

TRANSMISSION VERIFICATION REPORT

TIME : 06/24/2005 09:45  
 NAME : CITY OF SACRAMENTO  
 FAX : 9168085543  
 TEL : 9168085656  
 SER.# : BROH4J832840

DATE, TIME 06/24 09:42  
 FAX NO./NAME 96878468  
 DURATION 00:03:13  
 PAGE(S) 02  
 RESULT OK  
 MODE STANDARD  
 ECM

**CITY OF SACRAMENTO  
 CASHIER'S WORKSHEET**

RECEIPT NUMBER: R0511296

TRANSACTION DATE: 06/24/2005  
 TRANSACTION AMOUNT: 78.98  
 NOTATION:

APD #: **0509135**  
 SITE ADDRESS: 849 COMMONS DR SAC  
 PARCEL: 295-0402-035

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

Mixed Income Housing  
 Fee Program  
 ??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Cash		78.98

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	75.00	.00	75.00
206	City Business Oper Tax	1730	.39	.00	.39
213	General Plan Surcharge	1760	.59	.00	.59
259	Bldg-Technology Surcharg	1750	3.00	.00	3.00

### Building Permit



Inspection Request # (916) 254-7622

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

**ISSUED**

Permit No: 0509135  
 Date Issued: 6/24/05  
 Total Amount: 78,978  
 Insp Area #: 1

JUN 24 2005

Sacramento Building Division

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

Site Address: 849 COMMUNALS DR. SAC CA 95825

Nature of Work: WATER HEATER C/O

**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: 430 License Number: 740770 Date: 6/22/05 Signature: [Signature]

**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.)

I, as owner of the property, am exclusively contracting with licensed contractor 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 above-described property for inspection purposes.

Date 6/22/05 Applicant/Agent Signature: [Signature]

**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: STATE FUND Policy Number: 1008659-2001 Expiration Date: 11-05

(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 capacity so as to become subject to the workers' compensation laws of California and persons that I shall become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 6/22/05 Applicant Signature: [Signature]

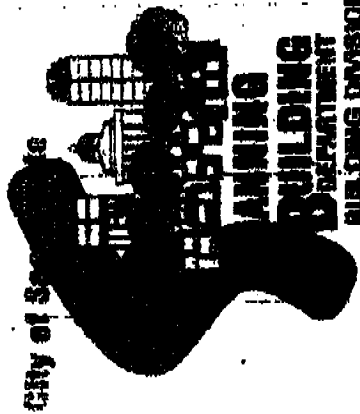
**WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN INDIVIDUAL TO CIVIL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.**

**THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.**

0509135

### FAXBACK PERMIT APPLICATION

(certain restrictions apply)



Permits requested received in this office before 2:00 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:

Inspection Request # 0121-204-7022  
 Fax # (916) 264-1901

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

Job Address: 819 Commodore Dr SAC CA 95825 Unit # \_\_\_\_\_  
 Parcel Number: \_\_\_\_\_  
 CONTACT PERSON: ALANSON KLEINSORGE License # 846378  
 Property Owner: SAME  
 Address: \_\_\_\_\_  
 City/State/Zip: MILTON CA 95693  
 Phone: (916) 877-7106 FAX: (916) 877-7106

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

Description of Work: W/A CHANGE OUT

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHET <input type="checkbox"/> HOUSE <input type="checkbox"/> GARAGE # Stories: <u>1</u> # SQUARES: <u>2</u> Material: _____	(Residential ONLY) <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 clear unit to gas <input type="checkbox"/> Wet furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (descriptive below) Value of duct work: _____ Equipment: <u>3</u> Cut-in: <u>\$</u> <small>* Building Permit is required for all installations.</small>	(Residential ONLY) <input checked="" 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"/> Replace <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITES DAMAGE REPAIR <input type="checkbox"/> Flooring/joints <input type="checkbox"/> Mould/Slabs <input type="checkbox"/> Exterior <input type="checkbox"/> Roof Structure <small>* Design Review approved may be required.</small> <input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION <sup>6</sup> <small>(Residential and single apartment units ONLY)</small> <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E <small>*NOTE: Commercial Notice forms will require an additional building permit.</small>	(Residential OR Y) <b>MINOR ELECTRIC and/or MINOR PLUMBING</b> <input type="checkbox"/> Electric Service Change # amps _____ <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Replaced <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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