



City of  
**FRESNO**  
 Development & Resource Management Department  
 Building and Safety Services  
 City Hall • 2600 Fresno Street • Fresno, California 93721-3604

Scope of Work  
WATER HEATER  
 Std. Plan #:  
 Lot: Tract:

**RESIDENTIAL INSPECTION RECORD CARD**

**For Inspections Call: 559-621-8116 FAX 498-4357**

POST IN A CONSPICUOUS PLACE AT THE JOB LOCATION • ADDRESS SHALL BE VISIBLE FROM STREET

LOCATION: [REDACTED] OWNER: OWN/RES

PERMIT #: 17-16352 CONTRACTOR:

Separate Building, Plumbing, Mechanical, and Electrical Permits are required. A temporary on site toilet facility is required during all construction activities. NO electrical wiring, plumbing, heating, or structural members shall be covered until all rough inspections are made and signed off on the inspection card by the appropriate inspector. The pertinent contractor must call for the inspections listed below.

<b>1. FOUNDATION AND UNDERGROUND INSPECTION</b>			
To be made <b>BEFORE</b> concrete is placed	Yards/Setbacks _____	Underground Wiring _____	Rough Waste _____
	Foundation _____		Rough Water _____
	Ufer Ground _____		MU/Plastic _____
	Porch Footing _____		U/G Gas _____
	Patio Footing _____		Bldg. Sewer _____
	Other _____		Water Service _____
			U/G Mech. Ducts _____
			U/G Range Duct _____
<b>2. MASONRY INSPECTION</b>			
To be made <b>BEFORE</b> placement of concrete or grout.	Footing _____		
	Masonry _____		
<b>3. FLOOR NAIL &amp; FRAMING</b>			
To be made <b>BEFORE</b> wall framing	Floor Joist First Flr. _____	Under Floor Electrical _____	<b>(*BEFORE FLOORING IS INSTALLED)</b>
	Floor Nail First Flr. _____		*Rough Waste _____
	Shear Transfer First Flr. _____		*Rough Water _____
	Floor Joist Second Flr. _____		*Rough Gas _____
	Floor Nail Second Flr. _____		*Rough Duct _____
	Shear Transfer First Flr. _____		
	Double Shear Frame _____		
<b>4. LATERAL BRACING INSPECTION</b>			
To be made <b>BEFORE</b> frame inspection	Roof Nailing _____	Electrical to be concealed in _____	
	Trusses _____		
	Shear Walls First Flr. _____	Shear walls _____	
	Shear Walls Second Flr. _____		
	Braced Panel (ext.) _____		
	Braced Panel (int.) _____		
	Porch Frame _____		
	Patio Frame _____		
	HD Straps _____		
<b>5. FRAME INSPECTION (AFTER PLUMBING, MECHANICAL, &amp; ELECTRICAL ARE APPROVED)</b>			
To be made <b>BEFORE</b> Insulation, interior lath & Gypsum Wall Board are applied	General Framing _____	Rough Electrical _____	<b>(*AFTER ROOFING IS INSTALLED)</b>
	Insulation _____		Vents Only _____
			Tubs (2 nd. flr.) _____
			*Top Out/Rgn Gas _____
			*Ductwork/Flues _____
			*Metal F/P Flues _____
			*MU/Plastic _____
<b>6. INTERIOR AND EXTERIOR FINISH INSPECTION</b>			
To be made <b>BEFORE</b> exterior plaster is applied or Sheetrock is Taped	Ext. Stucco Lath _____	Temp. Electrical _____	Roman Tub _____
	Sheetrock Shear _____		Tub Lath _____
	Exterior Siding _____		Shower Lath _____
	F/P Hearth Protection _____		Shower Pan _____
<b>7. FINAL INSPECTION</b>			
Fire Prevention Final _____	Safe to Occupy _____	Safe to Occupy _____	Gas Test _____
	Grading Final _____		Temp. Gas _____
	Building Final _____	Electrical Final _____	Irrig. System _____
			Safe to Occupy _____
			Plumbing Final <u>1/26/18</u>
			Mechanical Final _____

