

CITY OF SACRAMENTO

1231 I Street, Sacramento, CA 95814

Permit No: 0412164

Insp Area: 1

Thos Bros: 297C3

Site Address: 515 L ST SAC

Parcel No: 006-0087-051

2ND FLOOR

Sub-Type: COM

Housing (Y/N): N

CONTRACTOR

OWNER

ARCHITECT

CITY OF SACRAMENTO
SACRAMENTO CA
99998

Nature of Work: Construct 2 - sites for haunted houses 2nd floor.

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 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 7/28/04 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 7/28/04 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 Policy Number Exp Date

(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 the provisions.

Date 7/28/04 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**  
**PLANNING & BUILDING DEPARTMENT**  
 1231 I Street, Suite 200 or 2101 Arena Bl., 200  
 Sacramento, CA 95814 Sacramento, CA 95834  
 (916) 264-5656, 1-866 EZ PERMIT or www.cityofsacramento.org

<b>ACTIVITY #</b> <span style="font-size: 1.5em; font-family: cursive;">0412164</span>	<b>Insp. Area</b>
---	-------------------

*Applicant to complete all areas down to valuation*

**ADDRESS** 515 L St. **Suite** \_\_\_\_\_  
**PARCEL #** \_\_\_\_\_

<p style="text-align: center;"><b>CONTACT</b></p> <p>Name <u>MONSTER MAGIC LLC</u>                  Street Address <u>1556 Fulton Ave #247</u>                  City/State/Zip <u>Santa Clara, CA 95051</u>                  Phone <u>408-297-7500</u> FAX <u>408/271-8608</u>                  E-mail: <u>adam@monstermagic.com</u></p>	<p style="text-align: center;"><b>LICENSED CONTRACTOR</b> Lic No. # _____</p> <p>Name _____                  Address _____                  City/State/Zip _____                  Phone _____ FAX _____                  E-mail: _____</p>
<p style="text-align: center;"><b>ARCHITECT/ENGINEER</b></p> <p>Name _____                  Address _____                  City/State/Zip _____                  Phone _____ FAX _____                  E-mail: _____</p>	<p style="text-align: center;"><b>OWNER</b></p> <p>Name <u>CITY OF SAC.</u>                  Address _____                  City/State/Zip _____                  Phone _____ FAX _____                  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:** Construct 2 sites for haunted houses - 2<sup>nd</sup> floor

**OCCUPANT/TENANT:** \_\_\_\_\_ **VALUATION: \$** \_\_\_\_\_

<b>FLOOD STATUS</b>						<b>S.C.A.T.</b>			
<b>JOB DESCRIPTION</b> BLDG <input type="checkbox"/> SHELL <input type="checkbox"/> APT <input type="checkbox"/> TI ( ) <input type="checkbox"/> REM ( ) <input type="checkbox"/> SW <input type="checkbox"/> FIRE <input type="checkbox"/> ADD <input type="checkbox"/> OTHER <input type="checkbox"/>									
<b>INSPECTION DISCIPLINES</b>			BLDG	MECH	PLUMB	ELEC	SITE	FIRE	
# Stories	1 <sup>st</sup> flr Area	Total Area	Use Zone	Occp Group	Const type	Fire Req. Y / N		Fed Code	Vio. File
						SPR	ALARM		
<u>B</u>	L	P	M	<u>E</u>	F	S		D	PW UTIL

**COMMENTS:**  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNER

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1. I personally plan to provide the major labor and materials for construction of the proposed improvement (yes or no) Yours

2. I (have/have not) HAVE signed an application for a building permit for the proposed work.

3. I have contracted with the following person (firm) to provide the proposed construction:

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Telephone \_\_\_\_\_

Contractors License No. \_\_\_\_\_

4. I plan to provide portions of the work, but I have hired the following person to coordinate, supervise, and provide the major work.

