

Signed: Property Owner MARY RUTH HIDALGO

Date 9-6-2005 Case No. _____ Permit No. # 0513581

Job Address 7464 TAMOSHANTER WY, SACRTO, CA 95822

Note: * Information regarding unknown contractors or change in subcontractors shall be submitted to the Building Inspection field office.