

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0104430
Insp Area: 1

Site Address: 200 JIBBOOM ST SAC
Parcel No: 001-0012-025

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

CONTRACTOR
BRINNEIL F. FRIE
7704 DRYCREEK RD
SAC, CA 95673

OWNER
SACRAMENTO DEVELOPMENT PARTNERS
SAN ANTONIO TX
78202

ARCHITECT

Nature of Work: REMOVE AND REPLACE FIRE ALARM CONTROL PANEL, TIE IN EXISTING DEVICES USING EXISTING WIRING AT PANEL AND REPLACE FIRE ALARM PANEL.

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, C.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: 280525 _____ Date _____ 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 3 of the Business and Professions Code) or that he or she is exempt herefrom 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.A.P. for this reason _____
Date *7/10/01* _____ Owner Signature *[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 *7/10* _____ 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: AMERICAN HOME ASSURANCE CO. 5275071 Exp Date: 10/01/2001

(This section need not be completed if the permit is \$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 *7/10* _____ Applicant Signature *[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 FEE.

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

CITY OF SACRAMENTO
BUILDING INSPECTIONS DIVISION
PERMIT SERVICES

PERMIT # 0104430

ADDRESS: 200 JIBBOOM ST

This application will need one or more of the following items
before it can be issued:

- Owner/Builder Form (legal document)
- Current Certificate of Workers' Comp. exp. 7-01-01 OK
- Hazardous Materials Form (hazmat)
(Orig. In folder, golden-applicant, 2 to fire)
- Letter of Authorization Required to sign by Contractor or Owner
- School Impact Fee (copy of paid receipt)
- HCD Forms (state 445-4782) for Modular/Coaches
- County Regional Sanitation Fee (copy of receipt)
(Deloras Ross @ 827-7th street, Rm 105, window, 10-ph:875-6679)
- Habitat Conservation Plan Fee (Bob Robinson or Farmarz Ansari)
- PERMIT FEES \$ PAID Duc

Driveway Permit \$ _____
(public works)

Encroachment Permit \$ _____

- CH 100 Special Conditions (enter computer, mark margin of permit at final, attach instructions to permit, and 1 copy in each folder, + CUSTOMER COPY)
- Special Inspections XI (1 copy each folder, 1 to CAROLINE)
- Flood Elevation Certificate (1 copy B. Nakashima, 1 in folder)
- Other _____

Date Notified 7-10-01 Plans in Bin# 30
Initials By py Processed By: LV

Microfilm @ Final

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 # 0104430 Insp. Area 10

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 200 JIBBOOM STREET (LA QUINTA INN) Suite _____
 PARCEL # 001-0012-025-0000

CONTACT
 Name CHARL STARKOVY (GFPS)
 Street Address 5704 DRY CREEK RD
 City/State/Zip RIDGEMOUNT, CA 95073
 Phone 916-991-5977 FAX 916-991-9384
 E-mail: _____

LICENSED CONTRACTOR Lic No. # 280525
 Name GANNON FIRE PROTECTION
 Address 5704 DRY CREEK RD
 City/State/Zip RIDGEMOUNT, CA 95073
 Phone 916-991-5977 FAX 916-991-9384
 E-mail: _____

ARCHITECT/ENGINEER
 Name _____
 Address _____
 City/State/Zip _____
 Phone _____ FAX _____
 E-mail: _____

OWNER
 Name LA QUINTA INN
 Address 200 JIBBOOM ST
 City/State/Zip SACRAMENTO, CALIF. 95814
 Phone _____ FAX _____
 E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: AMERICAN HOME ASSURANCE
 → WORKER'S COMPENSATION POLICY # PMLWC 5275025 EXPIRATION DATE: 7-1-01

NATURE OF WORK IN DETAIL: REMOVE AND REPLACE FIRE ALARM CONTROL PANEL, TIE IN EXISTING DEVICES USING EXISTING WIRING. AT PANEL (REPLACE FIRE ALARM PANEL)

OCCUPANT/TENANT: LA QUINTA INN #914 VALUATION: \$ 999.00

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. Y/N		Fed Code	Vio. File	
						SPR	ALARM	<u>06</u>	[H]	[Quad]
B	L	P	M	E	F	S	D	PW	UTIL	

COMMENTS: _____

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