

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0115804

Insp Area: I
Thos Bros: 297 C3

Site Address: 980 9TH ST SAC
Parcel No: 006-0036-031 8TH FLOOR

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

CONTRACTOR DELTA CONSTRUCTION & COMMUNICATION CO INC
3261 FITZGERALD RD RANCHO CORDOVA CA 95742
OWNER 100 PINE ST STE 3200 SAN FRANCISCO CA 94111

ARCHITECT LPT ASSOCIATES

Nature of Work: DEMO I WALL BUILD 1 10.5 FT WALL ELECTRICAL SWITCHES RELOCATED AND PAINT.

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 B License Number 434215 Date 12/13/01 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 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 12/13/01 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 COMPENSATION FUND OF CA Policy Number 1656399-01 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 12/13/01 Applicant Signature [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 #

0115804

Insp. Area

1C

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 980 9th St Suite 8th Floor
 PARCEL # 006-0036-031

<p style="text-align: center;">CONTACT</p> <p>Name <u>GERHARD OLSEN</u> Street Address <u>3261 RIVERVIEW RD</u> City/State/Zip <u>RAVENHAM, CA 95814</u> Phone <u>(916) 477-1177</u> FAX <u>858-8114</u> E-mail: _____</p>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # <u>439215</u></p> <p>Name <u>DELTA CONSTRUCTION</u> Address <u>SANJOSE</u> City/State/Zip _____ Phone _____ FAX _____ E-mail: _____</p>
<p style="text-align: center;">ARCHITECT/ENGINEER</p> <p>Name _____ Address _____ City/State/Zip _____ Phone _____ FAX _____ E-mail: _____</p>	<p style="text-align: center;">OWNER</p> <p>Name <u>980 9th St LLC</u> Address <u>980 9th St #260</u> City/State/Zip <u>SACRAMENTO, CA 95814</u> Phone <u>557-1800</u> FAX <u>557-1810</u> E-mail: _____</p>

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

NATURE OF WORK IN DETAIL: DEMO (1) WALL; BUILD (1) 10.5' WALL; ELECTRICAL SUPPLIES RELOCATE, W/OUT

OCCUPANT/TENANT: DEPT. OF MANAGED HEALTH CARE VALUATION: \$ 15,000.

FLOOD STATUS:		S.C.A.T.								
JOB DESCRIPTION		BLDG	SHELL	APT	TI()	REM(<input checked="" type="checkbox"/>)	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>BLDG</u>		MECH	<u>PLUMB</u>	<u>ELEC</u>		SITE	<u>FIRE</u>	
# 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>13</u>	<u>13</u>			<u>B</u>		<u>Y</u>	<u>15</u>	[H]	[Quad]	
						SPR	ALARM			
<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>	

