

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0108742

Insp Area: 1

Thos Bros: 297B5

Site Address: 401 S ST SAC

Parcel No: 009-0053-020

Sub-Type: REM

Housing (Y/N): N

CONTRACTOR

DEMORELLI CONSTRUCTION
11433 SUNCO DR #103
RANCHO CORDOVA CA 95742

OWNER

THE HEY COMPANY
801 S ST #1
SACRAMENTO CA 95814

ARCHITECT

Nature of Work: SMALL INTERIOR REMODEL OF EXISTING OFFICE SPACE

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, Civil Code)

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 8 of the Business and Professions Code and my license is in full force and effect.

License Class B License Number 525709 Date 8-9-01 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 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 or rented, 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 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 building owner, 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 improvement. The City of Sacramento 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 8-9-01 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 VILANOVA INSURANCE CO Policy Number WC11925039 Exp Date 07/01/2002

(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 8-9-01 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.

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 # <u>0108742</u>	Insp. Area <u>1C</u>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 401 S ST. Suite N/A
 PARCEL # 009.0053.020

CONTACT

Name JOE CIMORELLI
 Street Address SEE CONTRACTOR →
 City/State/Zip _____
 Phone _____ FAX _____
 E-mail: _____

LICENSED CONTRACTOR Lic No. # B-525704

Name CIMORELLI CONST. CO.
 Address 11390 SUNRISE GOLD CR. #100
 City/State/Zip RANCHO CORDOVA, CA 95742
 Phone 635-4440 FAX 635-7084
 E-mail: _____

ARCHITECT/ENGINEER

Name JOHN MASTROTOTARO
 Address 5960 SAMPSON BLVD.
 City/State/Zip SAC, CA 95825
 Phone 421-9501 FAX SAME
 E-mail: _____

OWNER

Name DEPT. OF CONSUMER AFFAIRS
 Address 401 S ST.
 City/State/Zip SAC, CA 95816
 Phone N/A FAX N/A
 E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: AMERICAN INTERSTATE
 WORKER'S COMPENSATION POLICY # DO WCEA 15 2709 EXPIRATION DATE: 7-1-02

NATURE OF WORK IN DETAIL: MINOR TENANT IMPROVEMENT
NO CHANGE IN USE
 OCCUPANT/TENANT: DEPT. OF CONS. AFFAIRS VALUATION: \$ 30,000

FLOOD STATUS:		S.C.A.T.								
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(X)	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		
<u>1</u>		<u>4000</u>		<u>B</u>	<u>VN</u>	<u>N</u>	<u>15</u>	[H] [Quad]		
						SPR X ALARM			PW	UTIL

COMMENTS: BULK OF WORK BEING DONE ON THE FIRST FLOOR

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