

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0113486

Insp Area: 1

Thos Bros:

Sub-Type: REM

Housing (Y/N): N

Site Address: 1719 24TH ST SAC

Parcel No: 007-0332-011

CONTRACTOR

MARK III ENGINEERING
5101 FLORIN PERKINS RD.
SACTO. CA. 95826

OWNER

CALIFORNIA CONSERVATION CORP.
1729 24TH ST
SACRAMENTO CA 95814

ARCHITECT

JON DELLING
5101 FLORIN PERKINS RD
SACRAMENTO CA 95826

**Nature of Work: REPLACE EX. HVAC UNITS ON ROOF , REMODEL EXIST.SPACE
ACCORDING TO PLANS TO ACCOMODATE OFFICE FACILITY**

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 _____ License Number 574134 Date 11-7-01 Contractor Signature Randy Stever

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 11-7-01 Applicant/Agent Signature Randy Stever

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 692-01 UNIT 0002087 Exp Date 10/01/2002

_____, (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 11-7-01 Applicant Signature Randy Stever

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

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 1719 - 24TH ST Permit No. 0113486

Building Use: OFFICE Occupancy: B/S1

Building Owner: CALIF CONSERVATION CORP Construction Type: VN

Owner Address: 1729 - 24TH ST SACRAMENTO Sprinkled? [] Yes [] No

Portion of Building Occupied: OFFICE Area: 31111 Sq. Ft.

1/8/02 Nicholas Buehner DENNIS RICHARDSON
Date By:Print Sign CITY BUILDING OFFICIAL

[Finaled By:MW,LLS,BK,CP]

This Certificate, issued pursuant to the requirements of Section 109 of the Uniform Building Code, certifies that at time of issuance the described portion of the building has been inspected for compliance with the Uniform Building Code, as adopted per Title 15 of the Sacramento City Code for the group and division of occupancy and use for which the proposed occupancy is classified. Issuance of this certificate shall not be construed as an approval of a violation of any Codes, or Federal, State and City Laws or Ordinances. Certificates presuming to give authority to such violation shall not be valid. This certificate shall be posted in a conspicuous place on the premises and shall not be removed except by the City Building Official. No changes shall be made in the character of occupancy or use without approval of the City Building Official.

POST IN A CONSPICUOUS PLACE

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 #

0113486

Insp. Area

1C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1719 ZATH STREET, SACRAMENTO, CA 95814 Suite _____
 PARCEL # 007-0332-011

<p style="text-align: center;">CONTACT</p> <p>Name <u>KEVIN BROWN / RANDY STEVENS</u> Street Address <u>5101 FLORIN - PERKINS RD.</u> City/State/Zip <u>SACRAMENTO, CA 95826</u> Phone <u>381-8080</u> FAX <u>386-0363</u> E-mail: _____</p>	<p>LICENSED CONTRACTOR Lic No. # <u>514134</u> Name <u>MARK III ENG. CONTRACTORS</u> Address <u>5101 FLORIN - PERKINS RD.</u> City/State/Zip <u>SACRAMENTO, CA 95826</u> Phone <u>381-8080</u> FAX <u>386-0363</u> E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name <u>JON DELLING</u> Address <u>5101 FLORIN - PERKINS RD.</u> City/State/Zip <u>SACRAMENTO, CA 95826</u> Phone <u>381-8080</u> FAX <u>386-0363</u> E-mail: _____</p>	<p>CONTACT: <u>CINDY FULL</u> OWNER Name <u>CALIFORNIA CONSERVATION CORPS</u> Address <u>1719 ZATH STREET</u> City/State/Zip <u>SACRAMENTO, CA 95814</u> Phone <u>341-3168</u> FAX _____ E-mail: _____</p>

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: STATE COMP. INS. FUND (NO FILE)
 → WORKER'S COMPENSATION POLICY # 692-98 UNIT 0002087 EXPIRATION DATE: 10-01-02

NATURE OF WORK IN DETAIL: REPLACE EXISTING HVAC UNITS FOR OFFICE SPACE. RE-BUILD OFFICE WALLS IN PREVIOUS OFFICE SPACE. INSTALL (N) SUSP. ACOUSTIC CEILING W/ (N) OFFICE LIGHTING, ADD RECEPTACLES AS PER PLAN.

OCCUPANT/TENANT: C.C.C. VALUATION: \$24,000

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. <input checked="" type="checkbox"/> Y / <input type="checkbox"/> N		Fed Code	Vio. File	
<u>1</u>		<u>1244 sq ft</u> <u>1375 sq ft</u>		<u>S-1; B</u>	<u>V-1V</u>	<input checked="" type="checkbox"/> SPR	<input type="checkbox"/> ALARM	<u>15</u>	<input type="checkbox"/> [H]	<input type="checkbox"/> [Quad]
<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>PW</u>	<u>UTIL</u>
								<u>LV</u>		

COMMENTS: _____

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