

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

**Permit No: 0005870**  
**Insp Area: 4**

**Site Address: 1545 RIVER PARK DR SAC**  
Parcel No: 277-0286-029 STE 350

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

CONTRACTOR  
HARBISON-MAHONY-HIGGINS INC  
8589 THYS CT  
SAC CA 95828

OWNER  
PAULSEN PETER H  
4000 MOORPARK AV 106  
SAN JOSE CN CA 95117

ARCHITECT

**Nature of Work:** INT. OFFICE REMODEL. TO EXPAND OFFICES 3,071 SQ

**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.

X License Class A+B License Number 280934 Date 7-12-00 Contractor Signature Ray Barnes

**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.

X Date 7-12-00 Applicant/Agent Signature Ray Barnes

**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.

X SB 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 FUND

Policy Number 1574010

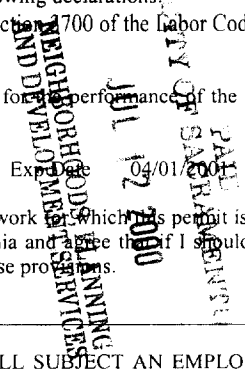
Expires 04/01/2000

\_\_\_\_ (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.

X Date 7-12-00 Applicant Signature Ray Barnes

**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.**



\*\*\*DUPLICATE\*\*\*

: 05/31/2000 041 AMR  
TE: 05/31/2000 4:22PM 00000033  
F#: 00058700 SHT COM BLDG PT  
OSPLAN CK-COMM'L \$811.00

# FOR COMMERCIAL BUILDING PERMIT

ANGE

\$811.00  
\$0.00

ACTIVITY # <b>0005870</b>	Insp. Area <b>4C</b>
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1231 I Street, Rm 200  
Sacramento, CA 95814 (916) 264-7619 FAX 264-7046

Applicant **MUST** complete ALL Unshaded areas

ADDRESS 1545 River Park drive Suite 350  
PARCEL # 277-0286-029

<b>CONTACT</b> Name <u>Steve Nast</u> Street Address <u>same as Contractor</u> City/State/Zip _____ Phone _____ FAX _____ E-mail: _____		<b>LICENSED CONTRACTOR</b> Lic No. # <u>280934</u> Name <u>Harbison Mahony Higgins Inc</u> Address <u>8589 Thys Court</u> City/State/Zip <u>Sacramento, CA 95828</u> Phone <u>916 383-4825</u> FAX <u>916 383 6014</u> E-mail: _____	
<b>ARCHITECT/ENGINEER</b> Name <u>Nielson &amp; Assoc / Cont. Dick Nielson</u> Address <u>550 Howe Ave Suite 150</u> City/State/Zip <u>Sacramento, CA 95825</u> Phone <u>916 925-0333</u> FAX <u>916 925-8608</u> E-mail: _____		<b>OWNER</b> Name <u>Speiker Properties / Cont. Jason Goff</u> Address <u>1610 Arden Way Suite 298</u> City/State/Zip <u>Sacramento, CA 95815</u> Phone <u>916 921-5600</u> FAX <u>916 921-5655</u> E-mail: _____	

→ Will permittee have any employees on the jobsite?  No  Yes → INSURANCE CO: State Fund  
→ WORKER'S COMPENSATION POLICY # 1574010-00 EXPIRATION DATE: 04/01/01

NATURE OF WORK IN DETAIL: Demolition & Construction of new tenant improvements including new interior walls & finishes, approx. 3071 square feet.

OCCUPANT/TENANT: Tate, Propp, Beggs & Sugimoto VALUATION: \$ 90,000.00

FLOOD STATUS: <u>n/a</u>		S.C.A.T.								
JOB DESCRIPTION		BLDG	SHELL	APT	TI( )	REM( <input checked="" type="checkbox"/> )	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES		<u>BLDG</u>	<u>MECH</u>	<u>PLUMB</u>	<u>ELEC</u>	SITE	<u>FIRE</u>			
# Stories	1st flr Area.	Total Area	Use Zone	Occp Group	Const type	Fire Req. <u>V/N</u>	Fed Code	Vio. File		
<u>5</u>				<u>D</u>	<u>II 1 hr</u>	<u>SPR</u> <u>ALARM</u>	<u>15</u>	[H]	[Quad]	
<u>B</u>	<u>L</u>	<u>P</u>	<u>M</u>	<u>R</u>	<u>F</u>	<u>S</u>	<u>D</u>	PW	UTIL	

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

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: Tate, Proprietors, Belgis, & Sacramento Phone: \_\_\_\_\_

Site Address: 1545 River Blvd Dr (Street) HMH Business Owner/Representative: Ray Barner Phone: 202-4925 (Zip)

Nature of Business: Tenant Improvement Property Owner: Speaker Properties Phone: \_\_\_\_\_

Address: 2200 Rowell St #325 Suite: \_\_\_\_\_ (Street) CA (City) 94208 (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

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 questions # 6 and/or # 7, complete the RMPF informational sheet.

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: Ray Barner (Print) Ray Barner (Signature) 7-12-00 (Date)

BID Use Only: Plan CK# 200567 OK to issue permit?  F.D. Appr Req'd?  Yes No

Hold on Certificate of Occupancy?  Yes No

Fire Dept. Use Only: OK to issue permit?  OK to issue Certificate of Occupancy?  7.12.00 date

CITY OF SACRAMENTO

**CERTIFICATE OF OCCUPANCY**

For Information Contact (916) 264-5716

Building Address: 1545 RIVER PARK DR #350 Permit No. 00-05870

Building Use: OFFICE Occupancy: B

Building Owner: SPIEKER PROPERTIES SAC Construction Type: II-1HR

Owner Address: 1610 ARDEN WY #298 SAC Sprinkled? [] Yes [] No

Portion of Building Occupied: SUITE 350 Area: 3071 Sq. Ft.

9/7/00 D. Hey [Signature] **DENNIS RICHARDSON**  
Date By:Print Sign CHIEF BUILDING OFFICIAL

[ Finaled By: ]

*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**