

**CITY OF SACRAMENTO  
CASHIER'S WORKSHEET**

*FB*

RECEIPT NUMBER: R0510263  
TRANSACTION DATE: 06/09/2005  
TRANSACTION AMOUNT: 189.13  
NOTATION:

**ISSUED** *jes*  
JUN 09 2005

APD #: **0508172**  
SITE ADDRESS: 523 SANDBURG DR SAC  
PARCEL: 005-0211-007

Sacramento Building Division

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

Mixed Income Housing  
Fee Program  
??

**TRANSACTION LIST**

Type	Method	Description	Pynt Amount
Payment	Credit C	TEETER	189.13

**RECEIPT ACCOUNT ITEM LIST**

Class #	Description	Item #	Total Fee	Prev Pynt	Current Pynt
200	Permit--Building-Res	1100	179.00	.00	179.00
206	City Business Oper Tax	1730	1.20	.00	1.20
213	General Plan Surcharge	1760	1.77	.00	1.77
259	Bldg-Technology Surcharg	1750	7.16	.00	7.16

**ISSUED** *jes*  
JUN 09 2005

Sacramento Building Division



Building Permit

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

**ISSUED** *Yes*

JUN 09 2005

Sacramento Building Division

Permit No: 0508172  
 Date Issued: \_\_\_\_\_  
 Total Amount: \$189.13  
 Insp Area #: 1R

Inspection Request # (916) 264-7622

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

Site Address: 523 San Bura Dr.  
 Nature of Work: Repair - Change out old galvanized pipes to Copper pipes

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 C30 License Number 018039 Date 6/7/05 Signature Rebecca Ortiz

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 6/7/05 Applicant/Agent Signature Rebecca Ortiz

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 \_\_\_\_\_  
 Policy Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

X (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 6/7/05 Applicant Signature Rebecca Ortiz

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:

Job Address: 503 Sandhwa Dr. Unit #  
Parcel Number: 005-0211-007  
CONTACT PERSON: David Ortiz (Sacramento Regd) CONTACT PHONE: 916-447-7014 License # 810039  
Property Owner: Louisa Coruso Contractor: David Ortiz Address: 5205 Mage Tavis Way  
Address: 503 Sandhwa Dr. City/State/Zip: 502 CA 95828 Phone: 447-7014 FAX: 916-398-3983  
City/State/Zip: 502 CA 95828 Phone: 447-7014 FAX: 916-398-3983  
Credit Card info on File? Yes  No  RESIDENTIAL  APARTMENTS (4+ units per building)  COMMERCIAL (limited)

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

Description of Work: Repair existing replacing old galvanized pipes with copper pipes

<input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES <input type="checkbox"/> GARAGE # SQUARES # Stories 1 2 3+ Material:	<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"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elec. 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 <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"/> Exterior <input type="checkbox"/> MudSill/Studs <input type="checkbox"/> Foundation <input type="checkbox"/> Foundation <input type="checkbox"/> Foundation	<input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-write <input checked="" type="checkbox"/> Replacement <input checked="" type="checkbox"/> Water Service <input type="checkbox"/> Sewer Service <input type="checkbox"/> Gas Line <input checked="" 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.

FBP Feedback, Permit updated 12/20/01

**FEE SUMMARY**  
**FOR PERMIT #0508172**  
**Bldg Minor Permit**  
 as of 06-08-2005 Permit Status: **READY**

Site Address: **523 SANDBURG DR SAC**  
 Parcel No: 005-0211-007  
 Thomas Bros: 298A5

CONTRACTOR  
 SACRAMENTO REPIPE  
 8305 MAPLE TRAILS WAY  
 ELK GROVE, CA 95826  
 Phone: 916-447-7014

OWNER  
 PARKER KAREN/ROBERTA A. AUSTIN  
 523 SANDBURG DR  
 SACRAMENTO, CA 95814  
 Phone: 916-447-7014

ARCHITECT

**PAID**  
**CITY OF SACRAMENTO**

**JUN 09 2005**  
**NEIGHBORHOODS PLANNING**  
**AND DEVELOPMENT SERVICES**

**Nature of Work:** REPLACE WATER SERVICE AND REPIPE HOT & COLD WATER PIPE INSIDE BUILDING.

Permit Valuation: \$3,000.00  
 Square Footage: 0

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**PAID**  
**CITY OF SACRAMENTO**  
**JUN 09 2005**

**NEIGHBORHOODS PLANNING**  
**AND DEVELOPMENT SERVICES**  
 Payments .....: **\$189.13**  
 Payments .....: **\$0.00**  
**BALANCE DUE .....: \$189.13**

TRANSMISSION VERIFICATION REPORT

TIME : 06/09/2005 14:24  
NAME : CITY OF SACRAMENTO  
FAX : 9168085543  
TEL : 9168085656  
SER. # : BROH4J832840

DATE, TIME : 06/09 14:23  
FAX NO./NAME : 96883998  
DURATION : 00:00:58  
PAGE(S) : 04  
RESULT : OK  
MODE : STANDARD  
ECM

CITY OF SACRAMENTO  
CASHIER'S WORKSHEET

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