COMMENTS: _____

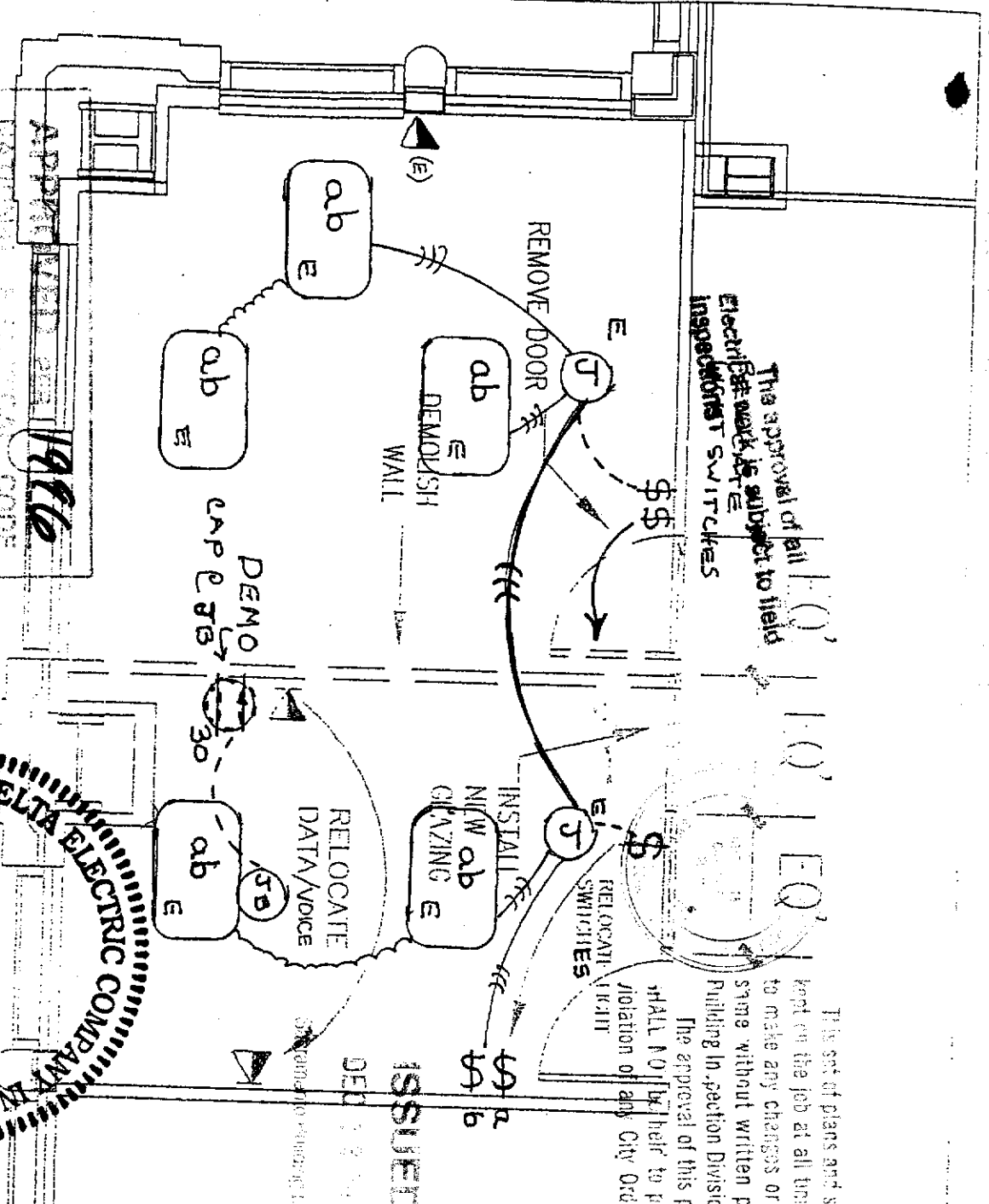
REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No
 WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

GENERAL NOTES:

1. DEMOLISH WALL AND REMOVE DOOR
2. RELOCATE EXISTING ELECTRICAL SWITCHES TO THE WALL BEING DEMOLISHED TO THE EXISTING WALL AS NOTED ON DRAWING
3. NEW GLAZING SHALL BE INSTALLED WITH MINIBLINDS TO MATCH THE VOICE/DATA JACK ON THE WALL BEING DEMOLISHED TO THE EXISTING WALL AS NOTED ON THE DRAWING
4. INSTALL NEW CARPET IN THE ENTIRE OFFICE. PROVIDE COLOR SAMPLES TO AGENCY.
5. PATCH WALL AND PAINT ALL INTERIOR WALLS OF DIRECTOR'S OFFICE. PROVIDE COLOR SAMPLES TO AGENCY.
6. PULL ALL EXCESS CABLES FROM DEMOLISHED WALL UP INTO CEILING

W/C COPY

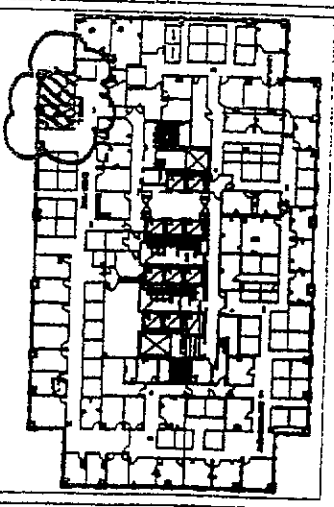
The approval of all field electrical work is subject to field inspections T SWITCHES



PROJECT: ELECTRICAL DIVISION
 AGENCY: DMHC DIRECTOR'S OFFICE
 DEPARTMENT OF MANAGED CARE
 LOCATION: 980 9TH STREET, 8TH FLOOR SACKAMINTO, CA

