

CITY OF SACRAMENTO
1231 I Street, Sacramento, CA 95814

Permit No: 0102300
Insp Area: 1

Site Address: 2830 G ST SAC
Parcel No: 003-0204-010 2ND FLOOR

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

CONTRACTOR

OWNER

ARCHITECT

ASHWILL N BRUCE/BARBARA E
3430 ROBIN LN #4
CAMERON PARK CA 95682

Nature of Work: INT OFFICE REMODEL

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.

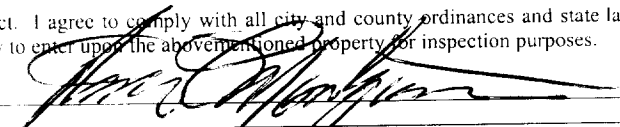
I, as owner of the property, am exclusively contracting with licensed contractors to construct the project (Sec. 7044, Business and Professions Code). The Contractors License Law does not apply to an owner of property who builds or improves thereon, and who contracts for such project with a contractor(s) licensed pursuant to the Contractors License Law.

I am exempt under Sec. _____ B & PC for this reason: _____

Date 3-3-01 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 3-13-01 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 those provisions.

Date 3-13-01 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.

CITY OF SACRAMENTO

CERTIFICATE OF OCCUPANCY

For Information Contact (916) 264-5716

Building Address: 2830 G ST #200 Permit No. 0102300

Building Use: OFFICE DBA: REGIONAL TRANSIT Occupancy: B

Building Owner: ASHWILL BRUCE/BARBARA Construction Type: V-N

Owner Address: 3430 ROBIN LN #4 CAMERON PARK Sprinkled? [] Yes [] No

Portion of Building Occupied: SUITE 200 Area: _____ Sq. Ft.

7/23/01 W. J. Richardson DENNIS RICHARDSON
Date By:Print Sign CITY BUILDING OFFICIAL

[Finaled By: DP, MJS, JZB, GRS]

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 # 0102300	Insp. Area 1C
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Applicant **MUST** complete ALL Unshaded areas

ADDRESS 2830 G. STREET Suite 200
 PARCEL # 003-0204-010

CONTACT Name <u>RICHARD MONTGOMERY</u> Street Address <u>3151 CAMERON PARK DR #105</u> City/State/Zip <u>CAMERON PARK, CA 95682</u> Phone <u>916/635-2611</u> FAX <u>530/677-3528</u> E-mail: _____		LICENSED CONTRACTOR Lic No. # _____ Name _____ Address <u>O/B</u> City/State/Zip _____ Phone _____ FAX _____ E-mail: _____	
ARCHITECT/ENGINEER Name <u>D. CONNOR FREELAN</u> Address <u>1412 F ST, SUE 120</u> City/State/Zip <u>SACRAMENTO, CA 95814</u> Phone <u>916/441-5721</u> FAX <u>916/441-5071</u> E-mail: _____		OWNER Name <u>D. PRICE KESTICOLL</u> Address <u>3151 CAMERON PARK DR, #105</u> City/State/Zip <u>CAMERON PARK, CA 95682</u> Phone <u>916/635-2611</u> FAX <u>530/677-3528</u> E-mail: _____	

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

NATURE OF WORK IN DETAIL: DEPART DISAPPROVALS TO 6300 SQ FT ON SECOND FLOOR OF EXISTING TWO STORY BUILDING

\$132,000

OCCUPANT/TENANT: REGIONAL TRANSIT VALUATION: \$ 135,000.00

FLOOD STATUS:		S.C.A.T. <u>201</u>							
JOB DESCRIPTION	BLDG	SHELL	APT	TI ()	REM (X)	SW	FIRE	ADD	OTH
INSPECTION DISCIPLINES	<u>BLDG</u>	<u>MCH</u>	<u>PLUMB</u>	<u>ELEC</u>	<u>SITE</u>	<u>FIRE</u>			
# Stories <u>2</u>	1st flr Area	Total Area <u>6300</u>	Use Zone	Occp Group <u>B</u>	Const type <u>UN</u>	Fire Req <u>Y/N</u>	Fed Code <u>15</u>	Vio. File [H] [Quad]	
<u>B</u>	<u>L</u>	<u>X</u>	<u>X</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

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

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 of no) _____
2. I ~~(have)~~ have not) _____ 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 HENRY BROUSEL Address Box 437

City CAVILLO, CA Telephone 916/599-4483

Contractors License No. B 452522

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
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Signed 

Job Address 2830 G ST

Permit No: 01-02300

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: REGIONAL TRADING Phone: _____
 Site Address: 2830 G STREET, SACRAMENTO Suite: 202
(Street) (Zip)
 Business Owner/Representative: DEAN MONTGOMERY Phone: 916/688-2411
 Nature of Business: ENGINEERING DEPARTMENT
 Property Owner: N. POPPUS AUSTWILL Phone: 916/688-2411
 Address: 3181 CAMERON PARK DRIVE Suite: 102
CAMERON PARK CA 95608
(City) (State) (Zip)

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

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 X

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

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: DEAN MONTGOMERY
(Print)
[Signature] 3/26/
(Signature) (Date)

BID Use Only: Plan Ck# <u>10230</u> Permit # <u>11230</u>	
OK to issue prmt? <u>Y</u>	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 _____

0102300

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: REGIONAL TRAVEL Phone: _____
Site Address: 2830 G STREET, SACRAMENTO Suite: 302
(Street) (Zip)
Business Owner/Representative: DEBRA MONTGOMERY Phone: 916/688-2611
Nature of Business: ENGINEERING DEPARTMENT
Property Owner: Mr. PETER ASHWILL Phone: 916/688-2611
Address: 3181 CAMERON PARK DRIVE Suite: 105
CAMERON PARK CA 95608
(City) (State) (Zip)

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

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 X

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

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:

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Applicant's Name: DEBRA MONTGOMERY
(Print)
[Signature] 3/12/07
(Signature) (Date)

BID Use Only: Plan Ck# <u>0102300</u> Permit # <u>0102300</u>
OK to issue prmt? <u>(Y)</u> <u>123</u> <u>3130</u> F.D. Appr Req'd? Yes No init date
Hold on Certificate of Occupancy? Yes <u>No</u>
Fire Dept. Use Only:
OK to issue permit? init ___ date ___
OK to issue Certificate of Occupancy? init ___ date ___



Aborn Powers, Inc. Real Estate

Corporate Office

3181 Cameron Park Drive, Suite 105
Cameron Park, CA 95682-7980
(530) 677-2945
(530) 677-3528 Fax

March 13, 2001

Building Department
City of Sacramento
1231 I Street
Sacramento, CA 95814

Re: Permit #0102300 for 2830 G Street, Sacramento, CA (Regional Transit)

Gentlemen:

This letter is in response to a telephone call from Barbara Larson of the Building Department requesting a letter of authorization for Richard Montgomery of Sheffield Ltd. to pick up the referenced permit for N. Bruce Ashwill.

Mr. Ashwill is vacationing in Mexico and I as his agent in fact do hereby authorize Mr. Montgomery to pickup the permit. Mr. Ashwill's Power of Attorney, a copy of which is enclosed, provides my authority.

Sincerely,

A handwritten signature in black ink, appearing to read 'L. Prichard', written over a large, stylized flourish.

Lauren Prichard
Vice President
Sheffield Ltd.

Enclosure

Real Estate Offices

49 Placerville Drive
Placerville, CA 95667
(530) 295-2900

6454 Pony Express Trail
Pollock Pines, CA 95726
(530) 647-7300

GENERAL POWER OF ATTORNEY

I, N. Bruce Ashwill, residing at PO Box 180, Shingle Springs, California 95682, hereby appoint Lauren E. Prichard of 5641 Big Canyon Road, Shingle Springs, CA 95682, as my Attorney-in-Fact ("Agent").

If my Agent is unable to serve for any reason, I designate Cabot N. Ashwill, of 5601 Raymond Ct., Shingle Springs, CA 95682, as my Successor Agent.

I hereby revoke any and all general powers of attorney that previously have been signed by me.

My Agent shall have full power and authority to act on my behalf. This power and authority shall authorize my Agent to manage and conduct all of my affairs and to exercise all of my legal rights and powers, including all rights and powers that I may acquire in the future. My Agent's powers shall include, but not be limited to, the power to:

1. Open, maintain or close bank accounts (including, but not limited to checking accounts, savings accounts, and certificates of deposit), brokerage accounts, and other similar accounts with financial institutions.
 - a. Conduct any business with any banking or financial institution with respect to any of my accounts, including but not limited to, making deposits and withdrawals, obtaining bank statements, passbooks, drafts, money orders, warrants, and certificates or vouchers payable to me by any person, firm, corporation or political entity.
 - b. Perform any act necessary to deposit, negotiate, sell or transfer any note, security, or draft of the United States of America, including U.S. Treasury Securities.
 - c. Have access to any safety deposit box that I might own, including its contents.
2. Sell, exchange, buy, invest, or reinvest any assets or property owned by me. Such assets or property may include income producing or non-income producing assets and property.
3. Purchase and/or maintain insurance, including life insurance upon my life or the life of any other appropriate person.