**NOTE: SIGNATURE OF THE INSPECTOR AFTER ALL ITEMS DESIGNATES APPROVAL. WHEN THE REQUIRED FINAL INSPECTIONS ARE PROPERLY SIGNED, AND ALL FINAL CLEARANCES ARE APPROVED, THIS CARD SERVES AS THE CERTIFICATE OF OCCUPANCY. • SEE REVERSE SIDE OF THIS CARD FOR MINIMUM FIRE PROTECTION REQUIREMENTS DURING CONSTRUCTION**

CITY OF FRESNO  
 Development Department  
 and Safety Division  
 Section  
 Section

*Water Heater Permit + Plumbing*  
 2600 Fresno Street  
 Fresno, Ca. 93721  
 Tel: (559)621-8116  
 Tel: (559)498-4357  
 12-6-17

Application Number . . . . . 17-00016352 Date 12/06/17  
 Application pin number . . . . . 003488  
 Address . . . . . [REDACTED]  
 Owner's Parcel Number . . . . . [REDACTED]  
 Lot . . . . . [REDACTED]  
 Application type description . . . . . COUNTER ELE, MECH, PLUMBING RESIDENTIAL  
 Division Name . . . . .  
 Property Use . . . . .  
 Property Zoning . . . . . SFR MEDIUM DENSITY  
 Application valuation . . . . . 0

Owner . . . . . Contractor  
 -----  
 CORREA MARY ESTHER TRUSTEE . . . . . OWNER  
 [REDACTED] [REDACTED]

--- Structure Information 000 000 WATER HEATER  
 Other struct info . . . . . CODE YEAR 2016

Permit . . . . . PLUMBING SFR MISCELLANEOUS  
 Additional desc . . . . . EBA OWN/BLD  
 Phone Access Code . . . . . 5453758  
 Permit pin number . . . . . 5453758  
 Permit Fee . . . . . 103.19 Plan Check Fee . . . . . .00  
 Issue Date . . . . . 12/06/17 Valuation . . . . . 0  
 Expiration Date . . . . . 6/04/18

Qty	Unit Charge	Per	Extension
		BASE FEE	21.43
1.00	81.7600 EA	WATER HEATER	81.76

Special Notes and Comments  
 WATER HEATER

Other Fees . . . . . GEN PLAN SURCHARGE 10.32  
 WORKERSCOMP 10.70

Fee summary	Charged	Paid	Credited	Due
Permit Fee Total	103.19	.00	.00	103.19
Plan Check Total	.00	.00	.00	.00
Other Fee Total	21.02	.00	.00	21.02
Grand Total	124.21	.00	.00	124.21

Note: "Other Fees" & "Other Fee Total" may include amounts from previous transactions. Certifications required by State Law were executed and incorporated by reference. Original on file with City permit.

END OF PERMIT

*Permit No 5453758 For water Heater*



**Clark Family Water Heaters**  
 "Quality Service from Our Family to Yours"

77 Dalton Avenue, Sanger, CA 93657  
 Tel: (559) 207-4397  
 bryanclark@clarkfamilywaterheaters.com  
 CA License # 936264

**ADMINISTRATIVE INFORMATION**

CONTRACT # <u>10419</u>	DATE <u>2-6-18</u>
SERVICEMAN NAME <u>Sam</u>	MATERIALS PO #
SOURCE <u>George</u>	REFERENCE
INSURANCE	INSURANCE PO#

**CUSTOMER INFORMATION**

PROPERTY OWNER'S NAME <u>Mary Ester Correa</u>	BRAND
PROPERTY ADDRESS [REDACTED]	SIZE & TYPE
CITY <u>Fresno</u> ZIP <u>93702</u>	MODEL #
PHONE NUMBER [REDACTED]	SERIAL #
E-MAIL ADDRESS [REDACTED]	LOCATION

**WORK DESCRIPTION**

Install/Repair Reconnect T&P line w/units and pig tail.

