

THIS IS A 2 PART FORM WRITE ON A FIRM SURFACE

USE BLACK INK BALL POINT PEN - PRESS FIRMLY SIGN PERMIT APPLICATION

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).

Lenders Name _____
Lenders 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 C45 Lic. Number 738695
Date 11-29-04 Contractor James D. Elbert
(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 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 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 & P C 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 of this city to enter upon the above-mentioned property for inspection purposes.
Date 11-29-04 Signature of Applicant or Agent James D. Elbert

SITE ADDRESS

1735 ARDEN WAY

SUITE

INSP. AREA 41

ASSESSOR PARCEL NO. 277-0162-025

PERMIT NO. 0419748

LICENSED CONTRACTOR

ELBERTSCO

ADDRESS 1041 TRIANGLE CT

ZIP CODE 95691

PHONE NO. 916-324-8023

BUSINESS OWNER

United Artists Theatre Sacramento

ADDRESS 1735 ARDEN WAY

ZIP CODE 95691

PHONE NO. 916-324-8023

SIGN INFORMATION

- ATTACHED
- ILLUMINATED
- INDIVIDUAL LETTERS
- METAL
- PLASTIC
- WOODEN
- INTERIOR / ELECT.
- NON-ILLUMINATED
- PAINTED ON BUILDING
- POLE
- MONUMENT
- PROJECTING
- SINGLE FACED
- BILLBOARD / SUBDIVISION
- LOGO
- DOUBLE FACED
- VINYL/GATOR FOAM
- RE-FACE

SIGN COPY United Artists Theatre

CITY OF SACRAMENTO BUILDING INSPECTION DIVISION PERMIT SERVICES 284-7619

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 FUND
Policy Number 13355-2004

(This section need not be completed if the permit is for one hundred dollars (\$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: 11-29-04 Applicant: James D. Elbert
(Signature)

WARNING: FAILURE TO SECURE WORKERS' 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 FEES.

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

(A) HEIGHT 33.5' (B) LENGTH 42'7.5"
(A X B) SIGN AREA 108 SF
POLE SIZE _____ FOOTING SIZE _____
STREET FRONTAGE (FT) _____
OCCUPANCY FRONTAGE (FT) _____
OFFICE USE ONLY

ENGINEERING REQUIRED? YES NO APPROVED BY _____
DESIGN REVIEW REQUIRED? YES NO APPROVED BY _____
SPECIAL PERMIT REQUIRED? YES NO P# _____
VARIANCE REQUIRED? YES NO P# _____
LOCATED IN PUD? YES NO WHICH PUD? _____

SIGN VALUATION
A. TYPE OF SIGN Sign
B. \$ _____ PER SQ. FT. SQ. FT. = \$ _____
APPROVED BY my DATE 11/29/04
DENIED BY _____ DATE _____

FINAL INSPECTIONS
BUILDING INSPECTOR [Signature] DATE 5/27/05
ELECTRICAL INSPECTOR [Signature] DATE 5/27/05
SIGN INSPECTOR _____ DATE _____

FEES: _____ RECEIVED _____
DATE _____ AMOUNT _____

SIGN APPLICATION FEE 100.00
SIGN PERMIT FEE _____
ELECTRICAL SIGN FEE _____
CITY BUSINESS LICENSE _____
OTHER _____

TOTAL FEES \$ 380.17