

MODE = MEMORY TRANSMISSION START=JUL-22 09:40 END=JUL-22 09:45

FILE NO. = 606

STN NO.	COMM.	ONE-TOUCH/ ABBR NO.	STATION NAME/EMAIL ADDRESS/TELEPHONE NO.	PAGES	DURATION
001	634		97910408	000/003	00:00:00

-CITY OF SACRAMENTO

***** -PLAN CHECK - ***** 916 264 5987- *****

CITY OF SACRAMENTO CASHIER'S WORKSHEET

RECEIPT NUMBER: R0513281
 TRANSACTION DATE: 07/22/2005
 TRANSACTION AMOUNT: 190.44
 NOTATION:

ISSUED *[Signature]*

JUL 21 2005

Sacramento Building Division

APD #: **0510763**
 SITE ADDRESS: 104 44TH ST SAC
 PARCEL: 004-0077-002

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	190.44

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	175.00	.00	175.00
206	City Business Oper Tax	1730	2.98	.00	2.98
207	Strong Motion (SMI)	1600	.74	.00	.74
213	General Plan Surcharge	1760	4.72	.00	4.72
259	Bldg-Technology Surcharg	1750	7.00	.00	7.00

PAID
CITY OF SACRAMENTO

JUL 21 2005

**RECORDS MANAGEMENT
 AND DEVELOPMENT SERVICES**

Jim Jones



Building Permit

ISSUED *DM*

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

Permit No: 0510763
Date Issued: 7/22/05
Total Amount: \$190.44
Insp Area #:

JUL 21 2005
Sacramento Building Division

Inspection Request # (916) 264-7622

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

Site Address: 104 44th St
Nature of Work: Re-Roof

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 C-39 License Number 588 388 Date 7/21/05 Signature Michael V. Furel

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 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 7/21/05 Applicant/Agent Signature Michael V. Furel

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 AAA American
Policy Number 006-00024555 Expiration Date 7/21/05

(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 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 7/21/05 Applicant Signature Michael V. Furel

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
PLANNING & BUILDING DEPARTMENT
BUILDING DIVISION

www.cityofsacramento.org
 Help Line: 1-916-264-5658 OR 1-866-EZ-PERMIT
 Inspection: 1-916-808-4677

Downtown Permit Center 1-816-264-8807
 1231 I Street, Suite 200, Sacramento, CA 95814

North Permit Center 1-816-808-2354
 2101 Arena Blvd., Suite 200, Sacramento, CA 95834
 Fax # 916-264-1901



FAXBACK 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. Contractors must have a current certificate of Worker's Compensation Insurance. Work started before a Building Permit is issued will be subject to quad fee.

Permits requiring plan review are not eligible for FAXBACK

In order to process this request, **ALL** the following information **MUST** be provided:

Credit Card Information on File? Yes No
 Job Address: 104 4th St
 Contact Person: Nicole Valenzuela
 Property Owner: Leslie McKillop
 Address: 104 4th Street
 City/State/Zip: SAC, CA
 Phone: 916-466-3911
 Residential Apartments (4+ units per building) Commercial (limited)
 Unit # _____ Contract Price \$ 7,440.00
 Contact Phone: 916-466-3911
 Contractor: Tim Jones Roofing
 Address: 5800 County Sutterland Rd.
 City/State/Zip: Granite Bay, CA 95746
 Phone: 916-791-0408

Description of Work: Remove Comp. and Re-Roof with Boy's Comp.
 Nature of Work: (Provide detailed description of work & indicate type of work in selections below)

<input checked="" type="checkbox"/> Reroof (excluding tile) <input checked="" type="checkbox"/> Tear-Off <input type="checkbox"/> Resheet <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Garage # Stories: 1 # Squares: 32 Material: <u>Comp.</u> <input type="checkbox"/> Siding <input type="checkbox"/> Wood <input type="checkbox"/> T-11 <input type="checkbox"/> Horiz <input type="checkbox"/> Vinyl <input type="checkbox"/> Stucco	<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"/> Cut-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: 5 Cut-in: \$ _____ * Design Review approval may be required.	<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 Termites Damage Repair (Describe Locations Below) * Design Review approval may be required.	<input type="checkbox"/> Minor Electric and/or Minor Plumbing (Residential Only) <input type="checkbox"/> Electric Service Change # _____ <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.
--	---	---	---	---

PBF10002