CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0418267
Insp Area: 3
Thos Bros: 318F1

Site Address: 8606 EVERGLADE DR SAC
Parcel No: 078-0167-011

Sub-Type: RES
Housing (Y/N): N

CONTRACTOR
IRT ROOF CARE
11353 PYRITES WY #7
RANCHO CORDOVA, CA 95670

OWNER
BRENNEMAN GEORGE M & CYNTHIA A
8606 EVERGLADE DR
SACRAMENTO, CA 95826

ARCHITECT

Nature of Work: REROOF - TEAR OFF, RESHEET, INSTALL 18 SQ 30 YR DIM LAM COMP, 1 STOYR.

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'sAddress_____

LICENSED CONTRACTORS DECLARATION: I hereby affirm under penalty of perjury that I am licensed under provisions 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 C-39 License Number 649888 Date 10-28-04 Contractor Signature Aurelina Ostorne

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 herby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 10-28-04 Applicant/Agent Signature Aurelina Ostorne

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 NO EMPLOYEES Policy Number Exp Date

A-O (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 10-28-04 Applicant Signature Aurelina Ostorne

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.

078-0167-011
1A / (stay) / R3

CITY OF SACRAMENTO
PLANNING & BUILDING DEPARTMENT
BUILDING DIVISION
www.cityofsacramento.org

Help Line: 1-916-264-5656 OR 1-866-EZ-PERMIT
Inspection: 1-916-808-4677

Date: _____

649888

Downtown Permit Center 1-916-264-6807
1231 I Street, Suite 200, Sacramento, CA 95814

North Permit Center 1-916-808-2354
2101 Arena Blvd., Suite 200, Sacramento, CA 95834

Fax # 916-264-1901

FAXED PERMIT APPLICATION

(certain restrictions apply)

041826

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 quad fee.

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

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

Job Address: 8606 EVERGLADE DR. Unit # _____ Contract Price $ 5000.00

Contact Person: Jeff Allen (CONTRACTOR) Contact Phone: 916-638-6777

Property Owner George BRENNAN Contractor: IRT Roof CARE License # 649888

Address: 8606 Everglade dr Address: 11353 Pyrites Wy Suite 7

City/State/Zip: ~~Rancho~~ SACRAMENTO, CAL. 95826 City/State/Zip: Rancho Cordova

Phone: 916-381-7605 Phone: 916-638-6777 FAX: _____

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

☑ Reroof (excluding tile)
☑ Tear-Off
☑ Resheet
☑ House ☑ Garage
Stories: 1
Squares: 18
Material: Comp Shingle
☐ Siding OSB Board
☐ Wood
☐ T-111
☐ Horiz
☐ Vinyl
☐ Stucco
*Design Review approval may be required.

☐ 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: $_____
* Design Review approval may be required.

☐ Water Heater
(Residential Only)
☐ Gas ☐ Electric
☐ Change-out
☐ Electric to Gas
☐ Relocate
☐ New
☐ Dry Rot or Termite Damage Repair
(Describe Locations Below)
*Design Review approval may be required.

☐ 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
☐ PG&E

♦ NOTE:
Correction Notice items will require an additional building permit.

DESCRIPTION OF WORK: Remove existing Roofing & INSTALL Standard OSB Roof Deck. Install 30 lb Felt & INSTALL DIMENTIONAL SHINGLES

20
(30) YR
50

FBF10001