

CITY OF SACRAMENTO CASHIER'S WORKSHEET

COPY 08/02/2004

RECEIPT NUMBER: R0412828

TRANSACTION DATE: 08/02/2004
TRANSACTION AMOUNT: 185.20
NOTATION:

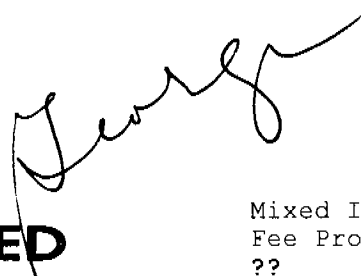
APD #: **0412360**
SITE ADDRESS: 6948 HAVENHURST DR SAC
PARCEL: 029-0383-008

TYPE: Bldg Minor Permit
SUB-TYPE: RES
HOUSING: N
STATUS: **ISSUED**

ISSUED

AUG 02 2004

Mixed Income Housing
Fee Program
??



TRANSACTION LIST

Sacramento Building Division

| Type | Method | Description | Pymt Amount |
|---------|--------|-------------|-------------|
| Payment | Cash | | 185.20 |

RECEIPT ACCOUNT ITEM LIST

| Class # | Description | Item # | Total Fee | Prev Pymt | Current Pymt |
|---------|------------------------|--------|-----------|-----------|--------------|
| 200 | Permit--Building-Res | 1100 | 175.00 | .00 | 175.00 |
| 206 | City Business Oper Tax | 1730 | 3.20 | .00 | 3.20 |
| 259 | Technology Surcharge | 1750 | 7.00 | .00 | 7.00 |

PAID
CITY OF SACRAMENTO

AUG - 2 2004

NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES

SMOKE DETECTORS ARE REQUIRED WHEN ALTERATIONS, REPAIRS OR ADDITIONS REQUIRING A PERMIT ARE IN EXCESS OF \$1,000 OR WHEN ONE OR MORE SLEEPING ROOMS ARE ADDED OR CREATED (GROUP R)



***** Office Use Only *****

Permit No: 04-12360
Date Issued: 8/2/04
Total Amount: \$135.20
Insp Area #: 2R

AUG 02 2004 Sacramento Building Division

Inspection Request # (916) 264-7622

***** Please Fill in the Following *****

Site Address: 6948 Havenhurst Dr.
Nature of Work: HVAC Change out

CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C.)
Lender's Name
Lender's Address

LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provision of Chapter 9 (commencing with section 7000) of Division 3 of the Business and Professions Code and my license is in full force and effect.
License Class C20 License Number 724129 Date 7/30/04 Signature

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the 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 five 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 or offered 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/she did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).
I am exempt under Sec. B & PC for this reason:

Date Owner Signature

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 or 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 7/30/04 Applicant/Agent Signature

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.
X 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 Combined Specialty Ins. Co.
Policy Number 005-00014360 Expiration Date 1/1/05

(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.

Date 7/30/04 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 ADDITION TO 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.



City of Sacramento

FAXBACK PERMIT APPLICATION

(certain restrictions apply)

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

BUILDING DEPARTMENT
BUILDING DIVISION
Fax # (916) 264-1901

Inspection Request # (916) 264-7622
Credit Card Info on File? Yes No RESIDENTIAL APARTMENTS (4+ units per building) COMMERCIAL (limited)

In order to process this request, ALL of the following information MUST be provided:

Job Address: 10448 HAVENHURST DR. UNIT # _____
 Parcel Number: 029-0383-008 Contract Price \$ 8000
 CONTACT PERSON: Evan Galtrey CONTACT PHONE: 685-4616
 Property Owner: Curtis Higgs Contractor: Bell Bros. Heating/Air License # 726129
 Address: 6448 HAVENHURST DR. Address: 995 Sunny Rd.
 City/State/Zip: Sacramento, CA 95831 City/State/Zip: Elk Grove, CA 95624
 Phone: 424-9465 Phone: 685-4616 FAX: 686-5293

