

TRANSMISSION VERIFICATION REPORT

TIME : 04/07/2006 09:51
 NAME : CITY OF SACRAMENTO
 FAX : 9168085543
 TEL : 9168085656
 SER.# : BROH4J832840

DATE, TIME	04/07 09:51
FAX NO./NAME	918153560663
DURATION	00:00:38
PAGE(S)	03
RESULT	OK
MODE	STANDARD ECM

**CITY OF SACRAMENTO
 CASHIER'S WORKSHEET**

**ISSUED
 CITY OF SACRAMENTO
 APR 07 2006 *LMC*
 DOWNTOWN PERMIT
 CENTER**

RECEIPT NUMBER: R0605567
 TRANSACTION DATE: 04/07/2006
 TRANSACTION AMOUNT: 78.59
 NOTATION:

**PAID
 CITY OF SACRAMENTO
 APR 07 2006
 NEW CITY HALL**

APD #: **0604711**
 SITE ADDRESS: 9 MONTEROSA CT SAC
 PARCEL: 119-0980-028
 TYPE: Bldg Minor Permit
 SUB-TYPE: RES
 HOUSING: N
 STATUS: **ISSUED**

Mixed Income Housing
 Fee Program
 ??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Credit C	TEETER	78.59

RECEIPT ACCOUNT ITEM LIST

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



PAID
CITY OF SACRAMENTO
APR 07 2006

Fax # 916-808-1901
Downtown Permit Center, New City Hall
915 I Street, 11th Floor, Sacramento, CA 95814

North Permit Center
2101 Arena Blvd., Suite 200, Sacramento, CA 95834

Fax # 916-808-8370

CITY OF SACRAMENTO
PLANNING & BUILDING DEPARTMENT
BUILDING DIVISION
www.cityofsacramento.org
Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT
Inspection: 1-916-808-7622



Activity # CD4711

FAXED PERMIT APPLICATION

(certain restrictions apply)

Date: 4/7/06

Faxed request must be received in this office by 3:00 P.M. to be processed the following workday.

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 grand fee.

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

Job Address: 9 Monterosa Ct. RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)
 Contact Person: JOSEPHINE PERZ Unit # _____ Contract Price \$ 500.00
 Property Owner: JOSEPHINE PERZ Contractor: Plumbing-Time License # 868068
 Address: 9 Monterosa Ct. Address: 360 Memorial Drive #144
 City/State/Zip: SACRAMENTO CA 95822 City/State/Zip: Crystal Lake IL 60014
 Phone: 916-391-0351 Phone: 86-293-3031 x 1042 Fax: 815-351-0663
 Nature of Work: (Provide detailed description of work & indicate type of work in selections below).
 Description of Work: Replace hot water heater / 40 gal gas tall tank

<input type="checkbox"/> Reroof (excluding tile) <input type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input type="checkbox"/> House <input type="checkbox"/> Garage # Stories: _____ # Squares: _____ Material: <input type="checkbox"/> Shing <input type="checkbox"/> Wood <input type="checkbox"/> T-111 <input type="checkbox"/> Horiz <input type="checkbox"/> Viny <input type="checkbox"/> Sincor * Design Review approval may be required.	<input type="checkbox"/> HVAC Installations (Residential Only) <input type="checkbox"/> Change-out <input type="checkbox"/> New <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Out-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: _____ Equipment \$ _____ Calc-in. \$ _____ * Design Review approval may be required.	<input checked="" 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 Termitle <input type="checkbox"/> Damage Repair (Describe Locations Below)	<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"/> Water Service Replacement <input type="checkbox"/> Sewer Service Replacement <input type="checkbox"/> Gas Line Replacement <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste	<input type="checkbox"/> Public Utilities Safety Inspection (Residential and single apartment units Only) <input type="checkbox"/> SMUD <input type="checkbox"/> PG&E NOTE: Correction Notice items will require an additional building permit.
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Building Permit ISSUED CITY OF SACRAMENTO

PAID Office Use Only 0604711 Date Issued: 4/7/06 Total Amount: 78,159 Insp Area #: 2

APR 07 2006 LMC DOWNTOWN PERMIT CENTER

NEW CITY HALL Inspection Request # (916) 264-7622 ***** Please Fill in the Following *****

Site Address: 9 monterosa ct Nature of Work: Replace hot water heater 140 gal gas tank 12yr

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: Leader'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 License Number: 862068 Date: 3/3/06 Signature: [Signature]

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractor's License Law for the following reason (Sec. 7031.5, Business and Professions Code, any city or county ordinance that a permit is required, alter, improve, or repair any structure, prior to its issuance, also requires the applicant for a permit to be a licensed contractor... I, as owner of the property, or the person acting as the contractor, intend to construct, alter, improve, or repair the structure, and the structure is not intended or offered for sale (Sec. 7044, Business and Professions Code)...

IN ISSUING THIS BUILDING PERMIT, the applicant has provided and the city has verified 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... 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: 3/3/06 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: American Home Policy Number: WCC3601490 Expiration Date: 2-21-07 (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.

WARNING: FAILURE TO SECURE WORKERS 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.

PBF10004