

IN PROGRESS INSPECTION REQUIRED

City of Sacramento



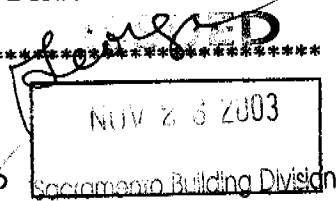
**PLANNING
BUILDING
DEPARTMENT
BUILDING DIVISION**
(916) 808-BLDG (2534)

Inspection Request # (916) 264-7622

Building Permit

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

Permit No: 03-18398
Date Issued: 11/26/03
Total Amount: \$104,46
Insp Area #: 1R



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

Site Address: 4900 "B" St
Nature of Work: re-roof

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 C-34 License Number 033-958 Date 11/24/03 Signature Michael Kpula

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 _____ 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 11/24/03 Applicant/Agent Signature Michael Kpula

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 HU ENGLIC
Policy Number 005-00015726 Expiration Date 1/1/04
(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 11/24/03 Applicant Signature Michael Kpula

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

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:

Credit Card Info on File? Yes No RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

Job Address: 4900 B St
 Parcel Number: 004-0142-014
 CONTACT PERSON: Nicole Hernandez
 Property Owner: Eric & Estelle Stern
 Address: 4900 B St
 City/State/Zip: Sacramento 95819
 Phone: 916-389-9494

Contract Price \$ 4,880.00
 CONTACT PHONE: 916-240-8888
 Contractor: Tim Jones Roofing
 Address: 5800 South Holladay Rd
 City/State/Zip: Granite Bay CA 95746
 Phone: 916-240-8888 FAX: 916-240-8888

Unit #

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

Description of Work: T.O. 1 Roof, roof with off lifetime comp. No 24.

<input checked="" type="checkbox"/> REROOF (excluding tile) <input checked="" type="checkbox"/> HOUSE # SQUARES 116 # SQUARES 2 Material: <u>comp</u> <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input checked="" type="checkbox"/> GARAGE # SQUARES 3+	<input type="checkbox"/> HVAC INSTALLATIONS (Residential ONLY) <input type="checkbox"/> NEW <input type="checkbox"/> CHANGE-OUT <input type="checkbox"/> Heat Pump <input 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) Value of duct work: \$ Equipment: \$ Cut-in: \$	<input type="checkbox"/> WATER HEATER (Residential ONLY) <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 TERMITTE 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"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SNUD <input type="checkbox"/> PG&E	<input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING (Residential ONLY) <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.

NR Faxback Permit updated 12/09/01

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

FEE SUMMARY
FOR PERMIT #0318398
Bldg Minor Permit
as of 11-26-2003 Permit Status: READY

Site Address: 4900 B ST SAC
Parcel No: 004-0142-014
Thomas Bros: 298 A4

CONTRACTOR
TIM JONES ROOFING
5500 CAVITT STALLMAN ROAD
GRANITE BAY CA. 95746
Phone: 916-791-0408

OWNER
ERIC & STELLA STEEN
4900 B ST
SACRAMENTO CA 95819
Phone: 761-2899

ARCHITECT

Phone:

Nature of Work: T/O&RROOF 1 STORY HOUSE&GARAGE W/16 SQS COMP

Permit Valuation: \$4,880.00
Square Footage: 0

Building Permit	\$175.00	Water Development Fee:	\$0.00
Strong Motion Fee	\$0.50	Sewer Development Fee:	\$0.00
City Bus Oper Tax.....	\$1.95	Regional Sanitation Fee.:	\$0.00
Technology Fee	\$7.00	Pocket Area Road	\$0.00
Housing Surcharge	\$0.00	SAFCA Fee	\$0.00
Res Const Tax	\$0.00	North Natomas	\$0.00
Penalty Fee	\$0.00	FBA-Jacinto Creek.....	\$0.00
Inspections	\$0.00	Refund	\$0.00
Replace Cards	\$0.00		
Renewal Fee	\$0.00	Additional Fees	\$0.00
Water Meter Fee	\$0.00		
		TOTAL FEES	\$184.45
		Payments	\$0.00
		BALANCE DUE	\$184.45

PAID
CITY OF SACRAMENTO

NOV 26 2003

NEIGHBORHOODS, PLANNING
AND DEVELOPMENT SERVICES

369.01

MODE = MEMORY TRANSMISSION

START=NOV-26 12:17

END=NOV-26 12:22

FILE NO.=061

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	OK	*	97910444	010/010	00:05:18

-CITY OF SACRAMENTO -

***** -PLAN CHECK - ***** 916 264 5987- *****
 11/25/2003 09:48 FAX 9167910444 Tim Jones Roofing 003

IN PROGRESS INSPECTION REQUIRED

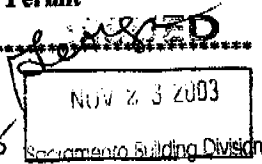


Inspection Request # (916) 264-7622

Building Permit

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

Permit No: 03-18398
 Date Issued: 11/26/03
 Total Amount: \$184.16
 Insp Area #: 12



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

Site Address: 4900 "B" st
 Nature of Work: re-roof

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. 3697, 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: C-39 License Number: 633-532 Date: 11/24/02 Signature: Michael Kjaer

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 3 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.)

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 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: HI EMPLOY
 Policy Number: 007-3001316 Expiration Date: 1/1/04

(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 any; 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: 11/24/03 Applicant Signature: Michael Kjaer

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