

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0508975
Insp Area: 4
Thos Bros: 277J3

Site Address: 805 NOGALES ST SAC
Parcel No: 251-0159-010 DEL PASO HEIGHTS DRD

Sub-Type: RES
Housing (Y/N): N

CONTRACTOR
DOUBLE D BUILDERS, INC
6217 32nd Street
N Highlands CA 95660

OWNER
PEJSA CATHERINE C
805 NOGALES ST
SACRAMENTO, CA 95838

ARCHITECT

Nature of Work: TEAROFF, REROOF W/10SQ30YRLAMDIMCOMP, DRYROT REPAIR; CHANGE OUT SPLIT SYSTEM HVAC; CHANGE OUT 200 AMP SERVICE PANEL

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 _____ License Number 524046 Date 3/28/05 Contractor 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 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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date _____ Applicant/Agent 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 1622653 Exp Date 03/17/2006

(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 2/6/05 Applicant Signature [Signature]

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.



CITY OF SACRAMENTO
PLANNING & BUILDING DEPARTMENT
 BUILDING DIVISION

www.cityofsacramento.org

Help Line: 1-916-264-5656 OR 1-866-62-PERMIT
 Inspection: 1-916-808-4677



Date: June 13, 2005

Downtown Permit Center 1-916-264-6807
 1231 I Street, Suite 200, Sacramento, CA 95814

North Permit Center 1-916-808-2354
 2101 Arena Blvd., Suite 200, Sacramento, CA 95834

Fax # 916-264-1901

FAXED PERMIT APPLICATION

(certain restrictions apply)

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 grand fee.

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IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDED:
 RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

Job Address: 805 Nogales Street Unit #: _____ Contract Price \$ 21,444.00

Contact Person: Don Willford Contract Phone: 916-334-5675

Property Owner: Catherine Pejisa Contractor: Double D Builders Inc. License # 524046

Address: 805 Nogales Street Address: PO Box 417625

City/State/Zip: Sacramento, CA 95838 City/State/Zip: Sacramento, CA 95841

Phone: 916-646-3249 Phone: 916-334-3660 FAX: 916-334-5675

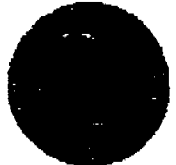
NATURE OF REQUEST: Indicate from the selections below & provide details under description of work.

<input checked="" type="checkbox"/> Reroof (excluding tile) <input checked="" type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input checked="" type="checkbox"/> House <input type="checkbox"/> Garage # Stories: One # Squares: Approx 10 Material: Composition	<input checked="" type="checkbox"/> HVAC Installations (Residential Only) <input type="checkbox"/> Change-out 1 New <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input type="checkbox"/> Split system <input checked="" type="checkbox"/> Roof mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas	<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"/> Minor Electric and/or Minor Plumbing (Residential Only) <input checked="" type="checkbox"/> Electric Service Change # amps 200 <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Water Service <input type="checkbox"/> Replacement <input type="checkbox"/> Sewer Service <input type="checkbox"/> 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: Connection Notice items will require an additional building permit.
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* Design Review approval may be required.
 * Design Review approval may be required.
DESCRIPTION OF WORK: Re-Roof (\$4,250.00), Dryrot - overhang (\$2,119.00), Exterior & Interior Painting (6,890.00), Electrical Service change out 200 amp (\$1,385.00), HVC Change out (\$6,800.00)

Take out paint = \$14,554

Del Paso Heights DRD



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BUILDING DIVISION

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Help Line: 1-916-284-5555 OR 1-866-EZ-PERMIT
Inspection: 1-916-808-4677



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2101 Arena Blvd., Suite 200, Sacramento, CA 95834

ROOFING QUESTIONNAIRE

Applicant's Name: Double D Builders, Inc. Phone: 916-334-3660
Project Address: 805 Nogales Street Sac 95838 Phone: 916-646-3249

Please check the appropriate boxes. Only check a box if it accurately and completely describes your proposed work, otherwise leave boxes blank.

1. ROOFING TYPE

a. The existing roofing material is composition shingle, wood shake or shingle, tile or metal. The new roofing material shall be:

Existing	Proposed
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

30 year laminated dimensional composition
Wood shake or shingle
Tile
Metal that simulates one of the above listed materials

b. The existing roofing material is built up, foam or membrane with a roof pitch of 2:12 or less. The new roofing material shall be:

Existing	Proposed
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Built up
Foam
Membrane

2. GUTTERS

a. The existing gutters are fascia gutters.

- There is no change proposed to existing gutters.
- New fascia gutters shall be provided.
- Gutters shall be repaired and/or replaced to match existing.

b. The existing gutters are Ogee gutters.

- There is no change proposed to existing gutters.
- New Ogee gutters shall be provided.
- Gutters shall be repaired and/or replaced to match existing.

c. There are no existing gutters.

- No new gutters are proposed.
- New Ogee gutters shall be provided.

3. RAFTER TAILS

- a. There are no exposed rafter tails.
- b. Rafter tails shall be repaired and replaced to match existing.

By signing below, the applicant certifies that this form accurately describes the proposed work.

Applicant's signature: [Signature] Date: 6-27-05

FOR CITY STAFF USE ONLY

Counter Staff [Signature]

- In a DR District. Meets DR criteria? Yes No (route to DR staff)
- In a P area or listed (route to P staff)
- Not in a DR or P area

Del Paso Heights DRD

PSF10023

0509875

TOTAL P.03

HEATING AND COOLING EQUIPMENT QUESTIONNAIRE

Applicant's name: Double D Builders, Inc Phone: 916-334-3660

Project Address: 805 Nogales Street, Sacramento, CA 95838

Please check the appropriate boxes. Only check a box if it accurately and completely describes your proposed work, otherwise leave boxes blank.

1. GROUND-MOUNTED UNIT

- a. There is an existing ground-mounted unit.
b. There is no unit in the proposed location.

-SEE NOTE BELOW-

2. ROOF-MOUNTED UNIT

- a. There is an existing roof-mounted unit.
b. There is no existing roof-mounted unit.

By signing below, the applicant certifies that this form accurately describes the proposed work.

Applicant's signature: [Signature] Date: 6/28/05

For City Staff use only Counter Staff [Signature]

- In a DR District Meets DR criteria? Yes No
In a P area or listed (route to P staff)
Not in DR/P area

Del Paso Heights DRD

NOTE: Condensor unit to be located at rear of structure North Elevation

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