4. Take any and all legal steps necessary to collect any amount or debt owed to me, or to settle any claim, whether made against me or asserted on my behalf against any other person or entity.

5. Enter into binding contracts on my behalf.

6. Exercise all stock rights on my behalf as my proxy, including all rights with respect to stocks, bonds, debentures or other investments.

7. Maintain and/or operate any business that I may own.

8. Employ professional and business assistance as may be appropriate, including attorneys, accountants, and real estate agents.

9. Sell, convey, lease, mortgage, manage, insure, improve, repair, or perform any other act with respect to any of my property (now owned or later acquired) including, but not limited to, real estate and real estate rights (including the right to remove tenants and to recover possession). This includes the right to sell or encumber my homestead as described on the attached Exhibit A.

10. Prepare, sign, and file documents with any governmental body or agency, including but not limited to, authorization to:

- a. Prepare, sign and file income and other tax returns with federal, state, and local and other governmental bodies.
- b. Obtain information or documents from any government or its agencies, and negotiate, compromise, or settle any matter with such government or agency (including tax matters).
- c. Prepare applications, provide information, and perform any other act reasonably requested by any government or its agencies in connection with governmental benefits (including military and social security benefits).

This Power of Attorney shall be construed broadly as a General Power of Attorney. The listing of specific powers is not intended to limit or restrict the general powers granted in this Power of Attorney in any manner.

Any power or authority granted to my Agent under this document shall be limited to the extent necessary to prevent this Power of Attorney from causing (i) my income to be taxable to my Agent, (ii) my assets to be subject to a general power of appointment by my Agent, and (iii) my Agent to have any incidents of ownership with respect to any life insurance policies that I may

own on the life of my Agent.

My Agent shall not be liable for any loss that results from a judgment error that was made in good faith. However, my Agent shall be liable for willful misconduct or the failure to act in good faith while acting under the authority of this Power of Attorney.

I authorize my Agent to indemnify and hold harmless any third party who accepts and acts under this document.

My Agent shall not be entitled to any compensation, during my lifetime or upon my death, for any services provided as my Agent. My Agent shall be entitled to reimbursement of all reasonable expenses incurred in connection with this Power of Attorney.

My Agent shall provide an accounting for all funds handled and all acts performed as my Agent, if I so request or if such a request is made by any authorized personal representative or fiduciary acting on my behalf.

This Power of Attorney shall become effective immediately. This Power of Attorney shall continue effective until June 30, 2001. This Power of Attorney may be revoked by me at any time by providing written notice to my Agent.

Dated Jan 26, 2001, at Cameron Park, California,

Signature:



N. Bruce Ashwill

State of California

County of El Dorado

On January 29, 2001 before me, Maureen Valdes-Marsh, personally appeared N. Bruce Ashwill,

personally known to me

- OR -

proved to me on the basis of satisfactory evidence

to be the person whose name is subscribed to the within instrument and acknowledged to me that he/~~she~~ executed the same in his/~~her~~ authorized capacity, and that by his/~~her~~ signatures on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal.



Maureen Valdes Marsh
Signature of Notary

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT
FROM: Troy Malaspino
Fire Marshal
SUBJECT: FIRE SYSTEM INSPECTION

DATE: 7-17-01

A final inspection of the newly installed fire system at:

2830 G ST

Has been conducted by Inspector

C. Ricks

On

7-12-01

01-02300
Permit Number

8,300
Square Footage

Remodel
Type of Inspection

They system is acceptable by this department.

Ross L. Woodman

By: Ross L. Woodman,
Fire Prevention Officer II

TI-ASJ
F.D. Reference Number

c

MEMORANDUM

SACRAMENTO FIRE DEPARTMENT

TO: BUILDING DEPARTMENT

DATE: 10-5-01

FROM: Troy Malaspino
Fire Marshal

SUBJECT: FIRE SYSTEM INSPECTION

A final inspection of the newly installed fire system at:

2830 G ST #200

Has been conducted by Inspector

F. Johnson

On

10-4-01

01-02300
Permit Number

8,300
Square Footage

Re-medial
Type of Inspection

They system is acceptable by this department.

R. Woodman

By: Ross L. Woodman,
Fire Prevention Officer II

TJ-A29
F.D. Reference Number

