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Lender's Name			Lender'sAddress				
			eby affirm under penalty of rofessions Code and my licer			provisions o	f Chapter 9
License Class Li	cense Number Date_		Contractor Signature				
OWNER-RUIT DER I	FCI ARATION: I	hereby affirm und	er penalty of perjury that I ar	m exemnt from th	a contractors Licen	ca Law for t	he following
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nundred dollars (\$500.00);				in the second second			
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(I, as a owner of the	property, or my employ	yees with wages as	their sole compensation, wi	ll do the work, and	d the structure is no	ot intended o	or offereator
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Permit No: 0215459

CITY OF SACRAMENTO



CITY OF SACRAMENTO

DEVELOPMENT SERVICES DIVISION

FAXED PERMIT APPLICATION (certain restrictions apply) Fax # 916-264-1901

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 s	Note: Work started before a Building Permit is issued will be subject to guad fee	issued will be subject to quad fee	
	IN ORDER TO PROCESS TH	IIS REQUEST, ALL THE FOLLO	IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDED:	PROVIDED:
-RESIDENTIAL [] APAR	APARTMENTS (4+ units per building)	COMMERCIAL (limited)		
CK	- Grove the	UNIT#	☐ CONTRACT PRICE \$	50
D-CONTACT PERSON: 40/6	Rai	mile 2 CONTACT PHON	PHONE: 9/6 439-25	2880
roperty Owner: 729	m	Contractor:		License #
2	GNOUE AVE	Address:		
City/State/Zip:	and CA	- City/State/Zip:		
hone: 9/6 - 439 -	2540	Phone:	FAX: 9/6-	-854-979S
Œ		Indicate from the selections below & provide details under description of work	er description of work.	
REROOF (excluding tile)	HVAC INSTALLATIONS (residential ONLY)	(residential ONLY)	MINOR ELECTRIC and/or MINOR PLUMBING	AFETY INSPECTION:
□ RESHEET	CHANGE-OUT NEW	LI GAS LI BLECTRIC	(residential ONLY)	(Residential and single apartment units ONLY)
HOUSE GARAGE	Package	[] Change-out	Service Change	
## STO AIG S: SQUARES	Split system Roof mount	Electric to Gas	New electric circuits	☐ SMUD
	Heat pump or elect.		1 Re-wire] PGE
I SIDING	unit to gas. [] Wall furnace		Water Service Replacement	
0 T-111 0 Horiz	Other (describe below)	DRY ROT OR TERMITE	Sewer Service Replacement	*NOTE:
U snucco	Value of duct work:: Equipment: \$	(Describe locations below)	U Gas Line Replacement	will require an additional building permit
Note:	Cut-in: S		U Water U Waste	(
Design Review approval may be required in certain areas.	Note: Design Review approval may be required for roofton units.	Note: Design Review approval may be required in certain areas.		