TRANSMISSION VERIFICATION REPORT

TIME : 08/08/2006 15:13
NAME : CITY OF SACRAMENTO
FAX : 9168085543
TEL : 9168085656
SER.# : BROH4J832840

DATE,TIME	08/08 15:12
FAX NO./NAME	93530283
DURATION	00:01:20
PAGE(S)	03
RESULT	OK
MODE	STANDARD ECM

CITY OF SACRAMENTO
CASHIER'S WORKSHEET

RECEIPT NUMBER: R0614576

TRANSACTION DATE: 08/08/2006
TRANSACTION AMOUNT: 78.83
NOTATION:

APD #: **0612128**
SITE ADDRESS: 9 PELICAN CT SAC
PARCEL: 225-0550-014

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

ISSUED
CITY OF SACRAMENTO
AUG 0 8 2006
DOWNTOWN PERMIT CENTER

Mixed Income Housing Fee Program
??

TRANSACTION LIST

Type	Method	Description	Pymt Amount
Payment	Credit C	TEETER	78.83

RECEIPT ACCOUNT ITEM LIST

Class #	Description	Item #	Total Fee	Prev Pymt	Current Pymt
200	Permit--Building-Res	1100	75.00	.00	75.00
206	City Business Oper Tax	1730	.24	.00	.24
213	General Plan Surcharge	1760	.59	.00	.59
259	Bldg-Technology Surcharg	1750	3.00	.00	3.00

Building Permit

City of Sacramento
PLANNING
BUILDING
DEPARTMENT
BUILDING DIVISION
(916) 808-BLDG (2534)
Inspection Request # (916) 264-7622

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

Permit No: 0612128
Date Issued:
Total Amount:
Insp Area #:

ISSUED
CITY OF SACRAMENTO
AUG 0 8 2006
DOWNTOWN PERMIT CENTER

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

Site Address: 9 Pelican Ct - SACto 95833
Nature of Work: Water Heater 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 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 C36 License Number 828505 Date 8/7/06 Signature [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 8/7/06 Applicant/Agent Signature [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 Masenden National Ins. Expiration Date 4/1/06
Policy Number 01 KB 0030-853

____ (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 8/7/06 Applicant Signature [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.

PBF10004

PAGE 01/02
DOMCO PLUMBING INC
08/07/2006 10:42 9163530283

061218

CITY OF SACRAMENTO
PLANNING & BUILDING DEPARTMENT
BUILDING DIVISION
www.cityofsacramento.org
Help Line: 1-916-264-5656 OR 1-866-EZ-PERMIT
Inspection: 1-916-808-4977

Downtown Permit Center 1-916-264-5607
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

FAXBACK PERMIT APPLICATION

(certain restrictions apply)

Faxed request must be received in this office by 3:00 P.M. to 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 fee.

Permits requiring plan review are not eligible for FAXBACK

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

Credit Card Information on File? ☒ Yes ☐ No ☒ Residential ☐ Apartments (4+ units per building) ☐ Commercial (limited)

Job Address: 9 Pelican Ct. Unit # _____ Contract Price $ 400

Contact Person: Teresa Stamford Contact Phone: (916) 353-0498

Property Owner: Janet Hamlin Contractor: Domco Plumbing

Address: 9 Pelican Ct. Address: PO Box 1378

City/State/Zip: Sacto, CA 95833 City/State/Zip: Folsom, CA 95763

Phone: (916) 359-5746 Phone: (916) 353-0283 FAX

Nature of Work: (Provide detailed description of work & indicate type of work in selections below).

Description of Work: Water Heater Change Out

☐ **Reroof (excluding tile)**
- ☐ Tear-Off
- ☐ Reshoot
- ☐ House ☐ Garage

Stories: _____

Squares: _____

Material: _____
- ☐ Siding
- ☐ 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.

PBF10002