

TRANSMISSION VERIFICATION REPORT

TIME : 09/18/2006 12:19
 NAME : CITY OF SACRAMENTO
 FAX : 9168085543
 TEL : 9168085656
 SER.# : BROH4J832840

DATE, TIME : 09/18 12:18
 FAX NO./NAME : 93612443
 DURATION : 00:00:42
 PAGE(S) : 03
 RESULT : OK
 MODE : STANDARD
 ECM

Bonney

**CITY OF SACRAMENTO
 CASHIER'S WORKSHEET**

RECEIPT NUMBER: R0617215
 TRANSACTION DATE: 09/18/2006
 TRANSACTION AMOUNT: 176.90
 NOTATION:

**ISSUED
 CITY OF SACRAMENTO
 SEP 18 2006
 DOWNTOWN PERMIT
 CENTER**

APD #: **0614404**
 SITE ADDRESS: 5812 SPILMAN AV SAC
 PARCEL: 005-0161-021

Mixed Income Housing
 Fee Program
 ??

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

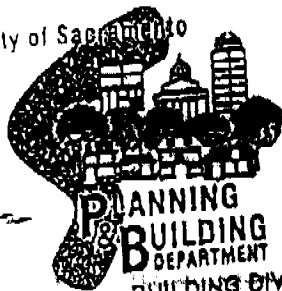
TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Credit C	TEETER	176.90

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	160.00	.00	160.00
206	City Business Oper Tax	1730	4.01	.00	4.01
213	General Plan Surcharge	1760	6.49	.00	6.49
259	Bldg-Technology Surcharg	1750	6.40	.00	6.40

City of Sacramento



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

Building Permit

ISSUED

CITY OF SACRAMENTO

Office Use Only

Permit No: 0614404

SEP 18 2006

Date Issued:

Total Amount:

DOWNTOWN PERMIT CENTER

Please Fill in the Following

Site Address: 5812 Spillman Ave

Nature of Work: SWP / WATER RECD

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.)

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.

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 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 contractors to construct the project (Sec. 7044, Business and Professions Code) licensed pursuant to the Contractors License Law. 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) I am exempt under Sec. B & PC for this reason:

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.

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 TRUCK INSURANCE EXCHANGE, Policy Number B-1950-80-00, Expiration Date 01-01-07

(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 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
DEVELOPMENT SERVICES DIVISION
FAXED PERMIT APPLICATION (certain restrictions apply)

09/15/08

DATE: 9.15.08

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 a fine.

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

RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL

JOB ADDRESS: 5812 Spillman Ave UNIT # _____ CONTRACT PRICE \$ 10,025

CONTACT PERSON: MDNICA CONTRACTOR PHONE: 444-0561

Property Owner: George Adams CONTRACTOR: BONNEY PLUMBING License # 69103553

Address: Same J 95819 Address: 3906 KRSN CT. License # 69103553

City/State/Zip: Same 95819 City/State/Zip: SAC, CA 95827

Phone: 457-1355 Phone: 444-0561 FAX: 801-2443

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

<input type="checkbox"/> XEROOF (existing only) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE <input type="checkbox"/> GARAGE <input type="checkbox"/> STAIRS <input type="checkbox"/> SIDING <input type="checkbox"/> wood <input type="checkbox"/> T-111 <input type="checkbox"/> Hard <input type="checkbox"/> Vinyl <input type="checkbox"/> stone <p>Note: Design Review approval may be required in certain areas.</p>	<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"/> Other <input type="checkbox"/> Heat pump or duct, vent to g/c. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Other (describe below) Value of duct work: _____ Equipment \$ _____ Other \$ _____ <p>Note: Design Review approval may be required for rooftop units.</p>	<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 TERMITE DAMAGE REPAIR (Describe locations below) <p>Note: Design Review approval may be required in certain areas.</p>	<input checked="" type="checkbox"/> MAJOR ELECTRICAL and/or PIPING (residential ONLY) <input type="checkbox"/> Electric Service Change & meter <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input checked="" 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 <p>Note: Design Review approval may be required in certain areas.</p>	<input type="checkbox"/> PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY) <input type="checkbox"/> SMOOD <input type="checkbox"/> PGE <p>*NOTE: Correction Notice items will require an additional building permit</p>
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DESCRIPTION OF WORK:

replacing WTR + SWR lines
threshold

(A) permit form rev online 3/1/0001