

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 9911527
Insp Area: 1

Site Address: 3301 C ST SAC
Parcel No 004-0010-001

Sub-Type: ACOM
Housing (Y/N): N

CONTRACTOR

OWNER

HOLGERSON HARRY T JR/MARY E
72 98TH AV
OAKLAND CA 94606

ARCHITECT

Nature of Work: WIRELESS PHONE FACILITY WITH 12 ANT. AND EQUIP CABINET

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 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 A/B License Number 608768 Date 08/Nov/99 Contractor Signature [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 a 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. It, 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 licensed pursuant to the Contractors License Law.

I am exempt under Sec. _____ B & PC for this reason: _____

Date _____ Owner Signature _____

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 10/8/99 Applicant/Agent Signature [Signature]

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 10/8/99 Applicant Signature [Signature]

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
DEVELOPMENT SERVICES DIVISION

EXPRESS PLAN REVIEW

| SUBMITTAL DATES | | | | | |
|-----------------|-----|--------------|-----|------------|-----|
| First Review | | 2nd Review | | 3rd Review | |
| IN | OUT | IN | OUT | IN | OUT |
| / / | / / | 10 / 28 / 99 | / / | / / | / / |

PLAN CHECK # 9911527
 ADDRESS: 3301 C ST
 Commercial Residential

ACCEPTED by (Staff):

| DISCIPLINE | 1ST REVIEW | | | 2ND REVIEW | | | 3RD REVIEW | | |
|---------------------|------------|-------|----------|------------|-------|---------|------------|-------|------|
| | Status | Staff | Date | Status | Staff | Date | Status | Staff | Date |
| LIFE SAFETY | 03 | GYL | 10/13/99 | 13 | GYL | 11/3/99 | | | |
| STRUCTURAL | 03 | GYL | 10/12/99 | 13 | GYL | 11/2/99 | | | |
| MECHANICAL/PLUMBING | | | | | | | | | |
| ELECTRICAL | 13 | AM | 10/13/99 | | | | | | |
| FIRE | 13 | EMB | 10/13/99 | | | | | | |
| PLANNING | 13 | CUT | 10/14/99 | | | | | | |

STAFF COMMENTS:
Need Site plan Check

APPLICATION FOR COMMERCIAL BUILDING PERMIT

DEVELOPMENT SERVICES DIVISION
 PERMIT SERVICES SECTION
 1231 I Street, Rm. 200
 Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

ACTIVITY # 9911527 Insp. Area 1C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 3301 C ST Suite _____

PARCEL # 004-0010-001

| | |
|---|---|
| CONTACT | LICENSED CONTRACTOR Lic No. # _____ |
| Name <u>STEVE SIPHERD</u> | Name <u>STEVE SIPHERD</u> |
| Address <u>2180 Harvard ST. Suite 220</u> | Address <u>14140 Rockledge Ave. # 300 Victorville</u> |
| Phone <u>916-417-9291</u> FAX <u>916-564-1549</u> | Phone <u>760-241-0800</u> FAX _____ |
| E-mail _____ | E-mail _____ |
| ARCHITECT/ENGINEER | OWNER |
| Name <u>Western Planning & Engineering</u> | Name <u>HE HARRY & MARY HOLGERSON</u> |
| Address <u>11860 Kemper Rd #3/Auburn CA 95603</u> | Address <u>7298th Ave, Oakland, CA 94607</u> |
| Phone <u>530-823-6917</u> FAX <u>530-823-5519</u> | Phone _____ FAX _____ |
| E-mail _____ | E-mail _____ |

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: Install wireless phone facility with 12 panel Antennas & Equipment Cabinet.

OCCUPANT/TENANT: Nextel VALUATION: \$ 40,000⁰⁰

| | | | | | | | | | | | | | | | |
|-------------------------------------|--------------|------------|----------|--------------|--------------|-------------------------|--|-------------|--|-------------|--|------------------|--|-------------|--|
| FLOOD STATUS: <u>NR</u> | | S.C.A.T. | | | | | | | | | | | | | |
| JOB DESCRIPTION: <u>BLDG</u> | | SHELL | | APT | | TI() | | REM() | | SW | | FIRE | | ADD | |
| INSPECTION DISCIPLINES: <u>BLDG</u> | | | | <u>MECH</u> | | <u>PLUMB</u> | | <u>ELEC</u> | | <u>SITE</u> | | _____ | | | |
| # Stories | 1st flr Area | Total Area | Use Zone | Occp Group | Const type | Fire Req. Y/N | | Fed Code | | Vio. File | | [H] [Quad] | | | |
| <u>B</u> | <u>L</u> | <u>P</u> | <u>M</u> | <u>B</u> | <u>_____</u> | <u>SPR</u> <u>ALARM</u> | | <u>20</u> | | <u>D</u> | | <u>PW</u> | | <u>UTIL</u> | |
| <u>GYL</u> | | | | <u>_____</u> | <u>_____</u> | <u>NONE</u> | | <u>1282</u> | | | | | | | |

COMMENTS: EXPRESS

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

Date of Request: _____

By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 3301 C St.

Assessor's Parcel Number: 004-0010-001

Previous Use: Industrial

Description of Request/Proposed Use: Cell antennas added to a existing water tank

Is This a Change of Use? No

Prior Applications for Project Site(P#, Z#, DRPB#): Z 99-091 Zoning Designation: M1

Comments: Site Plan Check needed field inspection up to Gary Sproul

Are There Any Planning Issues?: (circle one) YES NO

- * Staff Site Plan Check Required? (Circle one) YES NO
- * Field Inspection Required? (Circle one) YES NO
- * Design Review/Preservation Required?: (Circle one) YES NO

Planning Review by/Date: [Signature] 10-11-97

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL