

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0107406

Insp Area: 3

Site Address: 6340 STOCKTON BL SAC

Thos Bros:

Parcel No: 037-0310-026

Sub-Type: ACOM

Housing (Y/N): N

CONTRACTOR

JH MALVERN CONSTR.
1050 SAN JOSE STE111
CLOVIS CA 93612

OWNER

SMART & FINAL
600 CITADALE DR
COMMERCE CA. 90040

ARCHITECT

Nature of Work: 1940 SF ADDITION TO BLDG & REMODEL OF EXISTING RETAIL GROCERY STORE.

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 471130 _____ Date _____ 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 10-16-01 Owner Signature Wayne K Miller

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 10-16-01 Applicant/Agent Signature Wayne K Miller

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 INS. Policy Number 46765701 Exp Date 04/01/2002

(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 I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

Date 10-16-01 Applicant Signature Wayne K Miller

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: 6340 STOCKTON BL Permit No. 0107406

Building Use: STORE DBA: SMART & FINAL Occupancy: M

Building Owner: SMART & FINAL Construction Type: VN

Owner Address: 600 CITADEL COMMERCE, CA Sprinkled? Yes No

Portion of Building Occupied: REMODEL & ADDITION Area: 1940 Sq. Ft.

3/26/02

Date

By:Print



Sign

DENNIS RICHARDSON
CITY BUILDING OFFICIAL

[Finaled By: DLS,LLS,KR,SB,MJG]

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 # 0107406	Insp. Area 3C
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 6340 Stockton Blvd Suite _____
 PARCEL # 037-0310-020

<p style="text-align: center;">CONTACT</p> Name <u>Fernando Gallarzo</u> Street Address <u>600 Citadel Dr.</u> City/State/Zip <u>Commerce CA 90040</u> Phone <u>323-869-7591</u> FAX <u>869-7856</u> E-mail: <u>Fernando.Gallarzo@smartandfinal.com</u>	<p style="text-align: center;">LICENSED CONTRACTOR Lic No. # _____</p> Name <u>JAS MELWEN</u> Address <u>See contact people</u> City/State/Zip _____ Phone _____ FAX _____ E-mail: _____
<p style="text-align: center;">ARCHITECT/ENGINEER</p> Name <u>Tarlos & Assoc.</u> Address <u>1702 MISSION</u> City/State/Zip <u>IRVINE CA</u> Phone <u>949-250-4117</u> FAX <u>250-1676</u> E-mail: <u>Tarlos@tarlos.com</u>	<p style="text-align: center;">OWNER</p> Name <u>Smart & Final Stores</u> Address <u>600 Citadel</u> City/State/Zip <u>Commerce CA</u> Phone <u>869-7594</u> FAX <u>869-7856</u> E-mail: _____

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

NATURE OF WORK IN DETAIL: REMODEL
Removal of existing 1990's addition of 1990's

OCCUPANT/TENANT: Smart & Final VALUATION: \$ 400,000

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		
				M	VN	SPR ALARM	18	[H]	[Quad]	
(B)	(L)	(P)	(M)	(E)	(F)	(S)	(D)	(PW)	(UTIL)	

COMMENTS: SPRINKLERS DEFERRED OK BY LISA. CUSTOMER TO SUBMIT TO HEALTH DEPT. NO UNDERGROUND UTILITIES

REGIONAL SANITATION FEES? Yes No HEALTH DEPARTMENT? Yes No

WATER FLOW TEST FOR NEW BUILDINGS OR ADDITIONS? Provided Faxed

CITY OF SACRAMENTO
BUILDING INSPECTION DIVISION
APPLICATION FOR BUILDING PERMIT - HAZARDOUS MATERIAL SURVEY

As Required by Assembly Bill #3205 - A Building Permit Cannot be Approved Without This Completed Form

1. Business Name: SMART + FINAL Phone: (823) 869-7591
Site Address: 6340 STOCKTON BLVD Suite: _____
(Street) (Zip)
Business Owner/Representative: SMART + FINAL Phone: (323) 869-7591
Nature of Business: RETAIL GROCERY
Property Owner: SMART + FINAL Phone: (823) 869-7591
Address: 600 CITADEL DRIVE Suite: _____
(Street)
COMMERCE CA 90040
(City) (State) (Zip)

2. Are you developing an undetermined tenant space? Yes ___ No Is this permit for a shell building? Yes ___ No

Notify lessee of the responsibility to coordinate with the Fire Department regarding the use and handling of hazardous materials.

3. Does/Will your business generate hazardous waste? Yes ___ No

4. Does/Will your business handle, store or transport any solid, liquid, or gaseous chemicals? Yes ___ No

CONSULT THE EPA CHEMICAL LIST LOCATED AT THE BUILDING DIVISION COUNTER FOR HAZARDOUS OR ACUTELY HAZARDOUS MATERIALS TO COMPLETE THE FOLLOWING QUESTIONS.

