

CITY OF SACRAMENTO

Permit No: 9805651

1231 I Street, Sacramento, CA 95814

Insp Area: 4

Site Address: 1610 ARDEN WY SAC

Sub-Type: ACOM

Parcel No: 2770272004

STE 250

Housing (Y/N): N

CONTRACTOR

BROWNING CONSTRUCTION INC
9050 RANCHVIEW CT
SACRAMENTO CA 95624

OWNER

THIRD I R E HUNTINGTON GROUP
1610 ARDEN WY
SACRAMENTO CA 95815

ARCHITECT

Nature of Work: INT REMODEL

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 B License Number 461321 Date 6-30-98 Contractor Signature Daniel Browning

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 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 6-30-98 Applicant/Agent Signature Daniel Browning

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 Calif Indemnity Ins Co Policy Number NS045284F

(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 6-30-98 Applicant Signature Daniel Browning

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

PC 6195X

CITY OF SACRAMENTO  
DEVELOPMENT SERVICES DIVISION

# EXPRESS PLAN REVIEW

DATES					
1ST REVIEW		RECHECK		2ND RECHECK	
IN	OUT	IN	OUT	IN	OUT
11/17	1/1	1/1	1/1	1/1	1/1

PLAN CHECK NO. 6195X	COMM.	RES.
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CONTACT PERSON: Paul H. Dreyer, PE PHONE: 423-1105  
 PROJECT ADDRESS: 1616 Mission St #250 FAX: 635-5855  
 DESCRIPTION OF WORK: Interior Remodel

DISCIPLINE	1ST REVIEW			RECHECK			2ND RECHECK		
	EPR	OC	APPR	EPR	OC	APPR	EPR	OC	APPR
LIFE SAFETY			6/24						
STRUCTURAL									
MECHANICAL/PLUMBING			6/24/98						
ELECTRICAL			6-24-98						
FIRE			6-24						
PLANNING									

Legend: EPR = OK for Express Plan Review  
 OC = OK for Over the Counter Recheck  
 APPR = Approved as submitted

**CITY OF SACRAMENTO  
APPLICATION FOR BUILDING PERMIT**

98-05651

**DEVELOPMENT SERVICES DIVISION  
PERMIT SERVICES DIVISION**

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

→ Applicant must complete ALL Unshaded areas ←

PC# 6195x AREA# 4C

ADDRESS 1616 Garden Way Suite 250  
PARCEL # 277-0272-004

<p align="center"><b>CONTACT</b></p> <p>Name <u>David L. B...</u> Address <u>...</u> City <u>...</u> Zip <u>95624</u> Phone <u>...</u> FAX <u>...</u></p>		<p align="center"><b>LICENSED CONTRACTOR</b> Lic No. # <u>461321</u></p> <p>Name <u>Browning Const Corp</u> Address <u>9055 Amphibious Ct</u> City <u>...</u> Zip <u>95624</u> Phone <u>423-1105</u> FAX <u>695-5855</u></p>	
<p align="center"><b>ARCHITECT/ENGINEER</b></p> <p>Name <u>...</u> Address <u>...</u> City <u>...</u> Zip <u>95825</u> Phone <u>...</u> FAX <u>...</u></p>		<p align="center"><b>OWNER/TENANT</b></p> <p>Name <u>Speker Properties</u> Address <u>1451 Aveo Park Dr</u> City <u>...</u> Zip <u>...</u> Phone <u>921-5600</u> FAX <u>921-5655</u></p>	

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

→ If yes, WORKER'S COMPENSATION POLICY # NS245284 F EXPIRATION DATE: 10/21/98

NAME OF INSURANCE COMPANY: Capital Indemnity Ins Co

NATURE OF WORK IN DETAIL: Interior Remodel

DBA: PERESI VALUATION: 16,300.00

FLOOD STATUS: <u>Coast</u>		S.C.A.T.							
JOB DESCRIPTION	BLDG	SHEL	APT	TI( <input checked="" type="checkbox"/> )	REM( )	SW	FIRE	ADD	OTH
INSP. DISCIPLINES		<u>BLDG</u>	MECH	<u>PLUMB</u>	<u>ELEC</u>	SITE	<u>FIRE</u>		
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y/N		Fed Code	Vio. File
<u>2</u>				<u>B</u>	<u>IN</u>	<u>Spr</u>	Alarm	<u>15</u>	<u>OK</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