CITY OF SACRAMENTO CASHIER'S WORKSHEET

ISSUED

RECEIPT NUMBER: R0506559

TRANSACTION DATE: 04/19/2005

TRANSACTION AMOUNT: 190.71

NOTATION:

APR 1 9 ZUUD

Sacramento Building Division

APD #: 0505259

SITE ADDRESS: 1 LAGUNA SECA CT SAC PARCEL: 031-0510-065

TYPE: Bldg Minor Permit

SUB-TYPE: RES HOUSING: N

STATUS: ISSUED

Mixed Income Housing

Fee Program

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Credit C	TEETER	190.71

RECEIPT ACCOUNT ITEM LIST

Class # Description	Item #	Total Fee	Prev Pymt	Current Pymt
200 PermitBuilding-Res	1100	175.00	.00	175.00
206 City Business Oper Tax	1730	3.19	.00	3.19
207 Strong Motion (SMI)	1600	.80	.00	.80
213 General Plan Surcharge	1760	4.72	.00	4.72
259 Bldg-Technology Surcharg	1750	7.00	.00	7.00

PAIL CITY OF SACE AND STOLER

APR - Walling

FOR NEIGHBORHOODSUPLANNING AND DEVELOPMENT SERV. 25

ISSUED

APR 1 9 ZUUD

Sacramento Building Division

IN PROGRESS INSPECTION REQUIRED

Building Permit

City of Sacramento BUILDING DIVISION (916) 808-BLDG (2534)

City of Sacraticality	******* Office Use Only *******************
	Permit No: <u>0505259</u>
235810	Date Issued: 4-19-05 APR 1 9 2005
PLANNING	Total I tilloane.
BUILDING	******* Please Fill in the Sollements Building Division
BUILDING DIVISION	Site Address: 1 Laguas Seca CT
(916) 808-BLDG (2534)	Nature of Work: Re Cook To 1 ages Shake
************	******************
CONSTRUCTION LENDING AGENCY: I hereby affithe work for which this permit is issued (Sec. 3097, Civ. C).	rm under penalty of perjury that there is a construction lending agency for the performance of Lender's Address
LICENSED CONTRACTORS DECLARATION: 1 (commencing with section 7000) of Division 3 of the Business License Class License Number 70 0945	hereby affirm under penalty of perjury that I am licensed under provisions of Chapter 9 and Professions Code and my license is in full force and effect. Date ZSOF Signature Is
reason (Sec. 7031.5, Business and Professions Code; any city of	under penalty of perjury that I am exempt from the contractors License Law for the following county which requires a permit to construct, alter, improve, demolish, or repair any structure, of file a signed statement that he or she is licensed pursuant to the provisions of the Contractors ivision 8 of the Business and Professions Code) or that he or she is exempt therefrom and the

OWNER-BUILDER DECLARATION: 1 hereby affir reason (Sec. 7031.5, Business and Professions Code; any city prior to its issuance, also requires the applicant for such permi License Law (Chapter 9 (commencing with Section 7000) of 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 fit 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 experience 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/shedid not build or improve for the purpose of sale.) ively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code;

I, as owner of the property, and execusively c	CHURCHIS MICH HECHSON CONTO	101010001111111111111111111111111111111		eccioere with a combractor
I, as owner of the property, and execusively of the Contractors License Law does not apply to an own	er of property who builds or im-	proves thereon, and who co	unacts for anch I	HOJECT WITH a COUNTERO
icensed pursuant to the Contractors License Law).		i	1.7	
Lam exempt under Sec.	B & PC for this reason:			
raint excitipt didds out.				

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 of 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_ 4 1500	Applicant/Agent Signatur	vel.
•	7/ \	

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the follow 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

There 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:

Policy Number Expiration Date

Owner Signature

(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

Applicant 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 ADDITIONAL 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.

Inderson



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:

10b 10TO	a	City/State/Zip: 1-0. 4<628	Address: 4168 Trackfield his	Property Owner: Tow Howard	CONTACT PERSON: Jessy House	Parcel Number: (32/- 03/0) - 06 3	Job Address. 1 CAGULTA SCCT (1)		RESIDENTIAL N
	SING FAX:	K S	Houses C33 (Schools)	1	CONTROL FIRMS	CONTROL PROME 7277 1 1 2	Confract Dring \$ 1000 CO		APARTMENTS (4+ units per building)
	626. 3502	75763))	ı	シトかのられ			Unit	COMMERCIAL (limited)

781-6794

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

y be required.		D SIDING D Wood D T-111	Indiana 10 th	# Stories 1 2 3+	HOUSE GARAGE	<u></u>		Description of Work: (C 1 1 Ave C 2000)
val may be required.	Other (describe below) Value of duct work: Equipment: \$		Cut-in - Heat pump or elect, unit to	Split system Roof mount	D Heat Pump	HVAC INSTALLATIONS IN NEW ID CHANGE-OUT	Rasidaniiai ONI Y)	
'NOTE: Correction Notice items will require an additional building permit.	(Residential and single apartment units ONLY) [I] SMUD [I] PG&E	☐ Flooring/Joists ☐ Mudsill/Studs ☐ Roof Structure ☐ Exterior Design Review approval may be required.	DRY ROT OR TERMITE DAMAGE REPAIR	☐ Relocate	Change-out Electric to Gas	D GAS D ELECTRIC N	ECTION REQUIRED	1-1-1
IVR Fexback Permit updated 12/09/01	D Water D Waste	Water Service Sewer Service Gas Line	☐ Re-wire ☐ Replacement	New electric circuits	☐ Electric Service Change # amps	MINOR ELECTRIC and/or MINOR PLUMBING	(Residential ONLY)	

(certain restrictions apply)

TRANSMISSION VERIFICATION REPORT

TIME : 04/19/2005 09:50 NAME : CITY OF SACRAMENTO FAX : 9168085543 TEL : 9168085656

SER.# : BROH4J832840

DATE, TIME FAX NO./NAME DURATION PAGE(S) RESULT MODE

04/19 09:49 96265506 00:00:58 04 OK STANDARD

ECM

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Sacramento Building Division

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