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

Description of Work: _____

| | | | |
|--|---|---|---|
| <input type="checkbox"/> REROOF (excluding tile) <input type="checkbox"/> TEAR-OFF <input type="checkbox"/> RESHEET <input type="checkbox"/> HOUSE # SQUARES <input type="checkbox"/> GARAGE # Stories: 1 2 3+ Material: _____ | <input checked="" type="checkbox"/> HVAC INSTALLATIONS (Residential ONLY) <input type="checkbox"/> NEW CHANGE-OUT <input type="checkbox"/> Heat Pump <input type="checkbox"/> Package <input checked="" type="checkbox"/> Split system <input type="checkbox"/> Roof mount <input type="checkbox"/> Cut-in <input type="checkbox"/> Heat pump or elect. unit to gas. <input type="checkbox"/> Wall furnace <input type="checkbox"/> Fireplace insert <input type="checkbox"/> Other (describe below) Value of duct work: \$ _____ Equipment: \$ _____ Cut-in: \$ _____ | <input type="checkbox"/> WATER HEATER <input type="checkbox"/> ELECTRIC <input type="checkbox"/> Change-out <input type="checkbox"/> Electric to Gas <input type="checkbox"/> Relocate <input type="checkbox"/> New <input type="checkbox"/> DRY ROT OR TERMITTE DAMAGE REPAIR <input type="checkbox"/> Flooring/Joists <input type="checkbox"/> Roof Structure <input type="checkbox"/> Exterior <input type="checkbox"/> Mud sill/Studs <input type="checkbox"/> Extend | <input type="checkbox"/> MINOR ELECTRIC and/or MINOR PLUMBING (Residential ONLY) <input type="checkbox"/> Electric Service Change # amps <input type="checkbox"/> New electric circuits <input type="checkbox"/> Re-wire <input type="checkbox"/> Replacement <input type="checkbox"/> Water Service <input type="checkbox"/> Sewer Service <input type="checkbox"/> Gas Line <input type="checkbox"/> Re-plumb <input type="checkbox"/> Water <input type="checkbox"/> Waste |
|--|---|---|---|

* Design Review approval may be required.

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* NOTE: Correction Notice forms will require an additional building permit.

NR Faxback Permit updated 12/09/01

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Tasker

**FEE SUMMARY
FOR PERMIT #0412360**

**Bldg Minor Permit
as of 08-02-2004 Permit Status: READY**

Site Address: 6948 HAVENHURST DR SAC
Parcel No: 029-0383-008
Thomas Bros: 337A1

CONTRACTOR
BELL BROTHERS HEAT & AIR
9195 SURVEY RD
ELK GROVE, CA 95624
Phone: 916-685-4616

OWNER
HIGGS CURTIS/DORA B
6948 HAVENHURST DR
SACRAMENTO CA 95831
Phone: 4249465

ARCHITECT

Phone:

Nature of Work: C/O SPLIT SYSYEM HVAC

Permit Valuation: \$8,000.00
Square Footage: 0

Fee Details

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| | |
|--------------------------|-----------------|
| TOTAL FEES | \$185.20 |
| Payments | \$0.00 |
| BALANCE DUE | \$185.20 |

**PAID
CITY OF SACRAMENTO**

AUG - 2 2004

**NEIGHBORHOODS PLANNING
AND DEVELOPMENT SERVICES**

MODE = MEMORY TRANSMISSION

START=AUG-02 11:23

END=AUG-02 11:25

FILE NO.=494

| STN NO. | COMM. | ONE-TOUCH/ ABBR NO. | STATION NAME/EMAIL ADDRESS/TELEPHONE NO. | PAGES | DURATION |
|---------|-------|---------------------|--|---------|----------|
| 001 | OK | * | 96865293 | 004/004 | 00:01:58 |

-CITY OF SACRAMENTO -

***** -PLAN CHECK - ***** 916 264 5987- *****

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