

Declaration of Licensed Roofing Contractor

CNI-021

Purpose: This form is to be completed by a licensed roofing contractor participating in the Sonoma County Self Certification Reroofing Program as outlined in the Sonoma County Reroofing Manual.

BLD19-2808
Permit Number

Capstone Roofing, Inc.
Contractor

629383
License No.

1. 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 (Class C-39).
2. I certify that I have reviewed and understand the Sonoma County Reroofing Manual and agree to follow all the requirements therein as they pertain to the installation of roofing and roofing substrate materials on structures located within the unincorporated areas of Sonoma County.
3. I agree to furnish the Permit and Resource Management Department proof of liability insurance from an acknowledged underwriting firm for all roofing operations within Sonoma County. Said coverage shall be no less than \$500,000 each occurrence and \$1,000,000 aggregate. I also agree to furnish proof of Workers Compensation Insurance.

Nathan Ducham
Signature

5-17-19
Date

INSPECTOR'S COPY

Sonoma County Permit and Resource Management Department
2550 Ventura Avenue ♦ Santa Rosa, CA ♦ 95403-2829 ♦ (707) 565-1900 ♦ Fax (707) 565-2210

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12/12/03

Reroofing Verification/Completion Form

CNI-023

Purpose: This form is to be completed by a licensed roofing contractor participating in the Sonoma County Self Certification Reroofing Program. The completed form must be attached to the field inspection record card. The building inspector will take this form back to PRMD to be filed with the permanent record at time of final inspection.

BLD19-2808
Permit Number

4051 Harrison Grade Rd Sebastopol
Job Address

Nathan
Contact Name

707-575-3577
Phone Number

JOB COPY



Reroofing Inspection (#137): I certify that the existing sheathing/decking is structurally sound, and complies with all the conditions of 1515.1 of the 2001 California Building Code (CBC). Minimum clearances to combustibles for all VAC. vents/chimneys have been verified and maintained.



Roof Nailing Inspection (#127): I certify that roof sheathing was installed and fastened in accordance with the manufacturer's installation instructions, and/or with the Sonoma County Reroofing Manual.



Final Inspection (#199). I certify that the roofing materials have been installed and fastened in accordance with the manufacturer's installation instructions, the Sonoma County Reroofing Manual, and all the requirements of the California Building Code.

Nathan DuCharme
Licensed Contractor's Name

629383
License Number

Nathan DuCharme
Signature

5-17-19
Date

Sonoma County Permit and Resource Management Department

2550 Ventura Avenue • Santa Rosa, CA • 95403-2829 • (707) 565-1900 • Fax (707) 565-2210

Source:

Standard CNI-023 Reroofing Verification/Completion Form.pdf

12/2/02



COUNTY OF SONOMA
PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

2550 Ventura Avenue, Santa Rosa, CA 95403
(707) 565-1900 FAX (707) 565-1103

Smoke/CO Alarm Self Verification Form

Building Permit # BLO19-2028

Dear Property Owner:

The California Residential Code (CRC) requires carbon monoxide alarms in dwellings as well as smoke alarms (Sections R314 and R315 respectively) when building permits are issued and the scope of work exceeds a total cost or calculated valuation of \$1,000. In order to grant a final approval on your permit, it is necessary to verify the installation of these alarms within your dwelling. This form provides the property owner the ability to self verify to PRMD when work done does not allow convenient access to the interior of the dwelling (eg: re-roof or other exterior work)

By signing this document, the property owner certifies to PRMD that both smoke alarms and CO alarms have been installed on the above referenced project as specified below:

Smoke alarms are installed in accordance with the approved manufacturer's instructions in all of the following areas:

- a. Each sleeping unit
- b. In hallways of areas giving access to the sleeping units
- c. On each floor, if a multi-story
- d. In the basement, if a basement exists

Carbon Monoxide alarms are installed in accordance with the approved manufacturer's instructions in all of the following areas:

- a. Outside each sleeping unit
- b. On every floor level of dwelling unit, including basements, outside each sleeping unit.
- c. Within sleeping units where a fossil fuel burning appliance is installed (includes fireplaces)

Please fill in the requested information at the bottom of the form and return the form by mail to the Sonoma County Permit and Resource Management Department, Building & Safety Division, 2550 Ventura Avenue, Santa Rosa, CA 95403. Alternatively, this form may be submitted to the building inspector at the time the final inspection is performed.

Ann Kelly ^{Jens}
Property Owner's Name

Ann Kelly
Signature

5/30/19
Date

4051 Harrison Grade Rd Sebastopol
Project Address

Inspector

Declaration of Licensed Roofing Contractor

CNI-021

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BUD-19-2808

Permit Number

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Nathan Duchon

Signature

5/10/19
Date

INSPECTOR'S COPY

Sonoma County Permit and Resource Management Department
2550 Ventura Avenue ♦ Santa Rosa, CA ♦ 95403-2829 ♦ (707) 565-1900 ♦ Fax (707) 565-2210

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