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DOMCO PLUMBING INC
10/10/2005 15:35 9163530283

DATE: 10/10/05

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
FAXED PERMIT APPLICATION (certain restrictions apply)
Fax # 916-264-1991

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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 equal fee

IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDED:

☒ RESIDENTIAL ☐ APARTMENTS (4+ units per building) ☐ COMMERCIAL (limited)

JOB ADDRESS: 6421 Sun River Dr. UNIT # ____ ⇒ CONTRACT PRICE $ 4600.00

⇒ CONTACT PERSON: Teresa Stanford ⇒ CONTACT PHONE: (916) 353-0203

Property Owner: Eversene Heard
Address: 6421 Sun River Dr.
City/State/Zip: Sacramento, CA 95828
Phone: (916) 821-4559

Contractor: Domco Plumbing License # 704896
Address: PO box 1398
City/State/Zip: Folsom, CA 95763
Phone: 916-353-0203 FAX: 916-353-0283

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

☐ REROOF (excluding tile)
- ☐ TEAR-OFF
- ☐ RESHEET

☐ HOUSE ☐ GARAGE

#SQUARES _____

Material: _____

☐ SIDING
- ☐ wood
- ☐ T-111
- ☐ Hardi
- ☐ vinyl
- ☐ stucco

Note:
Design Review approval may be required in certain areas.

☐ HVAC INSTALLATIONS (residential ONLY)

☐ CHANGE-OUT ☐ NEW
- ☐ Heat Pump
- ☐ Package
- ☐ Split system
- ☐ Roof mount
- ☐ Cut-in
- ☐ Heat pump or elect. unit to gas.
- ☐ Wall furnace
- ☐ Other (describe below)

Value of duct work:: Equipment: $_____

Cut-in: $ _____

Note:
Design Review approval may be required for rooftop units.

☒ WATER HEATER (residential ONLY)

☒ GAS ☐ ELECTRIC
- ☒ Change-out
- ☐ Electric to Gas
- ☐ Relocate
- ☐ New

☐ DRY ROT OR TERMITE DAMAGE REPAIR (Describe locations below)

Note:
Design Review approval may be required in certain areas.

☐ MINOR ELECTRIC and/or MINOR PLUMBING (residential ONLY)
- ☐ Electric Service Change # amps _____
- ☐ New electric circuits
- ☐ Re-wire
- ☐ Water Service Replacement
- ☐ Sewer Service Replacement
- ☐ Gas Line Replacement

re-plumb
☐ Water ☐ Waste

☐ PUBLIC UTILITIES SAFETY INSPECTION* (Residential and single apartment units ONLY)
- ☐ SMUD
- ☐ PGE

**NOTE:*
Correction Notice items will require an additional building permit

DESCRIPTION OF WORK: R/R Water Heater