

TRANSMISSION VERIFICATION REPORT

TIME : 09/19/2005 08:30  
NAME : CITY OF SACRAMENTO  
FAX : 9168085543  
TEL : 9168085656  
SER.# : BROH4J832840

DATE, TIME : 09/19 08:30  
FAX NO./NAME : 94527798  
DURATION : 00:00:16  
PAGE(S) : 01  
RESULT : OK  
MODE : STANDARD  
ECM

# CITY OF SACRAMENTO CASHIER'S WORKSHEET

\*COPY\* 09/19/2005

RECEIPT NUMBER: R0517522

TRANSACTION DATE: 09/16/2005  
TRANSACTION AMOUNT: 191.78  
NOTATION:

APD #: **0514177**  
SITE ADDRESS: 6660 GLORIA DR SAC  
PARCEL: 030-0123-019

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

Mixed Income Housing  
Fee Program  
??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Credit C	TEETER	191.78

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Total fee	Prev Pymt
Item #			
Current Pymt			

**ISSUED**  
**CITY OF SACRAMENTO**  
SEP 19 2005  
**DOWNTOWN PERMIT  
CENTER**

City of Sacramento

Building Permit



X51026

\*\*\*\*\* Office Use Only \*\*\*\*\*

ISSUED

George

Permit No: 0514177
Date Issued: 9/15
Total Amount: 171.78
Insp Area #: 2

SEP 16 2005
Sacramento Building Division

Inspection Request # (916) 264-7622

\*\*\*\*\* Please Fill in the Following \*\*\*\*\*

Site Address: 6660 Gloria Dr.
Nature of Work: 110 & replace 37 eqs of 30 yr 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 C39 License Number 700035 Date 9/15/05 Signature M King for Century Homestead

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 Professions 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 9/15/05 Applicant/Agent Signature M King for Century Homestead Inc.

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.

X 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 232-170 Expiration Date 4/1/06

(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.

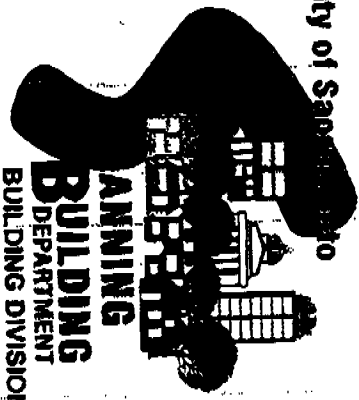
Date 9/15/05 Applicant Signature M King for Century Homestead Inc.

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.

0574173

City of Sacramento



### 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

X51026

In order to process this request, ALL of the following information MUST be provided:

Job Address: 6660 Gloria Dr. Parcel Number: 030-0123-019  
CONTACT PERSON: Terry Contract Price \$ 9760-  
Property Owner: Lawrence Wagner CONTACT PHONE: 916 452-7799  
Address: 6660 Gloria Dr. Contractor: Century Homestead License # 700835  
City/State/Zip: SAC CA 95831 City/State/Zip: Sacramento CA 95826  
Phone: 424-3983 Phone: 916 452-7799 FAX: 916 452-7798

RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (limited)

Inspection Request # (916) 264-7622  
Credit Card Info on File? Yes  No

Unit # \_\_\_\_\_

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

Description of Work: To replace 31 sqs of 30 yr comp

Questions? Call Terry at 916 452-7799. Thanks

<input checked="" type="checkbox"/> REROOF (excluding tile) <input checked="" type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> GARAGE # Stories: 31 # SQUARES: 2 Material: 30 yr comp	<input type="checkbox"/> HVAC INSTALLATIONS <input type="checkbox"/> NEW <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Spill 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"/> Fireplace insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ Equipment: \$ Cur-in: \$	<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 TERMITE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Mud/sill/Studs <input type="checkbox"/> Exterior	<input type="checkbox"/> MINOR ELECTRICAL 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
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\* Design Review approval may be required.

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\* NOTE: Correction Notice items will require an additional building permit.

IVR Faxback Permit updated 12/09/01