**PAYMENT METHODS & TERMS**

**PAYMENT METHOD**

CASH

CHECK CHECK # 8000  
 PLEASE MAKE CHECKS PAYABLE TO CLARK FAMILY WATER HEATERS

CREDIT CARD

FULL NAME \_\_\_\_\_

CARD NUMBER \_\_\_\_\_

CC EXP. DATE \_\_\_\_\_ CVV # \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**PERMITS**

CLARK FAMILY WATER HEATERS WILL PULL THE PERMITS REQUIRED BY LOCAL REGULATIONS FOR THE INSTALLATION OF WATER HEATERS. A PERMITTING FEE WILL BE ADDED TO THE CONTRACT TOTAL FOR THIS SERVICE.

THE PROPERTY OWNER ACCEPTS THE RESPONSIBILITY OF OBTAINING PERMITS REQUIRED BY LOCAL REGULATIONS FOR THE INSTALLATION OF WATER HEATERS.

INITIALS \_\_\_\_\_  
 OF ACKNOWLEDGMENT \_\_\_\_\_

**CONTRACT TOTAL \$ 255.00**

**PAYMENT TERMS**

AT THE COMPLETION OF THE CONTRACT WORK, THE PROPERTY OWNER WILL REVIEW AND SIGN THE ACCEPTANCE OF WORK PERFORMED AGREEMENT. ONCE SIGNED, THE PROPERTY OWNER MUST PAY THE CONTRACT TOTAL TO THE CONTRACTOR VIA ONE OR MORE METHODS OUTLINED IN THE PAYMENT METHOD BOX. IF A PROPERTY OWNER HAS FILLED IN THE CREDIT CARD PORTION, THEY WILL BE CHARGED AFTER THE ACCEPTANCE OF WORK PERFORMED AGREEMENT IS SIGNED. FAILURE TO PAY THE CONTRACTOR CAN RESULT IN FINANCIAL PENALTIES AND LEGAL ACTIONS TAKEN AGAINST THE PROPERTY OWNER AS OUTLINED IN THIS CONTRACT.

**WORK AUTHORIZATION & LEGAL AGREEMENTS**

YOU ARE ENTITLED TO A COMPLETELY FILLED IN COPY OF THIS AGREEMENT, SIGNED BY BOTH YOU AND THE CONTRACTOR, BEFORE ANY WORK MAY BE STARTED.

**AUTHORIZATION TO PROCEED WITH WORK**

I hereby authorize the herein above described work at the above listed price. I agree to pay 1.75% per month for past due contracts (minimum charge \$15). In the event that collection efforts are initiated against me, I shall pay for all associated costs as allowed by the court. By the addition of my signature below, I acknowledge that I have received a copy of this contract and that I have read, understand, and agree to the terms listed here.

SIGNATURE [REDACTED] DATE 2-6-18

**SUBSTANTIAL COMMENCEMENT OF WORK UNDER THIS CONTACT IS DESCRIBED AS BEGINNING OF A WATER HEATER REPAIR/REPLACEMENT OR RELATED SERVICE.**

APPROX. START DATE: 2-6-18

APPROX. COMPLETION DATE: 2-6-18

The owner or tenant has the right to require the contractor to have a performance and payment bond; however, the contractor may require the owner or tenant to pay the cost of that bond.

**ACCEPTANCE OF WORK PERFORMED**

I acknowledge satisfactory completion of the above described work, and that the premises have been left in a satisfactory condition. I understand that if my check does not clear, I could be held liable for three times the amount of the check, in no case more than \$1,500, nor less than \$100, plus the face value of the check, as set forth in California Civil Code 1719. I agree that the amount set forth in the space marked "CONTRACT TOTAL" is the total set price I have agreed to.

SIGNATURE [REDACTED]

DATE 2-6-18

ADDITIONAL AGREEMENTS AND CONTRACT TERMS ARE LOCATED ON THE SECOND PAGE OF THIS CONTRACT. THESE AGREEMENTS INCLUDE INFORMATION REGARDING A CUSTOMER'S 3-DAY RIGHT TO CANCEL, THE CALIFORNIA CONTRACTOR'S LICENSE BOARD, AND OTHER IMPORTANT DOCUMENTATION REGARDING THIS CONTRACT.

