

8/4/05



**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

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

RESIDENTIAL       APARTMENTS (4+ units per building)       COMMERCIAL (limited)       Unit #  
 Fax # (916) 264-1901  
 Inspection Request # (916) 264-7622  
 Credit Card Info on File? Yes  No

Job Address: 5418 - 2nd Avenue      Contract Price \$ 10920.00  
 Parcel Number: \_\_\_\_\_      CONTACT PHONE: EARL COX      License # 481974  
 CONTACT PERSON: \_\_\_\_\_      Contractor: KLEEN AIR  
 Property Owner: NATASHA NELSON      Address: 1651 SILICA AVENUE      City/State/Zip: SACRAMENTO, CA 95815      FAX: 980-8409  
 Address: 5418 - 2nd Avenue      City/State/Zip: SACRAMENTO, CA 95817  
 City/State/Zip: \_\_\_\_\_      Phone: 916-922-3995  
 Phone: 916-803-8560

NATURE OF WORK: (Provide detailed description of work & indicate type of work in selections below.)  
C/O HORIZONTAL SPLIT SYSTEM IN ATTIC

# Stories: <u>1</u> Material: _____	<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEED	<input checked="" type="checkbox"/> HVAC INSTALLATIONS <input type="checkbox"/> NEW CHANGE-OUT	(Residential ONLY) <input type="checkbox"/> WATER HEATER <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	(Residential ONLY) MINOR ELECTRIC 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
	<input type="checkbox"/> HOUSE      # SQUARE FEET: <u>2005</u> <input type="checkbox"/> SIDING <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco	<input type="checkbox"/> Heat Pump <input checked="" 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"/> Fireplace insert <input type="checkbox"/> Other (describe below)	<input type="checkbox"/> DRY ROT OR TERMITES DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Mud/sill/Studs <input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION * (Residential and single apartment units ONLY) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E

Value of duct work: \$ \_\_\_\_\_  
 Equipment: \$ \_\_\_\_\_  
 Cut-in: \$ \_\_\_\_\_

\* Design Review approval may be required.

NEIGHBORHOODS PLANNING AND DEVELOPMENT DEPARTMENT  
 CITY OF SACRAMENTO  
 808 J STREET, SACRAMENTO, CA 95811  
 (916) 264-7622  
 FAX: (916) 264-7622

\*NOTE: Correction Notice items will require an additional building permit.  
 N/R Faxback Permit updated 12/09/01