DELTA ELECTRIC COMPANY INC
 Robert D. Bagaley
 TRUCK PRESIDENT
 SINCE 1971 CSLB #495226
 FRANCHISE

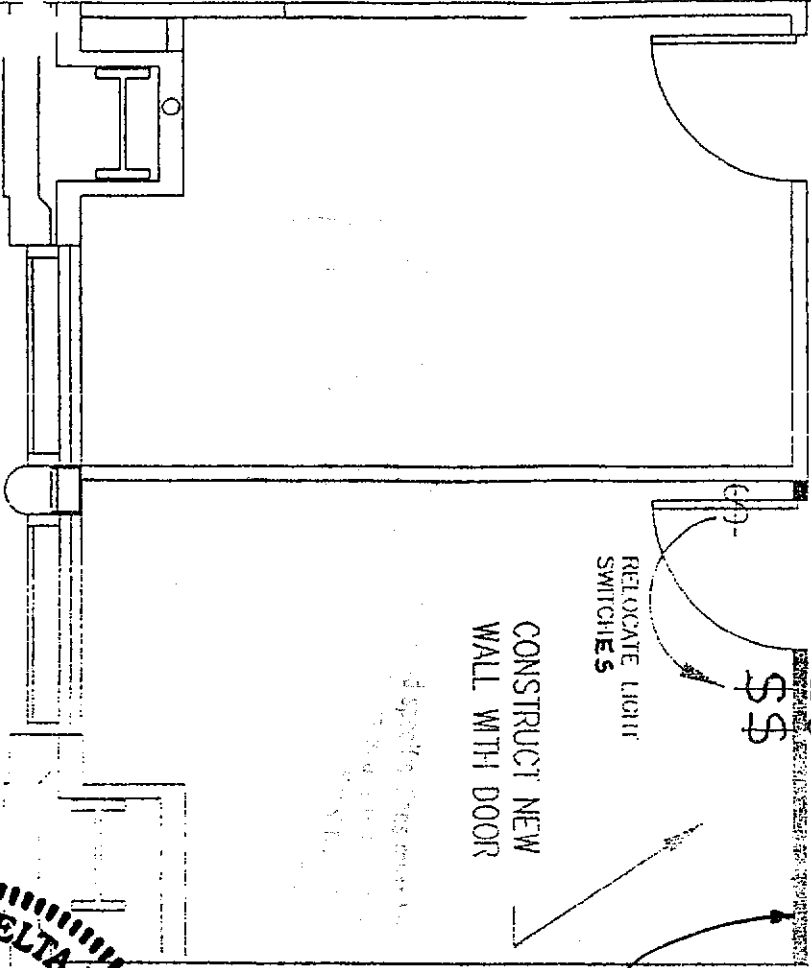
APPROVED 1986
 NATIONAL ELECTRICAL CODE
 AND CITY OF SACRAMENTO
 7.1.M. 12-13-2001
 SCALE: 1/4" = 1'-0"



LEGEND
 John Tang
 EXISTING CEILING
 HEIGHT PARTITION TO REMAIN
 EXISTING TO BE REMOVED (ANY ITEMS), SINGLE AND DOUBLE LINES

OK PMS

The approval of all
Electrical work is subject to field
inspections.

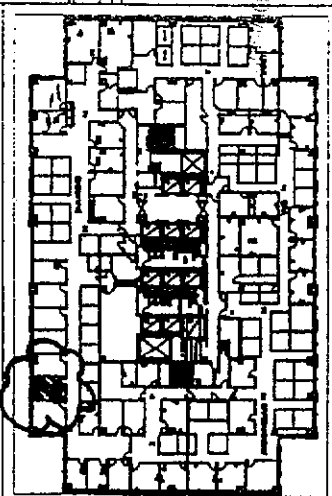


3 5/8" x 25 GA metal
studs @ 24" o/c / Lateral
& power driven pin @ 32" o/c max.

ISSUED

GENERAL NOTES:

1. PAINT WALLS TO MATCH EXISTING
2. PROVIDE AND INSTALL NEW DOOR TO MATCH EXISTING
3. RELOCATE LIGHT SWITCH AND PROVIDE ALL NECESSARY WIRING
4. RELOCATE AND/OR ADD NEW SUPPLY AND RETURN AIR DIFFUSERS WITH DUCTWORK IN NEW ENCLOSED OFFICE
5. ADD ELECTRICAL AND DATA AS NEEDED



LEGEND

- EXISTING CEILING HEIGHT PARTITION TO REMAIN
- NEW CEILING HEIGHT PARTITION
- - - EXISTING TO BE REMOVED (ANY ITEM)
- Ⓧ NEW LIGHT SWITCH LOCATION

DELTA ELECTRIC COMP. INC.
 Robert D. Bagdaley
 President
 SINCE 1971
 CSLB #495226

PROJECT:
ANGELA YE'S OFFICE

AGENCY:
DEPARTMENT OF MANAGED CARE

LOCATION:
980 9TH STREET, 8th FLOOR, SACRAMENTO, CA

DATE:
11/5/01

PLANNED:

SCALE:
1/4" = 1' 0"