**FRESNO HOUSING AUTHORITY**

1331 Fulton Mall, Fresno, California 93721 (559) 443-8400 TTY (800) 735-2929

*949-1-131*  
Fresno, Cal 93702

*Keep  
copy*

*Congratulations*

Your Inspection Has Passed & we need the lease TODAY! *moved in*

Date: 9-18-17

Send ALL leases, riders & HAP Contracts to:  
Email: [hcvleasing@fresnohousing.org](mailto:hcvleasing@fresnohousing.org)  
FAX: (559) 457-4283

Subject Line:  
Address & Head of Household's name  
Ex: 1331 Fulton Mall, Sarah Jones

The HA MUST have a copy of the signed lease agreement with the following information:

- The new terms of the lease;
- The new amount of the monthly rent to owner; and
- What utilities and appliances are supplied by the owner and by the tenant(s).



Most leases do not have this information and will require the owner to either create a standard addendum to provide this information or use the Lease Rider provided by the Housing Authority.

**Housing Assistance Payment Contract**

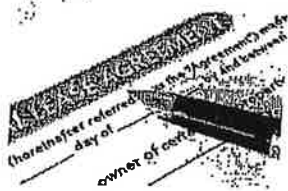
When the lease/lease rider are received, the leasing team will input all data to generate the HAP Contract. This is the agreement between the owner and housing authority. It is NOT the lease.

The HAP Contract will be sent to the owner for signature and must be returned via email or fax by the next business day from the date the owner is emailed.

The first payment will be generated once the signed HAP Contract is received. Payment will be issued in the next check run. *6-8 weeks*

If a signed HAP Contract is not received within 60 days of the passed inspection, the HAP Contract will be void and the housing authority cannot pay any housing assistance payments to the owner.

**EFFECTIVE DATE:** The contract will start when the unit has passed an inspection and the participant takes possession of the unit.



**IMPORTANT!** Either the owner or resident can send the lease to the housing authority. However, the HAP Contract is between the housing authority & owner & must be signed & returned by the owner.



Inspection

[Redacted signature]

Initial Inspection Flyer (cr. 11.30.2016 a1) (cr. 11.28.2016 a1)

*Maria Davila*

# Rental Agreement *Moved in Sept 18 2017*



1. DATE: The date of this Rental Agreement is: Aug 21 2017 *Revised Sept 1 2017*

2. WORDS THAT HAVE SPECIAL MEANING. WE, OUR and US mean the Landlord. YOU and YOUR mean everyone listed as a tenant in Par. 3.

3. TENANTS. Name Age (If minor) Social Security Number Business Phone  
Maria Jaurigi 46 [Redacted] [Redacted]  
Robert Herrera 53 [Redacted] [Redacted]  
Ramzee Herrera 15 [Redacted] [Redacted]

Note on Adult Responsibilities. Each adult tenant is liable for the rent and must obey this Agreement. Each adult is also responsible for all minors and must make sure they obey, too.

4. YOU MAY NOT SUBLET, ETC. You may not sublet, or let anyone else occupy the Unit or replace you as the tenant, unless you have our written permission in advance.

5. WHEN AND HOW LONG YOU MAY OCCUPY. The Unit will be ready for you to move into on Sept 2017 (date)  
The length of your occupancy will be as checked below:  
 Month-to-Month Lease. Par. 1 on the reverse side explains how this lease may be ended.  
 Fixed Lease, which will end on Sept 1, 2017 - Sept 1, 2018 (date)

This means your occupancy will automatically end ON THAT DATE — we do not have to tell you to move out. (NOTE: If you have our permission in writing to do so, you may continue to rent. In this case your rent and all the other terms will remain the same as in this Agreement, unless we tell you differently in writing.)  
 Other, as stated in the Special Terms, Par. 13 on this side.