If you answered "YES" to questions #3 and/or #4 above, continue on to questions 5 - 8.

5. Do you handle, store, or transport 55 gallons, 500 pounds, or 200 cubic feet (at Standard Temperature or Pressure) of a product or formulation containing hazardous materials at any one time? Yes ___ No

6. Do you handle, store or transport any amount of acutely hazardous materials? Yes ___ No

7. Is/Will your business be located within 1,000 feet of a school? Yes ___ No

If you answered "yes" to questions #6 and/or #7, complete the RMPP informational sheet.

8. Is/Will your business be located within 1,000 feet of a hospital, and/or long-term healthcare facility? Yes ___ No

IF YOU ANSWERED "YES" TO QUESTION #3 AND/OR #4, PLEASE CONTACT THE CITY OF SACRAMENTO FIRE DEPARTMENT LOCATED AT 1231 I STREET, SUITE 401, SACRAMENTO, CA OR CALL 449-5416.

Prior to issuance of a certificate of occupancy, each business owner(s) shall contact the City of Sacramento Fire Department and comply with the Health and Safety Code regarding the use and handling of hazardous materials.

PENALTY: Any business that violates Section 25531-25541 of the Health and Safety Code shall be civilly liable to the administering agency in an amount of not more than two thousand dollars (\$2,000) for each day in which the violation occurs. If the violation results in, or significantly contributes to, an emergency, including a fire, the business shall also be assessed the full cost of the city emergency response, as well as the cost of cleaning up and disposing of the hazardous materials. Additional liability and punishment may be assessed for knowing a violation after reasonable notice of the violation.

Applicant's Name: JACK MALVEN
(Print)
[Signature] 10-10-09
(Signature) (Date)

BID Use Only: Plan Ck# _____ Permit # _____	
OK to issue prmt? Y _____	F.D. Appr Req'd? Yes No
init date _____	
Hold on Certificate of Occupancy? Yes No	
Fire Dept. Use Only:	
OK to issue permit? init _____ date _____	
OK to issue Certificate of Occupancy? init _____ date _____	

Date of Request: _____

By: _____

CITY OF SACRAMENTO DEVELOPMENT SERVICES DIVISION
PLANNING AND ZONING INFORMATION REQUEST

Project Address: 6340 Stockton Blvd (actually ^{Revised} 6300 Stockton)

Assessor's Parcel Number: 037-0310-~~026~~ 026

Previous Use: COMMERCIAL retail (Smart & Final)

Description of Request/Proposed Use: BUILDING ADDITION OF
1940 sq ft

Is This a Change of Use? NO

Zoning Designation: ~~C-2~~ C-2

Prior Applications for Project Site(P#, Z#, DRPB#): P87-283; P88-285

Comments: P88-285 is S.P. for sale of beer & wine in grocery store of less than 15,000 sq ft; addition increases total sq ft to beyond 15,000, so S.P. Mod is not necessary as long as alcohol sales remains at less than 10%; see 1R01-079

Are There Any Planning Issues?: (circle one) YES NO

* Staff Site Plan Check Required? (Circle one)

* Field Inspection Required? (Circle one)

* Design Review/Preservation Required?: (Circle one)

AS NOTED ABOVE
YES NO
YES NO
YES NO

Planning Review by/Date: Phil Reed 6/12/01

A list of items that must be reviewed by Planning is provided on the reverse side of this form.

MICROFILM AFTER FINAL

**CONSOLIDATED ENGINEERING
LABORATORIES**

DATE

FIELD(??)

FIELD(1)

FIELD(2)

FIELD(3?)

FIELD(4), FIELD(5), FIELD(6)

**RE: Smart & Final
6340 Stockton Blvd.
Sacramento, CA
CEL #: S1929**

FINAL LABORATORY AFFIDAVIT

THIS IS TO CERTIFY that in accordance with Section 1701 of the Uniform Building Code, Consolidated Engineering Laboratories has provided special inspection and testing on the subject project as listed below:

1. Masonry.
2. Reinforcing Steel.
3. Concrete.
4. Field Welding.
5. Installation of epoxy dowels and all-thread.
6. High strength bolting.

These inspections were performed by personnel under the general supervision of a Registered Civil Engineer in the State of California. Details of our work on this project are contained in our testing and inspection reports, issued during the course of construction.

Based upon the inspections performed and upon our substantiating reports, it is our professional judgement that the inspected work was performed substantially in conformance with the approved plan and specifications, approvals by the Engineer of Record and the applicable workmanship provisions of the Uniform Building Code.

REVIEWING ENGINEER: JAMES M. POWERS, P.E.

cc: Malven Construction

All reports are submitted as the confidential property of clients. Publication of statements, conclusions or extracts is reserved pending our written approval.

