

CITY OF SACRAMENTO
123TT Street, Sacramento, CA 95814

Permit No: 0101190
Insp Area: 3

Site Address: 5850 ALDER AV SAC
Parcel No: 062-0080-061

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

CONTRACTOR
BUZZ OATES
8615 ELDER CREEK RD
SACRAMENTO, CA 95828

OWNER
OATES MARVIN L/PHILIP D
8615 ELDER CREEK RD
SACRAMENTO CA 95828

ARCHITECT

Nature of Work: NEW WAREHOUSE 40,160 SQ. FT.

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 A License Number 702621 Date 2/1/02 Contractor Signature Thomas M. Oates

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 2/18/01 Applicant Agent Signature Thomas M. Oates

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 STATE COMP INS FUND (CA) Policy Number 157934801 Exp Date 03/01/2002

(This section need not be completed if the permit is for ~~STANDARD DEVELOPMENT SERVICES~~ **NEIGHBORHOODS PLANNING SERVICES** 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 provisions 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 2/18/01 Applicant Signature Thomas M. Oates

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.

APPLICATION FOR COMMERCIAL BUILDING PERMIT

CITY OF SACRAMENTO
DEVELOPMENT SERVICES DIVISION
PERMIT SERVICES SECTION

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

ACTIVITY #

0101190

Insp. Area

3C

Applicant MUST complete ALL Unshaded areas

ADDRESS 5850 ALDER AVE Suite
 PARCEL # 062-0080-061

CONTACT

Name TOM McGUIRE
 Street Address 8615 ELDER CREEK RD
 City/State/Zip SACRAMENTO, CA 95828
 Phone 381-3600 FAX 381-4707
 E-mail: _____

LICENSED CONTRACTOR Lic No. # 702621

Name BUZZ OATES CONSTRUCTION
 Address 8615 ELDER CREEK RD
 City/State/Zip SACRAMENTO, CA 95828
 Phone 381-3600 FAX 381-4707
 E-mail: _____

ARCHITECT/ENGINEER

Name JIM BERTSEN
 Address 8615 ELDER CREEK RD
 City/State/Zip SACRAMENTO, CA 95828
 Phone 381-3600 FAX 381-4707
 E-mail: _____

OWNER

Name MARVIN L. OATES
 Address 8615 ELDER CREEK RD
 City/State/Zip SACRAMENTO, CA 95828
 Phone 381-3600 FAX 381-4707
 E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: STATE COMP INS FUND
 → WORKER'S COMPENSATION POLICY # 1579398-00 EXPIRATION DATE: 3/01/01

NATURE OF WORK IN DETAIL: CONSTRUCT 40,160 SF TILT-UP OFFICE/WAREHOUSE SHELL-BUILDING.
NEW WAREHOUSE # 1574, 2, 20

OCCUPANT/TENANT: 200, 201, 100, 111, 112 VALUATION: \$ ~~800,000~~

| | | | | | | | | | | |
|------------------------|--------------|------------|----------|------------|------------|----------|----------|-----------|--------|-----|
| FLOOD STATUS: | | | | S.C.A.T. | | | | | | |
| JOB DESCRIPTION | | BLDG | SHELL | APT | TI() | REM() | SW | FIRE | ADD | OTH |
| INSPECTION DISCIPLINES | | BLDG | MECH | PLUMB | ELEC | SITE | FIRE | | | |
| # Stories | 1st flr Area | Total Area | Use Zone | Occp Group | Const type | Fire Req | Fed Code | Vio. File | | |
| 1 | | 40,160 | | S2 | TIN | SPR | 18 | [H] | [Quad] | |
| (B) | (L) | (P) | (M) | (E) | (F) | (S) | (D) | (PW) | (UTL) | |

COMMENTS: NEED SOILS REPORT

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

Certification of Compliance
School District Development

Part I—To be completed by the APPLICANT

Owner's Name/Address Buzz Outlets Unit
Project Address 5850 ALDINE AVE
Parcel Number 062-0070-061 Lot No. _____
Subdivision Name _____ No. of Units _____
Applicant's Signature Thomas Williams Title PROJECT MANAGER
Phone No. (916) 381-3600 Date 6/25/01

Notice to Applicant: Pursuant to Government Code Section 66020(d), this will serve to notify you that the 90-day approval period in which you may protest the fees or other payment identified above will begin to run on the date in which the building or installation permit for this project is issued or on which they are paid to the district(s) or to another public entity authorized to collect them on behalf of the district(s), whichever is earlier.

