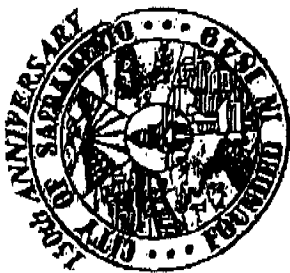


#0615908 \$80.67 called

DATE: 10-11-06



CITY OF SACRAMENTO  
DEVELOPMENT SERVICES DIVISION  
FAXED PERMIT APPLICATION (certain restrictions apply)

Fax # 916-808-8370

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 grad fee

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

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

JOB ADDRESS: 1950 UNIVERSITY PARK DR UNIT # \_\_\_\_\_ CONTRACT PRICE \$ 2250.00

CONTACT PERSON: BECKY SMITH CONTACT PHONE: 916-448-0801

Property Owner: UNIVERSITY PARK HOMES Contractor: ABC PUBG HTS + A/C License # 412127

Address: 965 UNIVERSITY PARK DR Address: 205 22nd ST.

City/State/Zip: SAC TO CA 95825 City/State/Zip: SAC TO CA 95816

Phone: 916-646-6492 Phone: 916-448-3952

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

<ul style="list-style-type: none"> <li>• ROOF (excluding tile)</li> <li>• TEAR-OFF</li> <li>• RESHEET</li> <li>• HOUSE • GARAGE</li> </ul> <p>#SQUARES Material:</p> <ul style="list-style-type: none"> <li>• SIDING             <ul style="list-style-type: none"> <li>• wood</li> <li>• T-111</li> <li>• Hard</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 roof top 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 TERMITE 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 # traps</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             <ul style="list-style-type: none"> <li>• Water</li> <li>• Waste</li> </ul> </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>
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DESCRIPTION OF WORK: REROUTE WATER LINE