Certification of Compliance School District Development Fees

(Print or Type) If Printing, press hard for four copies

PART I To be completed by the APPLICANT (MAY BE FILLED OUT COMPLETELY)

OWNER'S NAME SMART & FINCH INTERIORS INC.
 OWNER'S ADDRESS 600 CITADEL BL. COMMERCIAL 90040
 PROJECT ADDRESS 6940 STOCKTON BL
 PARCEL NUMBER 037-0310-026 LOT NO. _____
 SUBDIVISION NAME _____
 NUMBER OF UNITS ADDITIONAL

Upon payment of the fees listed below, a 90-day approval period commences upon which the applicant paying the fees may protest such fees. Any failure to file such protest within the 90-day period shall result in forfeiture of any rights to challenge such fees, through litigation or otherwise.

APPLICANT'S SIGNATURE [Signature]
 TITLE OF APPLICANT CONSTRUCTION SUPERVISOR
 DATE 11/10/01 PHONE NUMBER 313-867-7591

PART II To be completed by BUILDING DEPARTMENT

PLAN IDENTIFICATION NUMBER C107406
 BUILDING TYPE
 RESIDENTIAL () APARTMENT/CONDOMINIUM () COMMERCIAL/INDUSTRIAL (X)
 SQUARE FEET OF CHARGEABLE BUILDING AREA 1940 SQ FT ADDITION
 SIGNATURE [Signature]
 TITLE BUILDING INSPECTOR (COMMERCIAL) DATE 10-2-01

PART III To be completed by SCHOOL DISTRICT

SCHOOL DISTRICT _____
 DISTRICT CERTIFICATION NO. _____
 EXEMPT _____ COMMENTS _____

RESIDENTIAL/APT/CONDO _____	SQ FT X \$ _____	= \$ _____
COMMERCIAL/INDUSTRIAL _____	SQ FT X \$ _____	= \$ <u>4600</u>
OTHER FEE _____ TYPE _____	SQ FT X \$ _____	= \$ _____
TOTAL FEES COLLECTED _____		= \$ <u>4600</u>

This Certification covers only the amount of square footage indicated above. Any additions or corrections to the square footage for this project will require an amendment to the Certificate of Compliance.

As the authorized school district official, I hereby certify that the requirements of Government Code Section 65995 and any other authorized requirements have been complied with by the above signed applicant.

AUTHORIZED SCHOOL DISTRICT OFFICIAL

NATURE [Signature] DATE 11/10/01

Original: School District 1st copy: School District 2nd copy: Building Department 3rd copy: Applicant

CHECK NO. 480467



PNC Bank, National Association
JEANNETTE, PA

68-162
433

DATE 10/12/2001

Food Supplies Business Home
P.O. Box 512377
LOS ANGELES, CALIFORNIA 90051-0377

PAY ONLY

*****1,358.00

PAY One Thousand Three Hundred Fifty-Eight And NO/100 Dollars

TO THE ORDER OF

SACRAMENTO REGIONAL CO
SANITATION
10545 ARMSTRONG AVE SUITE 101
MATHER CA 95655

[Signature]
Second Signature Required \$50,000 and Over

⑈480467⑈ ⑆043301627⑆ 1004388633⑈



Sacramento Regional
County Sanitation
District

0545 Armstrong Avenue
Suite 101
Mather, California
95655

Office: (916) 876-6100
Fax: (916) 876-6161
www.srcsd.com

Customer Service:
Sewer Fees,
Permitting Information,
Sewer Service Locations

Technology in balance with nature

Stamp: *[Signature]*
OCT 15 2001
BY: *[Signature]*

COUNTY SANITATION DISTRICT NO. 1
SACRAMENTO REGIONAL COUNTY SANITATION DISTRICT
SEWER IMPACT FEE
PERMIT AND CALCULATION SHEET

APPLICATION NO:	BLDG PERMIT <i>SWD2001-00712</i>
GENERAL INFORMATION	THIS PERMIT GOOD ONLY WHEN VALIDATED BY THE CASHIER
<i>City of Sac</i> <i>Act # 0107406</i>	THIS PERMIT TO CONNECT EXPIRES ONE YEAR FROM DATE OF ISSUANCE
FEE CALCULATION	BUILDING USE
INSPECTION	RESIDENTIAL SF <input type="checkbox"/> MF <input type="checkbox"/>
CSD-1	COMMERCIAL USE UNITS
SRCS D <i>1358-</i>	<i>19764</i>
CONSTRUCTION	<i>store addn</i>
IN-LIEU	
TOTAL FEE <i>1358-</i>	
APN: <i>037-0310-023</i>	
DESCRIPTION/ SUBDIVISION	LOT:
PROPERTY ADDRESS <i>16340 Stockton Blvd</i>	
OWNER <i>SMART & FINAL</i>	
MAILING ADDRESS	
CITY-STATE-ZIP	PHONE
ADDITIONAL FEES MAY BE DUE IF CHANGES IN USE INCREASE SEWER IMPACT.	
APPLICANT SIGNATURE	
CONSOLIDATED UTILITY BILLING USE ONLY	
ACCT _____	INPUT _____ START _____