

**CITY OF SACRAMENTO**  
1231 I Street, Sacramento, CA 95814

**Permit No: 0313907**

**Insp Area: 1**

**Thos Bros: 297 C4**

**Site Address: 555 CAPITOL ML SAC St: #100**  
Parcel No: 006-0145-025 STE 100

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

**CONTRACTOR**  
HMH BUILDERS INC  
CALPO HOM AND DONG ARCH.  
20 BUSINESS PARKWAY  
SACRAMENTO, CA 95828

**OWNER**  
DOWNTOWN PLAZA TOWERS ASSOCIATES  
  
555 CAPITOL ML  
SACRAMENTO CA 95814

**ARCHITECT**  
  
2150 CAPITOL AVE #200  
SACRAMENTO CA 95816

**Nature of Work: INTERIOR REMODEL FOR STE 100**

**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 Y 41B License Number 780999 Date Y 12/15/03 Contractor Signature X Soto

**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 Y 12/15/03 Applicant/Agent Signature X Soto

**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 ZURICH AMERICAN INSU. CO. Policy Number 3696719-00

**PAID**  
**CITY OF SACRAMENTO**  
**DEC 15 2003**  
**NORTH PARK CENTER**  
Exp. Date 06/01/2004

\_\_\_\_\_, (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 Y 12/15/03 Applicant Signature X Soto

**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

30 DAY TEMPORARY  
**Certificate of Occupancy**  
For Information Contact (916) 264-5716

Building Address: 555 CAPITOL ML #100 Permit No.: 0313907  
Building Use: REMODEL/COPY ROOM Occupancy: B  
Building Owner: DOWNTOWN PLAZA TOWERS ASSOC. Construction Type: 1FR  
Owner Address: SACRAMENTO, CA Sprinkled?  Yes  No  
Portion of Building Occupied: SUITE 100 Area: 12500 Sq. Ft.

Specific purpose for temporary occupancy and/or conditions/limitations of temporary occupancy:

1/6/04 Date By: (Print)  Sign **DENNIS RICHARDSON**  
CHIEF BUILDING OFFICIAL

[TCO approvals:DSP,SLG,DJP,RR ]

***CBC 109.4 TEMPORARY CERTIFICATE***

*If the Chief Building Official finds that no substantial hazard will result from occupancy of any building or portion thereof before the same is completed, a temporary Certificate of Occupancy may be issued for the use of a portion or portions of a building or structure prior to the completion for the entire building or structure.*

**POST IN A CONSPICUOUS PLACE**

**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> <u>0313907</u>	<b>Insp. Area</b>
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Applicant to complete all areas down to valuation

**ADDRESS** 555 CAPITOL MALL Suite 100  
**PARCEL #** \_\_\_\_\_

<b>CONTACT</b> Name <u>JOEL DYER</u> Street Address <u>15 BUSINESS PARK WAY</u> City/State/Zip <u>SACRAMENTO, CA 95828-0912</u> Phone <u>388-9126</u> FAX <u>388-9195</u> E-mail: <u>jdyer@hmb.com</u>		<b>LICENSED CONTRACTOR</b> Lic No. # <u>780999</u> Name <u>HARBISON-MAHONY-HIGGINS BUILDERS, INC.</u> Address <u>15 BUSINESS PARK WAY SUITE 101</u> City/State/Zip <u>SACRAMENTO, CA 95828-0912</u> Phone <u>383-4825</u> FAX <u>383-6014</u> E-mail: _____	
<b>ARCHITECT/ENGINEER</b> Name <u>CALPO HOH &amp; DONG (TREVOR SMITH)</u> Address <u>2150 CAPITOL AVE SUITE 200</u> City/State/Zip <u>SACRAMENTO, CA 95816</u> Phone <u>446-7741</u> FAX <u>446-0457</u> E-mail: _____		<b>OWNER</b> Name <u>PLAZA TOWERS ASSOCIATES</u> Address <u>555 CAPITOL MALL SUITE #240</u> City/State/Zip <u>SACRAMENTO, CA 95814</u> Phone <u>444-2000</u> FAX <u>444-8016</u> E-mail: _____	

→ Will permittee have any employees on the jobsite?  No  Yes → **INSURANCE CO:** Zurich American Insurance Co.  
 → **WORKER'S COMPENSATION POLICY #** WC 3696719-01 **EXPIRATION DATE:** 8/1/04

**NATURE OF WORK IN DETAIL:** DEMO EXISTING LOW WALLS, CARPET.  
INSTALL NEW CARPET, WALLS,

**OCCUPANT/TENANT:** CB Richard Ellis **VALUATION:** \$420,000

<b>FLOOD STATUS</b>						<b>S.C.A.T.</b>							
<b>JOB DESCRIPTION</b>		<input type="checkbox"/> 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>		<b>BLDG</b>		<b>MECH</b>		<b>PLUMB</b>		<b>ELEC</b>		<b>SITE</b>		<b>FIRE</b>	
<b># Stories</b>	<b>1<sup>st</sup> flr Area.</b>	<b>Total Area</b>	<b>Use Zone</b>	<b>Occp Group</b>	<b>Const type</b>	<b>Fire Req.</b> <input checked="" type="checkbox"/> N <input type="checkbox"/> S		<b>Fed Code</b>		<b>Vio. File</b>			
<u>15</u>		<u>12500</u>		<u>B</u>	<u>1-FR</u>	<input checked="" type="checkbox"/> SPR <input checked="" type="checkbox"/> ALARM	<u>15</u>						
<b>B</b>	<b>L</b>	<b>P</b>	<b>M</b>	<b>E</b>	<b>F</b>	<b>S</b>		<b>D</b>	<b>PW</b>	<b>UTIL</b>			

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