

CITY OF SACRAMENTO
231 I Street, Sacramento, CA 95814

Permit No: 0108948
Insp Area: 1
Thos Bros: 297C3

Site Address: 501 J ST SAC #100
Parcel No: 006-0026-018

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

CONTRACTOR
GIF SANDSTROM
1001
SACRAMENTO 95814

OWNER
SACRAMENTO CORPORATE CENTER LLP
1075 BOULEVARD JILL LN #300
SACRAMENTO CA 95833

ARCHITECT

Nature of Work: INTERIOR NON STRUCTURAL TENANT IMPROVEMENT & DEMO

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. 3097.015)

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 296493 Date 8-1-01 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 employee, 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 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 & P C for this reason: _____
Date _____ Owner Signature _____

ON 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 above-mentioned property for inspection purposes.

Date 8-1-01 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 STATE FUND Policy Number 1536656-00 Exp Date 10/01/2001

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 8-1-01 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>0108948</u>	Insp. Area <u>1</u>
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 501 J street Suite 100
 PARCEL # 006-0026-018-000

<p style="text-align: center;">CONTACT</p> Name <u>Terry Yu / Stafford Space Planning</u> Street Address <u>7585 Gold Drive</u> City/State/Zip <u>Loomis CA 95650</u> Phone <u>(916) 652-3400</u> FAX <u>(916) 652-7805</u> E-mail: _____	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>296493</u></p> Name <u>Steve Sandstrom</u> Address <u>1431 22nd street</u> City/State/Zip <u>Sacramento, CA 95816</u> Phone <u>(916) 492-2800</u> FAX <u>452-5142</u> E-mail: _____
<p style="text-align: center;">ARCHITECT/ENGINEER</p> Name <u>Stafford Space Planning</u> Address <u>7585 Gold Dr.</u> City/State/Zip <u>Loomis CA 95650</u> Phone <u>916-652-3400</u> FAX <u>916-652-7805</u> E-mail: _____	<p style="text-align: center;">OWNER</p> Name <u>Raymond Moya / NNN.</u> Address <u>501 J street, ste 605</u> City/State/Zip <u>Sacramento, CA 95814</u> Phone <u>(916) 492-9430</u> FAX <u>(916) 492-9477</u> E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: _____
 → WORKER'S COMPENSATION POLICY # _____ EXPIRATION DATE: _____

NATURE OF WORK IN DETAIL: Some Demolitions, New Partitions, New electrical & telephone outlets.

STATE OF CA
 OCCUPANT/TENANT: California Children & Families Commission VALUATION: \$ 40,000.00

FLOOD STATUS:		S.C.A.T.									
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(✓)	SW	FIRE	ADD	OTH	
INSPECTION DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	PLUMB	<u>ELEC</u>	SITE	FIRE				
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y (N)		Fed Code	Vio. File		
<u>6</u>	<u>3127</u>			<u>B</u>	<u>I-FR.</u>	SPR	ALARM	<u>15</u>	[H]	[Quad]	
<u>B</u>	<u>A</u>	P	<u>M</u>	<u>E</u>	<u>F</u>	S		D	PW	UTIL	
<u>3 or</u>	<u>3 or</u>		<u>13 or</u>	<u>13 TLN</u>	<u>JA</u>						

COMMENTS: OTC approvals by STAFFORD

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



Dade Environmental Services

AIR BALANCE REPORT

JOB NAME: 801 L St. 1st Floor JOB #: 1.1070 DATE: 8/30/01

TECH: Allan SECTION: #1 PAGE: 1 of 2

UNIT	OUTLET	OPENING			FAC TOR	DESIGN		TEST 1		TEST 2		TEST 3	
		NO.	TYPE	SIZE		FPM	CFM	FPM	CFM	FPM	CFM	FPM	CFM
VAV 1		1	S	14"			680		340		700		680
		2	S	14"			680		700		650		640
		3	S	14"			680		700		640		680
		4	S	14"			680		620		680		670
							2720		2660		2680		2680
VAV 2		1	S	12"			430		500		470		440
		2	S	12"			430		480		440		430
		3	S	14"			880		800		815		880
							1720		1760		1725		1735
VAV 3		1	S	10"			350		280		330		335
		2	S	10"			350		330		380		340
		3	S	10"			350		400		375		385
		4	S	10"			350		400		375		385
		5	S	8"			150		175		180		160
							1800		1800		1870		1845

REMARKS: Families First - First Floor