0609306
190.47

DATE: 6/21/06

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 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: 1799 MARKHAM Wy. UNIT # 1 ☐ CONTRACT PRICE $ 7,500.-

☐ CONTACT PERSON: FRANK DIAZ ☐ CONTACT PHONE: 919 6807

| | |
|---|---|
| Property Owner: DIANA CORREA | Contractor: CAL VINTAGE RFG License # 826725 |
| Address: 1799 MARKHAM WY. | Address: 11257 COLOMA RD. A-3 |
| City/State/Zip: SAC CA. 75818 | City/State/Zip GOLD RIVER CA. 95670 |
| Phone: 497-0771 | Phone: 635 8320 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 21
Material: 40yr comp

☐ SIDING
- ☐ wood
- ☐ T-111
- ☐ Horiz
- ☐ vinyl

☐ stucco

Note:
Design Review approval may be required in certain areas.

☐ 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/fuel work:
Equipment: $

Cut-in: $

Note:
Design review approval may be required for rooftop units.

☐ WATER HEATER (residential ONLY)
☐ GAS ☐ ELECTRIC
- ☐ Change-out
- ☐ Electric to Gas
- ☐ Relocate
- ☐ New

☐ DRY ROT OR TERMITE DAMAGE REPAIR
(Describe locations below)

Note:
Design Review approval may be required in certain areas.

☐ 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
- ☐ PGE

**NOTE:*
*Correction Notice item: will require an additional building permit*

DESCRIPTION OF WORK: TEAR OFF 2 LAYER ROOF INSTALL OSB 30lb FELT AND 40yr Comp

faxpermit.frm [rev online 3/10/00]

FROM :Cal-Vintage FAX NO. :9166358320 Jun. 21 2006 07:53AM P2