NOTE: Your lease may be ended earlier, if you do not pay the rent and/or obey this Agreement. If, after this lease is terminated, you stay in the Unit without our written consent, the monthly rent will be set according to Par. K on the reverse side.

6. RENT. The rent is 700.00 per MONTH + deposit # 775 (730)  
IN ADVANCE. You will not get any notice to pay from us. Payment is due on the 1st day of each month  
BEGINNING at this address: [Redacted]  
Later we may tell you in writing to pay: (1) at a different address; or (2) to pay someone else or that we have transferred this lease to someone else. If we do so, you must pay at that address and to that person.

7. SERVICE CHARGE AND INTEREST. You must pay a service charge of 10% for each rent payment we do not get within 5 days after payment is due. Interest at 12% per year will be charged on all rent and other sums you do not pay to us on time.

8. SECURITY DEPOSIT. You must pay 775 IN ADVANCE as a security deposit. By law, this deposit may not be more than one month's rent. You may not use this deposit as your last month's rent. Par. 14 on the reverse side explains how your deposit will be handled when you move out. Any interest earned on the security deposit shall be paid to M.E.G.

9. UTILITIES AND SERVICES. If they are checked, you must take care of and pay for the following items for the date your occupancy starts until it ends. You must arrange for these items yourself, unless something different is stated in the Special Terms, Par. 13. We will provide and maintain items that apply and are not checked. (NOTE: cross out what does not apply.)  
 yard service  gas  pool service  water  refuse disposal  other (describe) water & sewer  
 cesspool pumping  sewer charge  telephone  electricity waste

10. ADDRESS AND DESCRIPTION OF DWELLING UNIT (include any grounds, common areas and other features)  
[Redacted] Calle Calles 3709 Be divided by All

11. CONDITION OF THE UNIT AND THINGS IN IT. 2 Bedroom, 1 bath, kitchen, enclosed yard, parking  
(a) When You Move In. Before you move in, we will inspect and inventory the Unit and the things in it (items like fixtures, appliances, and other personal property). We will prepare an INVENTORY & CONDITION'S FORM with you should check carefully. You and we will sign. When signed, this form will be our agreement about: (1) what the condition of the Unit was, and (2) what things were in the Unit, and what their condition was, when you moved in.

(b) When You Move Out. Whenever you move out:  
(1) You must take all your personal things with you. If you leave any things behind, you must pay for any storage and other costs, including advertising costs, involved in selling or getting rid of them.  
(2) You must leave the Unit clean and neat. We will charge you additional rent for the number of days it takes us to clean and fix up the Unit if you do not do your part. REMEMBER: It is your duty to have the Unit in clean and proper condition ON THE DAY YOU MOVE OUT, NOT ON ANY LATER DAY.  
(3) You must have the same things in it that were there when you moved in; and (4) You must leave these things and the Unit in the same condition they were in when you moved in, except for normal wear and tear. If there is any disagreement about (3) or (4), the signed INVENTORY & CONDITION'S FORM will be treated as correct.

12. KEYS, CARDS AND LOCKS. We are giving you the keys, parking cards and locks listed below. You may not have additional keys or cards made or locks changed or added, unless you have our written permission in advance. You must return all these items when you move out, or pay to replace them.

Items: Number Given To You: Item: Number Given To You:  
Two Keys FRONT door (2) + 1 Back door (3)  
door inside door (1) front door lock gate

13. SPECIAL TERMS: You and we agree that: (Please Number) 1) must give 30 days written notice to move out  
2) No additional people living in Unit.  
3) Rent must be paid on  
eviction & Police will be called.  
4) Unit & yard must be  
kept clean, or someone will be called to clean & you pay.  
5) No pets. No

14. STANDARD TERMS. YOU AND WE AGREE THAT THE STANDARD TERMS ON THE REVERSE SIDE OF THIS FORM ARE PART OF THIS AGREEMENT. BE SURE YOU READ ALL OF THESE TERMS BEFORE YOU SIGN. if evicted you will pay all