Part II—To be completed by the BUILDING DEPARTMENT

Plan Identification Number 0101190
Building Type (check one) Residential Apartment/Condominium Commercial/Industrial
Square Feet of Chargeable Building Area 4000 sq ft
Signature/Title Bob Thompson Date 6/25/01

Part III—To be completed by the SCHOOL DISTRICT

School District Goldenrod Certificate No. 29421
 Exempt Comments _____
Residential/Apartment/etc. _____ Square ft. x \$ _____ = \$ _____
Commercial/Industrial 4000 Square ft. x \$ 33¢ = \$ 13,200.00
Total fees collected..... = \$ 13,200.00

This certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

Signature [Signature] Date 06/21/01

13,200.00

**City of Sacramento
Water and Sewer Service Quotation**

FY 99/00

| | | | | | | | |
|--|--|--------------------------------|--|---|--|---------------------------------|--|
| Date: 06/27/01 | | Time: | | Planning No.: | | Plan Check No.: 0101190 | |
| Address: 5850 Alder Ave. | | | | | | Parcel No.: 062-0080-061 | |
| Description: Commercial Warehouse | | | | | | | |
| Subdivision Map: Fruitridge Industrial Park (305-C) | | | | | | Water Page No.: WM 103 | |
| Estimate By: Mary/RT | | | | | | | |
| Engineering Firm: Peabody Engineering | | | | Project Engineer: Cindy | | Phone No.: 731-0808 | |
| | | | | Fax No.: | | | |
| Sewer Jurisdiction: <input checked="" type="checkbox"/> County <input type="checkbox"/> City | | | | | | | |
| Comment No.1 | | 8" Fire loop tps | | | | | |
| Comment No.2 | | 2" domestic/ irrigation | | | | | |
| Comment No.3 | | | | | | | |
| Comment No.4 | | | | | | | |
| Comment No.5 | | | | | | | |
| Comment No.6 | | | | | | | |
| TOTAL WATER DEV. FEES: \$7,642 | | | | 8 hrs x \$75 per hour = \$600 | | | |
| TOTAL SEWER DEV. FEES: \$0 | | | | or \$300.00 (whichever is greater) | | | |
| | | | | Total on-site grading and drainage review fee: \$600 | | | |

Water Service Quotations

| Main Size | Serv. Size | | | St. Tap | Esmt. Tap | Description | No. of Tap | No. of Meter | Tap Fee/ea. | Meter Fee/ea. | Total Tap cost | Development Fees |
|----------------------------|------------|---|---|---------|-----------|----------------------|------------|--------------|--------------|---------------|----------------|------------------|
| | D | I | F | | | | | | | | | |
| 12 | 2 | | | | x | Domestic +Irrigation | 1 | 1 | \$980 | \$610 | \$1,590 | \$7,642 |
| 12 | | | 8 | | x | Fire loop | 2 | | \$1,685 | | \$3,370 | |
| | | | | | | | | | | | \$0 | |
| | | | | | | | | | | | \$0 | |
| | | | | | | | | | | | \$0 | |
| | | | | | | | | | | | \$0 | |
| | | | | | | | | | | | \$0 | |
| 4" TAP AND 3" METER | | | | | | | | | | | | |
| | | | | | | | | | | | n/a | |
| | | | | | | | | | | | n/a | |
| ABANDONMENT | | | | | | | | | | | | |
| | Abandon | | | | in. | | | | | | | |
| | Abandon | | | | in. | | | | | | | |
| CREDIT | | | | | | | | | | | | |
| | Credit for | | | | in. | | | | | | | |
| | Credit for | | | | in. | | | | | | | |
| | | | | | | | 0 | | Fire Hydrant | | | |
| Total for Water | | | | | | | | | | | \$4,960 | \$7,642 |

COUNTY SEWER

| Main Size | Service Size | Description | QTY | Full St W (FT) | No. OF MH | Total Tap cost | Development Fees |
|------------------------|--------------|-----------------------------|-----|----------------|-----------|----------------|------------------|
| | | Development Fee Only | | | | \$0 | |
| | | Easement Tap + MH +Dev. Fee | | | | \$0 | |
| | | Street Tap + MH + Dev. Fee | | | | \$0 | |
| | | Credit | | | | | \$0 |
| Total for Sewer | | | | | | \$0 | \$0 |

Note: Total cost = Qty x Street/2 x Tap Fee + MH Fee, MH Fee is \$1200.00

Sewer Tap Construction Charge: \$0
 Water Main Construction Charge: \$4,960
Total For Address: \$4,960

Rob H. [Signature]
 6/27/01

City of Sacramento
Water and Sewer Service Quotation
 FY 99/00

| | | | |
|---|-------|---|--------------------------------|
| Date: 06/27/01 | Time: | Planning No.: | Plan Check No.: 0101190 |
| Address: 5850 Alder Ave. | | Parcel No.: 062-0080-061 | |
| Description: Commercial Warehouse | | | |
| Subdivision Map: Fruitridge Industrial Park (305-C) | | Water Page No.: | WM 103 |
| Estimate By: Mary/RT | | | |
| Engineering Firm: Peabody Engineering | | Project Engineer: Cindy | |
| | | Phone No.: 731-0808 | |
| | | Fax No.: | |
| Sewer Jurisdiction: <input checked="" type="checkbox"/> County | | <input type="checkbox"/> City | |
| Comment No. 1 8" Fire loop tps Comment No. 2 2" domestic/ irrigation Comment No. 3 Comment No. 4 Comment No. 5 Comment No. 6 | | | |
| TOTAL WATER DEV. FEES: \$7,642 | | 8 hrs x \$75 per hour = \$600 | |
| TOTAL SEWER DEV. FEES: \$0 | | or \$300.00 (whichever is greater) | |
| | | Total on-site grading and drainage review fee: \$600 | |

