

CITY OF SACRAMENTO

Permit No: 0203074

1231 I Street, Sacramento, CA 95814

Insp Area: 1
Thos Bros: 297 C3

Site Address: 660 J ST SAC

Parcel No: 006-0091-022 SECOND FLOOR #215

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

CONTRACTOR
3-D CONSTRUCTION
8572 BLACKBERRY WY
ELK GROVE 95624

OWNER
DOWNTOWN PLAZA ASSOC
547 L ST
SACRAMENTO CA 95814

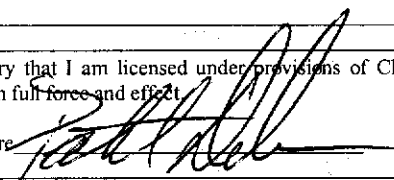
ARCHITECT

Nature of Work: INTERIOR REMODEL INCLUDING SOME WALL RELOCATION, NEW DOORS, ELECTRICAL OUTLETS

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 790567 Date 3-19-02 Contractor 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 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.)

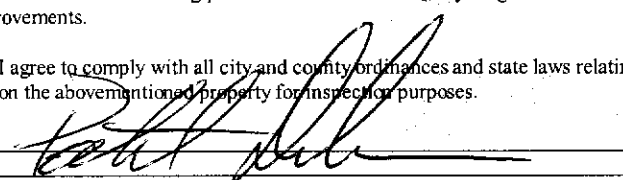
I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code: The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such projects with a contractor(s) 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 3-19-02 Applicant/Agent Signature 

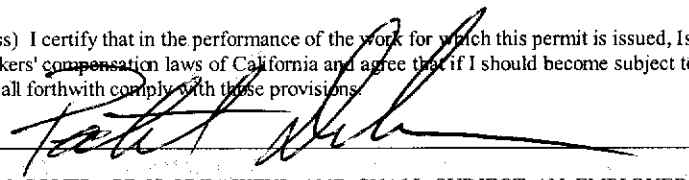
WORKER'S COMPENSATION DECLARATION: I hereby affirm under penalty of perjury one of the following declarations:

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 ACCEPTANCE IDEMUNITY INS Policy Number FW99984631 Exp Date 04/12/2002

(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 3-19-02 Applicant Signature 

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.

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 #

0203074

Insp. Area

1C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 660 J ST Suite 215
 PARCEL # 006-0091-022

CONTACT
 Name PAT DONOHUE
 Street Address 8572 BLACKBERRY WAY
 City/State/Zip ELK GROVE CA 95604
 Phone _____ FAX _____
 E-mail: _____

LICENSED CONTRACTOR Lic No. # 790567
 Name 3-D CONSTRUCTION
 Address 8572 BLACKBERRY WAY
 City/State/Zip ELK GROVE CA 95624
 Phone 916-213-6907 FAX 916-6815821
 E-mail: _____

ARCHITECT/ENGINEER
 Name JAY ROSE
 Address _____
 City/State/Zip CONCORD CA
 Phone 925 716-0861 FAX 925-827-9738
 E-mail: _____

OWNER
 Name WESTFIELD INC.
 Address 547-L ST
 City/State/Zip SAC CA 95814
 Phone 916-442-4000 FAX 442-3117
 E-mail: _____

→ Will permittee have any employees on the jobsite? No Yes → INSURANCE CO: ACCEPTANCE INDEMNITY INSCO
 → WORKER'S COMPENSATION POLICY # FW 99984631 EXPIRATION DATE: 4-24-02

NATURE OF WORK IN DETAIL: REMODEL
OFFICE RELOCATE WALLS - NEW CEILING
NEW FLOOR - CARPET TILE & NEW PAINT - NEW DRYWALL

OCCUPANT/TENANT: DIAMOND RADIO INC. VALUATION: \$ 30,000.00

FLOOD STATUS: <u>AR</u>		S.C.A.T.								
JOB DESCRIPTION: <u>REMODEL</u>		BLDG	SHELL	APT	TI()	REM()	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>BLDG</u>	MECH	PLUMB	<u>ELEC</u>	SITE	<u>FIRE</u>			
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Rec Y N	Fed Code	Vio. File		
<u>4</u>				<u>B</u>	<u>II-FR</u>	<u>Y</u>	<u>15</u>	(H)	[Quac]	
<u>(E)</u>	<u>(L)</u>	P	M	<u>(E)</u> 13	F	S	D	PW	UTL	
TUM 3/8/02										

COMMENTS: 1) Well section, Identify rooms, Plan shows req'd two exits
2) See permitment - some structural work relocation of wall in plan. To max app. req'd.

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

PLANNING AND ZONING REVIEW

..... to be filled out by Planning staff

ADDRESS: to 660 J Street

APN: 06-0091-~~002~~022 ZONING: C3 zone

DESIGN REVIEW AREA: Central City

PREVIOUS FILES RELATED TO SITE: 294-017; P93-113; P97-178

DR94-187; DR97-110; DR95-137; DR93-175; DR89-227

exists 4 story office bldg

EXISTING LAND USE: Downtown Plaza former tenant: Federal Government offices

PROPOSED USE: _____

T.I interior remodel of office space to different configuration office space for local radio station.

COMMENTS: _____

Clay

DATE: 2/7/02 BY: Arney

DOES IT APPEAR THAT THE PROJECT WILL REQUIRE A PLANNING APPLICATION?

YES NO (If yes, circle applications needed below)

.....Staff.....ZA.....Planning Commission.....Design Review.....Preservation Review.....

CONCLUSION: See above

DATE: _____ BY: _____

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 660 J ST SUITE 215 Permit No. 0203074

Building Use: OFFICE Occupancy: B

Building Owner: DOWNTOWN PLAZA ASSOC Construction Type: II-FR

Owner Address: 547 L STREET Sprinkled? Yes No

Portion of Building Occupied: SUITE 215 Area: 4000 Sq. Ft.

4/26/02

Date



By: Print

Sign

DENNIS RICHARDSON

CITY BUILDING OFFICIAL

[Finaled By: MS, DS]

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