

CITY OF SACRAMENTO

Permit No: 9810715

1231 I Street, Sacramento, CA 95814

Insp Area: 1

Site Address: 1601 10TH ST SAC

Sub-Type: REM

Parcel No: 006-0330-015

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

CAPITOL AREA DEVELOPMENT AUTHORITY
1317 O ST #4
SACRAMENTO CA 95814

PETER SIMON
4853 TOMMAR DR
FAIR OAKS CA 95628

Nature of Work: REMODEL EXISTING SANDWICH SHOP

CONSTRUCTION LENDING AGENCY: I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Sec. 3097, Civ. C).

Lender's Name Lender's Address

LICENSED CONTRACTORS DECLARATION: 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.

License Class License Number Date Contractor Signature

OWNER-BUILDER DECLARATION: I hereby affirm under penalty of perjury that I am exempt from the contractors License Law for the following reason (Sec. 7031.5, Business and Professions Code; any city or county which requires a permit to construct, alter, improve, demolish, or repair any structure, prior to its issuance, also requires the applicant for such permit to file a signed statement that he or she is licensed pursuant to the provisions of the Contractors License Law (Chapter 9 (commencing with Section 7000) of Division 8 of the Business and Professions Code) or that he or she is exempt therefrom and the basis for the alleged exemption. Any violation of Section 7031.5 by any applicant for a permit subjects the applicant to a civil penalty of not more than five hundred dollars (\$500.00);

I, as a 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 Professional Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who does such work himself or herself or through his/her own employees, provided that such improvements are not intended or offered for sale. If, however, the building or improvement is sold within one year of completion, the owner-builder will have the burden of proving that he/she did not build or improve for the purpose of sale.)

I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) licensed pursuant to the Contractors License Law).

I am exempt under Sec. B & PC for this reason:
Date 06/01/99 Owner Signature Carmie Stoddard

IN ISSUING THIS BUILDING PERMIT, the applicant represents, and the city relies on the representation of the applicant, that the applicant verified all measurements and locations shown on the application or accompanying drawings and that the improvement to be constructed does not violate any law or private agreement relating to permissible or prohibited locations for such improvements. This building permit does not authorize any illegal location of any improvement or the violation of any private agreement relating to location of improvements.

I certify that I have read this application and state that all information is correct. I agree to comply with all city and county ordinances and state laws relating to building construction and hereby authorize representative(s) of this city to enter upon the abovementioned property for inspection purposes.

Date 06/01/99 Applicant/Agent Signature Carmie Stoddard

WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

I have and will maintain a certificate of consent to self-insure for workers' compensation as provided for by Section 3700 of the Labor Code, for the performance of work for which the permit is issued.

I have and will maintain workers' compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier Policy Number Exp Date

(This section need not be completed if the permit is for \$100 or less) 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 the workers' compensation laws of California and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 06/01/99 Applicant Signature Carmie Stoddard

WARNING: FAILURE TO SECURE WORKER'S COMPENSATION COVERAGE IS UNLAWFUL AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS (\$100,000) IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3706 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEE.

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

CITY OF SACRAMENTO
APPLICATION FOR [REDACTED] BUILDING PERMIT #9807152

DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

1231 I Street, Rm. 200
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

PLAN CHECK # 646 Insp. Area 10

Applicant **MUST** complete ALL Unshaded areas this page only

ADDRESS 1106 I Street Suite _____
PARCEL # 006-0330-015

CONTACT Name <u>Yummy Choice</u> Address <u>1230 Capitol Ave</u> <u>Sacramento CA</u> Zip <u>95814</u> Phone <u>916 211 2114</u> FAX <u>441 1824</u>		LICENSED CONTRACTOR Lic No. # _____ Name <u>TBT</u> Address _____ _____ Zip _____ Phone _____ FAX _____	
ARCHITECT/ENGINEER Name <u>PEV</u> Address <u>4853 TOMMIE DR</u> <u>Fair Oaks CA</u> Zip <u>95628</u> Phone <u>916 711 6</u> FAX _____		Tenant/OWNER Name <u>CADA</u> Address <u>1230 Capitol Ave</u> <u>Sacramento CA</u> Zip <u>95814</u> Phone <u>916 322 2114</u> FAX <u>441 1824</u>	

→ Will the permittee have any employees on the jobsite? Yes No

→ If yes, WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NAME OF INSURANCE COMPANY: _____

NATURE OF WORK IN DETAIL: Renovate Existing Sandwich Shop

DBA: Yummy Choice VALUATION: 30,000

FLOOD STATUS:				S.C.A.T.						
JOB DESCRIPTION		BLDG	SHEL	APT	TI()	REM(✓)	SW	FIRE	ADD	OTH
INSP. DISCIPLINES			BLDG	MECH	PLUMB	ELEC	SITE		FIRE	
# Stories	1st fl Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. <u>YN</u>		Fed Code	Vio. File	
				<u>B</u>	<u>VN</u>	Spr	Alarm	<u>18</u>	<u>NO</u>	
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>E</u>	<u>F</u>	<u>S</u>		<u>D</u>	<u>R</u>	

COMMENTS:

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

BLDGFRM (REV 05/98) WATER FLOW TEST FOR NEW BLDGS OR ADDITIONS Yes No



EXHIBIT 1

RE 1601 10TH ST.

