HV

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or Agent

BUILDING SITE ADDRESS	SUITE	INSP. AREA
1700 G St		1R

ASSESSOR PARCEL NO.	COMMUNITY PLAN NO.	PLAN CHECK NO.
002 0176 003		

NAME OF APPLICANT	ADDRESS	ZIP CODE	PHONE NO.
LICENSED CONTRACTOR FAX			
PROPERTY OWNER			
ARCH. ENGR.			
		LICENSE NO.	

NO. OF STORIES	NO. OF ROOMS	ROOF COVERING	AREA 1ST FLOOR	TOTAL AREA	GARAGE AREA	PATIO AREA	USE ZONE	STREET WIDTH
		37 Ø						

THIS PERMIT IS FOR: Ø BUILDING ◯ MECHANICAL ◯ PLUMBING ◯ ELECTRICAL ◯ SITE ◯ FIRE

OCCUP. GROUP

NATURE OF WORK IN DETAIL: t/o resheet reroof w/30 yr dim lam comp OK DK Dmitt 7-31-00

CONSTR. TYPE

FLOOD STATUS ( ) SPECIAL CONDITIONS ATTACHMENTS: in progress insp required

CITY OF SACRAMENTO BUILDING INSPECTION DIVISION — **PERMIT SERVICES 264-7619**

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 _____

☐ (This section need not be completed if the permit is for one hundred dollars ($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: _____ Applicant: _____ (Signature)

VALUATION	$ 9000
ISSUED BY:	[signature]
DATE ISSUED	8-1-00
BUILDING PERMIT FEE	$
PLAN CHECK/ PROC. FEE	$
S.M.I FEE	$
CONST. EXCISE TAX	$
CITY BUS LICENSE	$
TECH. FEE	$
WATER DEV. FEE	$
CITY SEWER DEV. FEE	$
REG. SEWER FEE	$
RESIDENTIAL CONST. TAX	$
TOTAL FEES	$

FIRE SP.

FED CODE

PERMIT NO. 00 0 8 7 1 4

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 180 DAYS.