Water Service Quotations

| Main Size | Serv. Size | | | St. Tap | Esmt. Tap | Description | No. of Tap | No. of Meter | Tap Fee/ea. | Meter Fee/ea. | Total Tap cost | Development Fees |
|---------------------|------------|---|---|---------|-----------|----------------------|------------|--------------|--------------|---------------|----------------|------------------|
| | D | I | F | | | | | | | | | |
| 12 | 2 | | | | x | Domestic +Irrigation | 1 | 1 | \$980 | \$610 | \$1,590 | \$7,642 |
| 12 | | | 8 | | x | Fire loop | 2 | | \$1,685 | | \$3,370 | |
| | | | | | | | | | | | \$0 | |
| | | | | | | | | | | | \$0 | |
| | | | | | | | | | | | \$0 | |
| | | | | | | | | | | | \$0 | |
| | | | | | | | | | | | \$0 | |
| 4" TAP AND 3" METER | | | | | | | | | | | | |
| | | | | | | | | | | | n/a | |
| | | | | | | | | | | | n/a | |
| ABANDONMENT | | | | | | | | | | | | |
| | Abandon | | | | in. | | | | | | | |
| | Abandon | | | | in. | | | | | | | |
| CREDIT | | | | | | | | | | | | |
| | Credit for | | | | in. | | | | | | | |
| | Credit for | | | | in. | | | | | | | |
| | | | | | | | 0 | | Fire Hydrant | | | |
| Total for Water | | | | | | | | | | | \$4,960 | \$7,642 |

COUNTY SEWER

| Main Size | Service Size | Description | QTY | Full St W (FT) | No. OF MH | Total Tap cost | Development Fees |
|-----------------|--------------|-----------------------------|-----|----------------|-----------|----------------|------------------|
| | | Development Fee Only | | | | \$0 | |
| | | Easement Tap + MH +Dev. Fee | | | | \$0 | |
| | | Street Tap + MH + Dev. Fee | | | | \$0 | |
| | | Credit | | | | | \$0 |
| Total for Sewer | | | | | | \$0 | \$0 |

Note: Total cost = Qty. x Street/2 x Tap Fee + MH Fee, MH Fee is \$1200.00

Rob H. G.
6/27/01

Sewer Tap Construction Charge: \$0
 Water Main Construction Charge: \$4,960
Total For Address: \$4,960

DAILY FIELD REPORT

| | | | | |
|---|---|--------------------------|----------------------------|------------|
| Project #: 1246 348 01 | Date: 8-3-01 | Day: MONDAY | Weather: CLEAR | PAGE: 1 |
| Project Name: A. D. CO. GARAGE HOUSE | Project Location: SACRAMENTO, CA | Permit #: | | |
| Client: | Client's Representative: | | | |
| General Contractor: SOTT COATED RESTORATION INC. | Superintendent: B. W. RAYNES | | | |
| Sub-Contractor: | Other Persons Contacted: | | | |
| Type of Work: FOOTING CORRECTIONS | Location/Element: INT. / PERIMETER | Equipment used: PROBE | Time: 1 HR | |
| Type of Work: | Location/Element: | Equipment used: | Time: | |
| Plans/Specifications: SOTT COATED RESTORATION INC. (SOTT) 8/1/01 MOD (SOTT) | SOTT COATED RESTORATION INC. SUPERINTENDENT | | | |
| CON - POUR OF CONCRETE UNDER THE | | | | |
| FOR THE 8" POLYMER PORTLAND 20" EXPOSED | | | | |
| CONCRETE. RINGS WERE 6 FROM A-2 LOCATION | | | | |
| GENERAL CONTRACTOR: SOTT COATED RESTORATION INC. | | | | |
| 7000 S. 21st ST. SACRAMENTO, CA 95828 | | | | |
| CONTACT: RAYNES@SOTT.COM | | | | |
| SOTT COATED RESTORATION INC. | | | | |
| 3140 BEACON BLVD. WEST SACRAMENTO, CA 95691 | | | | |
| (916) 371-0434 | | | | |
| FAX: (916) 371-1809 | | | | |
| ATTACHMENTS: <input type="checkbox"/> FIELD DENSITY DATA <input type="checkbox"/> CONCRETE PLACEMENT DATA <input type="checkbox"/> SKETCH <input type="checkbox"/> OTHER: | | | | |
| Copy received by/given to: John Jones | Arrived: 7:00 | Departed: 8:00 | Report by: B. W. RAYNES | |