

U:/Forms/Counter/OwnerBuilderVerification.doc

## CITY OF SACRAMENTO

www.cityofsacramento.org Help Line: 1-916-808-5656 OR 1-866-EZ-PERMIT Inspection: 1-916-808-7622

Downtown Permit Center 1231 | Street, Suite 200 Sacramento, CA 95814

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

## OWNER BUILDER VERIFICATION

1. Check one below - I or my immediate family (parent, spouse, or child) will perform:		
A $\square$ all the work authorized by this permit. B $\square$ a portion of the work. C $\square$ none of the work.		
If B or C is checked, complete 2 or 3 below.		
2. A State licensed contractor (*) will be hired to do:		
all of the authorized work.		a portion of the authorized work.
Name		Phone
Type of Work		
·		Phone
. 11		
Type of Work		
Name		
NameAddress		
Address  Type of Work		
Name		
Address		
Type of Work		
3.   I will utilize unlicensed person(s) other than my immediate family to perform all or portions of the authorized work. A  Certificate of Workers Compensation must be on file at this office.		
I declare under penalty of perjury that the above is true and correct. I have read and understand the owner-builder information on		
the reverse side of this form.	Tiller	
Signed: Property Owner (Printed name)	un (	Signature) 0515935
Date $10/7/05$ Case No		Permit No. <u>05/5</u> (5)
Job Address 1500 MAIN	AUE	
Note: * Information regarding unknown contractors or change in subcontractors shall be submitted to the Building Inspection		
Note: * Information regarding distance of the field office.		

10/11/04