



City of Suisun City

701 Civic Center Blvd., Suisun City, California 94585

Office (707) 421-7310 Insp. Requests 421-7319

Building Permit #: B24-5-0502
For Inspection Requests Call: (707) 421-7319
Status: ISSUED

LICENSED CONTRACTORS DECLARATION

I hereby affirm 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 # 1080746 Lic. Class Exp. Date 09/30/2025

Date 2/24/25 Signature of Contractor

OWNER-BUILDER DECLARATION

I hereby affirm that I am exempt from the Contractor's License Law for the following reason:

☐ I as 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 Professions Code).

☐ I as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code.)

Date Signature of Applicant:

WORKER'S COMPENSATION DECLARATION

I hereby affirm that I have a certificate of Worker's Compensation Insurance or a certified copy thereof (Se. 3800, Lab. C.).

Insurance Co. STARNET INSURANCE CO. Exp. Date 09/29/2024

Date 2/24/25 Signature of Applicant:

CERTIFICATE OF EXEMPTION FROM WORKERS' COMPENSATION INSURANCE

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 Workers' Compensation Laws of California.

Date Signature of Applicant

NOTICE TO APPLICANT: If after making this Certificate of Exemption, you should become subject to the Workers' Compensation provision of the Labor Code, you must forthwith comply with such provisions or this permit shall be deemed revoked.

DIVISION OF INDUSTRIAL SAFETY PERMIT

☐ As owner-builder, I will not perform or employ anyone to do work which would require a permit from the Division of Industrial Safety, unless such person has a permit to do such work from the division.

☐ Division of Industrial Safety Permit No.

I certify that I have read this application and state that the above information is correct. I agree to comply with all the city and county ordinances and state laws relating to building construction, and hereby authorize representatives of this city to enter upon the above-mentioned property for inspection purposes.

AIR QUALITY PERMIT CERTIFICATION

☒ I hereby affirm that I am not installing nor modifying any equipment, which may cause air pollution.

☐ My Bay Area Air Quality Management District Authority to Construct permit number is:

HAZARDOUS MATERIALS CERTIFICATION

I have read the Hazardous Materials Information Guide and understand my requirements under Chapter 6.95 of the California Health and Safety Code Sections 25505, 25533, and 25534. I understand that if the building does not currently have a tenant, that it is my responsibility to notify the occupant of the requirements, which must be met prior to issuance of a Certificate of Occupancy.

Date 2/24/25 Signature of Applicant:

Date Issued: 02/05/2025 Permit Expires: 02/05/2027

Job Valuation: \$34,000.00

Job Address: 1202 CHULA VISTA WAY SUIS

Parcel No: 174-292-210

Lot #: 21

Subdiv: MONTEBELLO VISTA

Applicant: NORTH VALLEY LLC

Property Owner: SHIRLEY SANTY R & LORANE L

Address: 1202 CHULA VISTA WY
SUISUN CITY CA

Phone #:

Zip: 94585

Contractor: NORTH VALLEY LLC

Address: 4640 NORTHGATE BLVD STE 115
SACRAMENTO, CA

Phone #: (760) 628-9133

Zip: 95834

St. Lic #: 1080746

Sub Type: 45SOLAR

Work Description: ROOF MOUNT PV SOLAR W/ BATTERY STORAGE - 7.47 KW, 18 PANELS 1 BATTERY NEW 125A SUB PANEL.. REV: UPDATED EQUIPMENT LOCATION TO MATCH INSTALL. UPDATED THE BACKUP SUB RATING TO 200A.

FEE SUMMARY

Fee Description	Account Code	Calc'd Fees	Paid Prev.	Current Pay
01-Permit Fee	BPERM010-73210-3310	359.00	359.00	.00
02-Bldg Plan Check	PLAN010-77315-3310	299.65	169.65	130.00
02.5-Bldg Doc Archival	BDOC010-77130-3310	1.25	1.25	.00
03-Strong Motion	SMFEE805-71620-4805	4.92	4.92	.00
03.5-Bldg Stds Comm Fee	CABSC807-71620-4807	4.00	4.00	.00

Description of Other Fees:

Total Calculated Fees.....: \$130.00

CURRENT PAYMENT DETAILS

Transaction Type	Payment Method	Details	Amount
Payment	Check	2205	130.00

BALANCE DUE:

\$0.00

City of Suisun City

Status: ISSUED

Job Valuation: \$34,000.00

Phone #:
Zip: 94585

Phone #: (760) 628-9133
Zip: 95834
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Work Description: ROOF MOUNT PV SOLAR W/ BATTERY STORAGE - 7.47 KW, 18 PANELS 1 BATTERY
NEW 125A SUB PANEL.. REV: UPDATED EQUIPMENT LOCATION TO MATCH INSTALL. UPDATED THE
BACKUP SUB RATING TO 200A.

INSPECTIONS	APRVD	DATE	INSPECTIONS	APRVD	DATE
Forms/Steel			Shear		
Ufer/Ground			Roof Sheathing		
Underground/floor Electric			Rough Frame		
Underground/floor Plumbing			Rough Electric		
Underground/floor Gas Piping			Rough Plumbing		
Piers/Footings			Rough HVAC		
O.K. To Pour Concrete			Gas Piping		
			Exterior Lath/Siding		
Underfloor Frame			Fireplace		
Underfloor HVAC			Frame Insulation		
Underfloor Insulation			O.K. To Cover		
O.K. To Cover Floor Joists					
			Drywall		
Water			Gas Pressure		
Sewer			Gas Meter		
T-Bar			Temp. Electric		
Panels			Pre-Final - Planning		
Pool Pre-Gunite			Pre-Final - Public Works		
Pool Pre-Deck			Smoke/Carbon Monoxide Alarms	OK	
Pool Pre-Plaster					
Pool Alarm			Final Electric		
			Final Plumbing		
			Final HVAC		
			FINAL INSPECTION	DM	3-12-2015