Name \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ Telephone \_\_\_\_\_

Contractors License No. \_\_\_\_\_

5. I will provide some of the work but I have contracted (hired) the following to provide the work indicated:

Name	Address	Phone	Type of Work
------	---------	-------	--------------

<u>OWNER DOING THE WORK.</u>			
------------------------------	--	--	--

Signed [Signature]

Job Address 515 L St Date 7-28-04

Permit No.: 0412164

## Fire Safety specifications for GYRO's 3D Fear Factory haunted houses.

These items below should answer most of your questions in regards to our policies in producing over 20 haunted attractions that last 15 years.

### 1. Cloth and combustible treatment

We have a file on site that is readily accessible (can be given to fire marshal on demand). That includes:

- Copy of treatment chemical label
- Our treatment policy
- Cloth samples
- Velon and any other fire retardant material certificates.
- Protocols for fire treatment. (How it is done, when, testing procedures, etc.)
- Log (what treated, when, what protocol, etc.)

### 2. Emergency evacuation plans are posted in the following areas:

- \* Security Base
- \* Staff lounges
- \* Emergency corridors

3. Clear exit signage once in corridors. (We put paint and arrows on walls throughout the entire corridor area and exit)

4. Clear paths to exits. No debris will be left in the exit paths at anytime.

5. A written emergency procedure plan is always left in the security base room.

6. All security personnel and management always carry 2-way radio with them both inside and outside the event. Everyone has a headphone device so it's easy to hear at all times.

7. In case of an emergency, standard scripts are provided to our staff so they can provide the patrons accurate and effective information.

8. A fire drill and evacuation will always take place at the dress rehearsal prior to opening to the public.

*NOT 3 430 - 5:30 TEST*

9. In case of an emergency, house lights can be turned on with 1 switch and in case of a power outage, emergency lights clearly mark the path to all exits.

10. We always have a public phone and a private phone in security base for emergencies. We also post (Emergency telephone available here):

11. We always use EXIT signs that are the proper size letters and are on bright orange paper that are clearly seen both in the dark and the light. These are placed at every emergency exit door.

12. Our direction of travel is clear to all patrons and depending on the specific haunt, we currently let between 7-10 people in the facility every 30 seconds. That quantity of people has worked well for us in providing groups to separate while in the haunts. All our haunts are designed to allow people to go through the maze at their own pace.

13. All fire extinguishers are always a minimum 2A10BC rated and properly mounted in areas throughout the event. They are always marked with reflective tape and marketed clearly on evacuation plan and blueprints.

14. Our shift leads for both haunts carry at all times a mega-phone for emergency purposes. They also are provided the script to use in case of an emergency for evacuation.

15) No smoking signs are displayed throughout all our events in many locations.

16. An occupancy load for each facility will be determined and posted at the entrance of each haunted attraction. The staff will control the flow of patrons at all times.

17. All security and emergency staff carry flashlights with them at all times, before, during and after each event.

# GYRO'S 3-D Fear Factory Sacramento 2004

Event: GYRO's 3-D Fear Factory

Location: Westfield Downtown Plaza  
547 L Steet  
Sacramento Ca 95814

Dates: → October ~~X~~<sup>2</sup> 31st

Times: Sunday-Thursday – 7-10pm  
Friday & Saturday – 7-12 midnight

Prices: 16.95

Tickets available: Internet and at the door  
Group sales available

Web page: [www.3dfearfactory.com](http://www.3dfearfactory.com)

Information phone #'s: info line – 888-939-GYRO

Attraction details: 2 Haunted Houses (Rigimortis and Eternal Darkness) and a Pirates Museum

Emergency Phone #'s  
Office – 888-260-1300  
Producer Dan Nelson – 408-425-8303 / 626-3760.672 *Blake*  
Asst. to Producer Melody Slater – 408-772-6340

Address of producer 1850 South 10<sup>th</sup> st San Jose Ca 95112

*ETERNAL DARKNESS - HAS TWO PHASES  
WILL NEED INSPECTION IN SEPT, AROUND THE 10<sup>TH</sup>  
CONTACT STEVE OR JIM OF FIRE AS BUILDING AND  
ELECTRICAL PERMIT IS COMPLETE TO ISSUE  
EVENT PERMIT.*