15. RECEIPT BY TENANT: You have received a copy of this Agreement and the following as checked:  
 Inventory and Condition Form  House Rules of Condominium or Co-ops Keep your receipt at home  
 Other Rules (describe): only one car in marked stall, inside the premises

16. TENANT SIGNATURES. By signing below, each tenant agrees to pay the rent and obey this Agreement. If signed by two or more tenants, each of you is liable for all of the rent and for obeying this Agreement.  
Print Tenant's Name: (over) Signature of Tenant: Maria Jaurigi  
Maria Esther Correa Maria Esther Correa (over)  
William J. Rodriguez Maria Jaurigi

17. LANDLORD/MANAGING AGENT SIGNATURE AND INFORMATION:  
Owner Name (Print): MARY ESTHER CORREA Agent: Mary Esther Correa - Cell 1  
Address: [Redacted] Signature (Agent): George Torres  
Telephone: [Redacted] Emergency Phone: [Redacted]

List all other owners: MARY ESTHER CORREA  
Manager:  Yes.  No. If checked YES by the Landlord, the Manager will act for us to receive rents, requests, notices and demands from you. He may also give requests, notices and demands to you. (NOTE: There must be a Manager on the island where this Unit is located, if the Landlord does not live on the island.) The Manager is: Maria Esther Correa / George Torres property care tel: [Redacted]

*Maria Esther Correa, Smiley Corp*

*2017*

*Must pay see 2 in receipt will hold 500 until Aug 30 2017. No Refund of 500*

maia Jaurigi

APARTMENT INSPECTION REPORT

Move in Date Aug 2  
RESIDENT X Sept 18 2017

Fresno, Calif 93702

PROPERTY ADDRESS

INSTRUCTIONS: INSPECT EACH ITEM LISTED BELOW AND MARK (X) IN THE BOX WHICH DESCRIBES ITS CONDITION. IF YOU WISH TO MAKE ADDITIONAL COMMENTS ABOUT AN ITEM, MARK THE BOX "SEE BELOW" AND WRITE REMARKS IN THE COMMENTS SECTION AT THE BOTTOM.

ENTRY	NEW	GOOD	FAIR	POOR	SEE BELOW
Door		X			
Light Fixture					
Light Switch					

LIVING/DINING ROOM	NEW	GOOD	FAIR	POOR	SEE BELOW
Floor/Carpet		X			
Baseboard		X			
Walls			X		
Ceiling		X			
Window Glass		X			
Window Screens		X			
Curtain Rods		X			
Light Fixtures		X			
Electric Outlets		X			
Electric Switches		X			

KITCHEN	NEW	GOOD	FAIR	POOR	SEE BELOW
Floor		X			
Baseboard		X			
Walls		X			
Ceiling		X			
Window Glass		X			
Window Screens		X			
Curtain Rods		X			
Light Fixtures		X			
Electric Outlets		X			
Electric Switches		X			
Counter Tops		X			
Sink		X			
Disposal		X			
Cupboards		X			
Oven		X			
Broiler Pan		X			
Range		X			
Ventilating Fan		X			
Refrigerator		X			
Ice Trays		X			

FIRST BEDROOM	NEW	GOOD	FAIR	POOR	SEE BELOW
Door		X			
Floor/Carpet		NA			
Baseboard		X			
Walls		X			
Ceiling		X			
Window Glass		X			
Window Screens		X			
Curtain Rods			X		
Light Fixtures		X			
Electric Outlets		X			
Electric Switches		X			
Closet and Doors		X			

SECOND BEDROOM	NEW	GOOD	FAIR	POOR	SEE BELOW
Door		X			
Floor/Carpet		X			
Baseboards		X			
Walls		X			
Ceiling		X			
Window Glass		X			
Window Screens		X			
Curtain Rods		X			
Light Fixtures		X			
Electric Outlets		X			
Electric Switches		X			
Closets and Doors		X			

