TRANSMISSION VERIFICATION REPORT

TIME : 09/13/2005 08:25 NAME : CITY OF SACRAMENTO FAX : 9168085543 TEL : 9168085656 SER.# : BROH4J832840

DATE,TIME FAX NO./NAME DURATION PAGE(S) RESULT MODE

09/13 08:24 93617663 00:00:59 03 0K STANDARD ECM

CITY OF SACRAMENTO CASHIER'S WORKSHEET

RECEIPT NUMBER: R0517035

TRANSACTION DATE: 09/12/2005 TRANSACTION AMOUNT: 195.08

NOTATION:

SEP 1 2 2005

Sacramento Bullding Division

APD #: 0513861

SITE ADDRESS: 315 ZEPHYR RANCH DR SAC

PARCEL: 031-0410-008

TYPE: Bldg Minor Permit SUB-TYPE: RES

HOUSING: N STATUS: ISSUED

Mixed Income Housing

Fee Program

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TRANSACTION LIST

Type	Method	Description	Pymt Amount
		<u></u>	
Payment	Credit C	TEETER	195.08

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	PermitBuilding-Res	1100	175.00	٠.00	175.00
206	City Business Oper Tax	1730	4.80	.00	4.80
207	Strong Motion (SMI)	1600	1.20	.00	1.20
213	General Plan Surcharge	1760	7.08	.00	7.08

City of Sag ANNING SAILDINE (916) \$08-BLDG (2534)

Buile	ding i	Permit SUED.
Permit No: OSTZO Date Issued: 9/12/05 Total Amount: \$1/95.00	<u>e.l</u>	SEP 1 2 2005
Insp Area #:	5 .	Subrumento Building Divisio

******** Picase Fill in the Following *********** Inspection Request # (916) 264-7622 315 ZEPHYR RANCH DRIVE OF (TROP OFF/PLSHEET/ LIFETIME COMP) Site Address: Nature of Work: RS-LOOF 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 (Soc. 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 OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the commeters License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, after, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signod statement that he or she is jeensed pursuant to the removisions of the Contractors 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). L. as a owner of the property, or my employees with wages as their safe compensation, will do the work, and the structure is not intended or offered for safe (Sec. 7044, Business and Professional Code: The Contraction 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 safe. If, however, the building or improvement is sold within one year of completion, the owner-huilder will have the burden of proving that he/she did not build or improve for The Contractors Liceuse Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) liceused pursuant to the Contractors Liceuse 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 applicant 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 interovements. to building construction and hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes. Date 9/9/05 Applicant/Agent Signature

WORKER'S COMPENSATION DECLARATION: 1 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 extrier and policy number are: -----Policy Number Expiration 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 comploy 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 3709 of the Labor-Code, I shall forthwith comply with those provisions. Date 9/9/05 Applicant Signature

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGES UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL PINES 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 I IMPLATION IS MODICED AT

NORCAL (10F2)

315 ZEPNY RONCH

City of S



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 rust have a current certificate of Worker's Comensation Insurance.

Work startd before a Building Permit is issued will be suject to quad fees.

Pemits requiring plan review are not eligite for FAXBACK

In order process this request, <u>ALL</u> of the bllowing information <u>MUST</u> be provided:

DUILDING
DEPARTMENT
JUILDING DIVISION
Fax # (916) 284-1901

HOON: 70NY FARYNIAA Z / JOE GARCA Y SAME SLEN PICRCE S SAME AS ABOVE	Insperion Request # (918) 264-7622 Fredit Card Infoon File? Yes X NoD RESIDENTIAL X	APARTMENTS (4+ units per bui	nits per building) 🛭	COMMERCIAL (limited)
Parcel Number 031-0410-008 Contra CONTACT PERSON: 70NY FARYNIAA Z / 308 GARCA CONT. Property Swiner: GLEN PIERCE Address: Semt as ABOYE City/StateZip:	Job Address: 315 ZEPHYR RANCH DRIVE	95631		Unit #
CONTACT PERSON: 70NY FARYNIAR Z / JOE GARCA CONT. Property Swiner: GLEN PIERCE Address: Semt as ABOYE Chy/Swiezip:	Parcel Number $031-0410-008$	Contract Price \$	12,000.	
Property Junes: SUEN PICRCE Address: Semt as ABOYE City/StateZip:	CONTACT PERSON: TONY FARYNIAD Z / JOE GARCA	CONTACT PHONE:	870-455177	16-9396
Address: Semt as ABOYE City/StateZip:	Property Swiner GLEN PICRCE	Contractor:	NOR CAKROOK	CE License # 684
2	Address: Semil as ABOVE	Address:	Address: 3569 RECTLE	Rd SVITE G
		City/State/Zip: /	RANCHO COLONIA	9 (1) 9574
	Phone: (이) 나기 - 8164	Phone	Phone: 368-7663	FAX 361-5
		h .		

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

* Casima Paviawanoroval may be required	•	D Stucco	D Vinyi	D Horiz	D T-111	D Wood	D SID∦G	TYDE OF TEL -> GO W T. P.O.	ALXO SMALL : LBT BOOF:	Material: G. D GROND SECHOLING	1 Stories 1 2 3+	28 # SQUARES	ME HOUSI CARAGE	RESHEET	TEAR-OFF	REROF (excluding tite)		-	Description of York: REKODE .	
* Design Review approval my be required.	Cutin: \$	Equipment: \$	Value of duct work:	☐ Other lescribe below)	☐ Fireplee Insert	D Wall forace	gas	Heat pmp or elect unit to	ם כיווש	D Roof cunt	□ Splitestern	C Packae	☐ Heat limp	D NEW D (JANGE-OUT	II HVAC INSTALLATIONS	(Residential ONLY)	PHE PROPERTY CHAINS CHAIR	TO SECOND	TEPN OFF CEDENT STARKES	
acint hand building page.	"NOTE: Correction Notice items witeguing an	D SMUD D'G&E	(Residential and single apartment us ONLY)	I PUBLIC UTILITIES SAFETY INPECTION	* Design Review approval may beiquired.	CI Roof Shructure DI Exteur	D Flooring/Joists D Mudt/Studs	REPAIR	D DRY ROT OR TERMITIDAMAGE	© New	☐ Relocate	□ Electric to as	□ Change-ou	D GAS D ELECTIC	□ WATER HEATER	(Residential ONLY)	HELLING CLASS H			
IVIR Fex back Parmit wodaled 12/08/01		D Waste	□ Water	□ Re-plumb	□ Gas Line	□ Sawer Service	□ Water Service	☐ Replacement	D Ra-wins	circuits	D New electric	# amps	☐ Electric Service Change	PLUMBING	MINOR ELECTRIC and/or MINOR	(Residential ONLY)				

(20FZ) 315 ZEPBYN NAOUS