I have read and am familiar with the contents of City's standard Owner-Builder Notification and Owner-Builder Verification, as required by California Health and Safety Code Section 19830 and 19831. I authorize my agent(s) ARME GOODING, CMAA COST ADMIN. to sign the Owner-Builder Verification on my behalf.

Signature

[Handwritten Signature]

Print Name

ARME B. GOODING

Address

SACA 1530 CAPITOL AVENUE
SACRAMENTO, CA 95814

Telephone

916 522 2114

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNER

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed improvement (yes or (no) _____

2. I (~~have~~/have not) _____ signed an application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name _____ Address _____

City _____ Telephone _____

Contractors License No. _____

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise, and provide the major work.

Name _____ Address _____

City _____ Telephone _____

Contractors License No. _____

5. I will provide some of the work but I have contracted (hired) the following to provide the work indicated:

Name	Address	Phone	Type of Work
Therdy Construction	PO Box 1214/450 McHirst #8 11600 7227	910-603-4190	Roof installation/ fire suppression misc carpentry
Wan Tran license #6007		910-607-3022	Plumbing, electrical misc carpentry

Signed [Signature] for CADA 14 322-2114

Job Address 1201111

Date 3/1/79

Permit No.: _____

Floor

12'-6" 2x16 25# 2 Scm

$w = (70 \text{ psf} \times 16) / 12 = 93 \text{ \#/ft}$

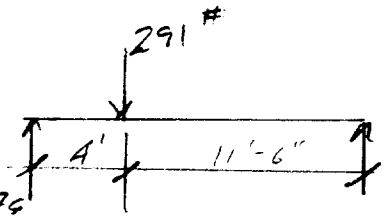
$f_b = 9 (93) (12.5 / 12)^2 / 1.5 = 689 \text{ psi} < 875$

$T_2 = (93) (12.5) / 12 = 58 \text{ \#}$

15'-6" 2x12

$M = (291 \text{ \#} \times 4) (11.5 / 12) = 863 \text{ \#ft}$

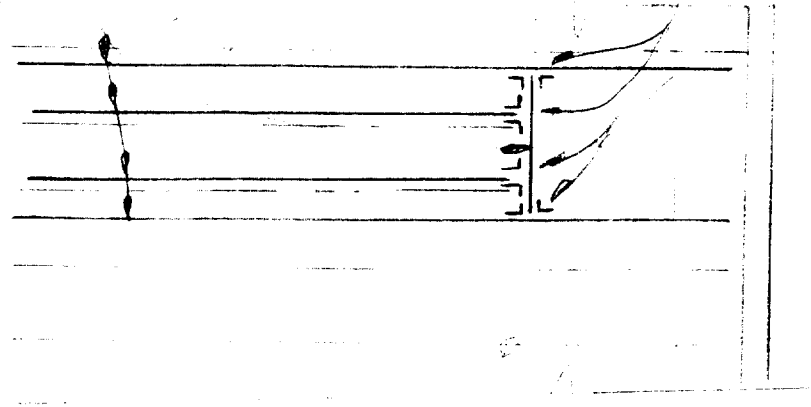
$f_b = (863) (12) / (12 \times 12)^2 / 1.5 = 327 \text{ psi} < 875$



James Carlson

2x12 DF #2

Shower + 1212

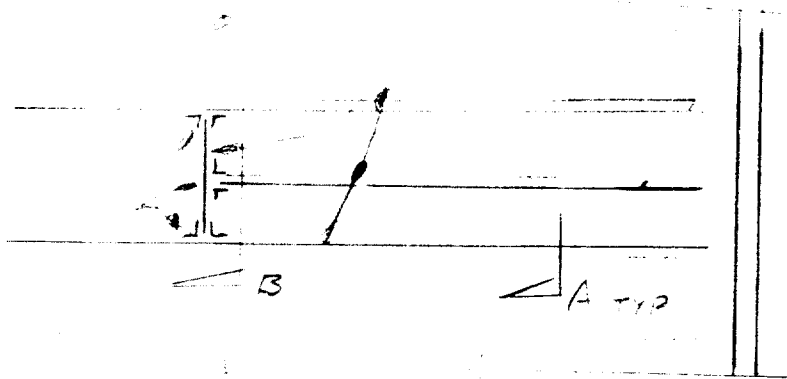


(e) Truss @ 16' o.c. typ

Lead Framing

Truss @ 16' o.c. typ

2x12 DF #2



Shower + 1212 TYP

Flow Framing



James Forrest Carlson