THIRD BEDROOM	NEW	GOOD	FAIR	POOR	SEE BELOW
Door					
Floor/Carpet					
Baseboards					
Walls					
Ceiling					
Window Glass					
Window Screens					
Curtain Rods					
Light Fixtures					
Electric Outlets					
Electric Switches					
Closets and Doors					

BATHROOM	NEW	GOOD	FAIR	POOR	SEE BELOW
Door		X			
Floor/Carpet		NA			
Walls		X			
Ceiling		X			
Window Glass		X			
Window Screens		X			
Tub		X			
Shower and Tile		X			
Shower Rod/Door		X			
Lavatory		X			
Faucets		X			
Counter Top		X			
Cabinets		X			
Mirror		X			
Toilet Bowl		X			
Flush Tank		X			
Light Fixtures		X			
Electric Outlets		X			
Electric Switches		X			
Towel Racks, Etc.		X			

MISCELLANEOUS	NEW	GOOD	FAIR	POOR	SEE BELOW
Water Heater		X			
Door Bell		X			
Mail Box		X			
Lanai Area		X			
Outside Light Fix.		X			
Parking Stall(s)		X			
Storage Locker		X			
Drapenes		X			
Apartment Keys		X			
Elevator Keys		X			
Mail Box Keys		X			
T. V. Cable		X			
Linen Closet		X			
Appliance Books		X			

ITEMS NOT LISTED	NEW	GOOD	FAIR	POOR	SEE BELOW
Stove Oven		X			
NT Working					
Air Cond		X			
Cover toped		X			

COMMENTS (EXPLAIN ITEMS MARKED "SEE BELOW" IN THIS AREA)

NO SMOKING, CANDLES or drinking in the front yard. Is someone is really dont call windy with George Torres & [redacted]

WE/I HAVE READ THE ABOVE INSPECTION REPORT, HAVE EXAMINED AND CHECKED ALL SAID ITEMS AND FIND IT EXISTING, TRUE, CORRECT AND IN CONDITION AS INDICATED.

CHECK-IN  
 CHECK-OUT

DATE Sept 18 2017  
AGENT Maria Esth. Cona / George Torres  
RESIDENT Maria Jaurigi

FORWARDING ADDRESS:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



# SERVICE REPORT

*PG&E Visited your Property Today to Service Your Account*

Valued Customer: [REDACTED] Address: [REDACTED] AVE

Service Date/Time: 3-9-18 Address: 3:30 A.M./P.M. (P.M.)

Service Technician: LUKE Confirmation/Field Order # 77855057

Transaction Type: SAFETY CHECK

- SORRY WE MISSED YOU: Unfortunately we were not able to complete your service request because it requires your presence or the presence of an adult. Please call us at **1-800-743-5000**
- SORRY WE MISSED YOU: Please see reverse side for additional information

Gas Service									
Service/Inspection of Gas Equipment									
Appliance Type	Inspected	Cleaned Burner Pilot	Filter Inspected	Adjusted	Repaired	Gas Leak Repaired	Appliance Parts Replace Program	Unsafe Condition Identified	Refer to Licensed Contractor
Range	X								
Oven	X								
Water Heater	X								
Heating Appliance	X								
Dryer									
Pool/Spa Heater									
Other									

Electric Service						
Service/Inspection of Electric Equipment						
Equipment Type	Inspected	Voltage Read	Problem Corrected	Parts/Contractor Referral	Unsafe Condition Identified	Refer to Dealer
Service Panel						
Voltage Problem						
Complete Outage						
Partial Outage						
Electric Range						
Electric Water Heater						
Other						

**Remarks:**

Gas SERVICE IS ON.

RANGE/OVEN - SAFETY CHECK OK.

WALL HEATER - CYCLED OK, SAFETY CHECK OK.

WATER HEATER - CYCLED OK SAFETY CHECK OK.

Case #

**Additional PG&E Work Required**

- The work you requested will require additional PG&E follow up or repairs to complete. Please refer to your case number above when calling for additional information regarding your request.

*Thank you for the opportunity to serve you*

Were you satisfied with the service? Yes  No  If your answer is "No" how can we improve?