231 I Street, Sacramento, CA 95814	Insp Area: 1	
	Thos Bros: 297G5	
	Cul Times DEC	and the second of
te Address: 3522 FOLSOM BL SAC	Sub-Type: RES	
rcel No: 007-0301-006	Housing (Y/N): N	
NTRACTOR OWNER	<u>ARCHITECT</u>	
VNER BUILDER LEYVA LUIS (EST OF)/ELVIA		
1512 41ST ST SACRAMENTO, CA 95819		
	- co- postrion	
iture of Work: T/O RE-ROOF RE-SHEET 16 SQS & INSTALL 30 Y	R COMPOSITION	
ONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury to	that there is a construct don't a ency for the peri	formance of
work for which this permit is issued (Sec. 3097, Civ. C).	CITY OF SACRAMENTO	
nder's NameLender's Address	NOV 17 200E	
CENSED CONTRACTORS DECLARATION: I hereby affirm under penalty	NOV 1 7 2005	f Chapter 9
mmencing with section 7000) of Division 3 of the Business and Professions Code and my l	license is in full force and effect.	e ^{am} er y y miles
	MEW CITY HAI!	1
wner-builder declaration: I hereby affirm under penalty of perjury that		. mj Markini
ison (Sec. 7031.3, Business and Processions Code, any Cry of the American Strains or equires the applicant for such permit to file a signed statement that sense Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and sis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a perindred dollars (\$500.00);	mit subjects the applicant to a civil penalty of not mo	ore than five
I, as a owner of the property, am exclusively contracting with licensed contractors to contracto	we the burden of proving that he/she did not build or	improve for
I, as owner of the property, am exclusively contracting with licensed contractors to che Contractors License Law does not apply to an owner of property who builds or improves censed pursuant to the Contractors License Law).	s thereon, and who contracts for such projects with a	contractor(s)
I am exempt under SecB & PC for this reason:		
11-12-05		
V - Ca	dipa	
N ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on leasurements and locations shown on the application or accompanying drawings and that rivate agreement relating to permissible or prohibited locations for such improvements. The provement or the violation of any private agreement relating to location of improvements.	This building permit does not authorize any illegal loc	cation of any
certify that I have read this application and state that all information is correct. I agree to contiding construction and herby authorize representative(s) of this city to enter upon the above	ementioned property for inspection purposes.	ws relating to
ate 11-17-05 Applicant/Agent Signature	lor' Lubea	<u> </u>
VORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty I have and will maintain a certificate of consent to self-insure for workers' compensate of work for which the permit is issued. I have and will maintain workers' compensation insurance, as required by Section 37	ation as provided for by Section 3700 of the Labor C	
nis permit is issued. My workers' compensation insurance carrier and policy number are:	Exp Date	
Carrier Policy Number (This section need not be completed if the permit is for \$100 or less) I certify that in not employ any person in any manner so as to become subject to the workers' compensation yorkers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith the complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith the complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith the complete to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith the compensation provisions of Section 3700 of the Labor Code, I shall forthwith the compensation provisions of Section 3700 of the Labor Code, I shall forthwith the compensation provision provi	the performance of the work for which this permit is laws of California and agree that if I should become	issued, I shall subject to the
WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSANI COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABO	D DOLLARS (\$100,000) IN ADDITION TO TH	PLOYER TO E COST OF

CITY OF SACRAMENTO

Permit No: 0518313

Insp Area: 1

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

808-1901

Activity # 0518313

Fax # 916-888-1901 Dorntown Permit Caster, New City Hat 91s Sirest, 3" Floor, Secrements, CA 95814

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

Help Line: 1-918-808-5856 OR 1-885-EZ-PERMT Inspection: 1-916-808-7622

North Permit Center 2101 Arena Skd., Suite 200, Sacramento, CA 95834

Date: 11-17-2005 Fax # 916-808-8378

FAXED PERMIT APPLICATION

(contain restrictions apply)

Paxed request must be received in this office by 3:00 P.M. to be processed the following workday.

Nate: Contractors must have a current certificate of Worker's Compensation Insurance.

The Park I William Safety			
			SECULIARIES OF MOUNT
		s below).	Enture of Work: (Provide - Laifed description of work & indicate type of work in selections below).
	Yank:	Phone:	hone: 9/6-7/55997
		City/State/Zip:	invision Sacramento ca 95819
		Address:	15/2 41 Street
ICERSE # NEW CITY HALL		Contractor:	Societ Person: FOLIANO FINELISTS (2017) Contractor: Co
	ĺ	Carte Dinas	* Address: De de Charles Charles Charles
NOV 1 7 2005	Chindract Price \$	is per building)	DE RESIDENTIAL DAPARTMENTS (#* noise per traiting)
CIT OF SACRAMENTO		OWING INFORMA	IN ORDER TO PROCESS THIS REQUEST, ALL THE FOLLOWING INFORMATION MUST BE PROVIDE:
FAID		is issued will be s	Note: Work started before a Building Permit is issued will be subject to qual fee.
		ı	6.4 (4.44)

# Squares: / C # Squares: / C	Residential Obly Change out New Hest Pump Pachage Split system Roof means Cut-in Heat pump or clock mile to gas. Wall furnece Other (desume below) Value of duct work: Equipment: \$ Cut-in: \$ Cut-in: \$ Cut-in: \$ Cut-in: \$	Residential Only) [] Gas	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	Inspection (Residential and single plantatif visits Only) SkUD FG&E PG&E A NOTE: Correction Notice items will require an additional building permuit.
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